

# Kitsap Public Health District Consent Agenda December 3, 2019

KPHD Contract Number	Their Contract Number	Contractor and Agreement Name	Type of Agreement	Term of Agreement	Amount to District	Amount to Other Agency
1636 Amendment 1 (2042)	NA	Kitsap Public Health Board <i>Employment Agreement</i>	Amendment	Indefinite	\$0	≥\$108,885
<b>Description:</b> Amends the term of the agreement to comply with RCW 70.05.050 making the term of the agreement indefinite in duration unless and until Employee's employment is terminated.						
1636	NA	Kitsap Public Health Board <i>Employment Agreement</i>	Agreement	01/01/2017- 12/31/2019	\$0	\$520,020
<b>Description:</b> Establishes scope and terms of employment, wages and compensation, and parameters for termination of the Health Officer for Kitsap Public Health District. Wages paid to employee assume that the monthly rate for years 2018 and 2019 will be at least that of 2017.						
1749 Amendment 11 (2033)	CLH18248	Washington State Department of Health <i>Consolidated Contract</i>	Amendment	01/01/2018- 12/31/2020	\$66,061	\$0
<b>Description:</b> Adds statements of work for Injury & Violence Prevention (IVP)-Overdose Data to Action, Amends statements of work for NEP-PIC NTA 0237 and Tobacco & Vapor Product Prevention & Control Program. Adds additional \$66,061 for a revised maximum consideration of \$5,705,177.						
2017	NA	Washington State Department of Health <i>Data Sharing Agreement, HEP B &amp; C</i>	Data Sharing Agreement	12/3/2019- 12/02/2024	\$0	\$0
<b>Description:</b> Washington Department of Health to provide case information for all the HBV and HCV cases residing in the local health jurisdictions for the purpose of public health investigations and disease intervention strategies, internal planning and analysis, and presentation and publication involving HBV or HCV.						

<b>2038</b>	NA	<b>Olympic Community of Health</b> <i>Medicaid Transformation</i>	Contract for Services	01/01/2020-12/31/2020	<b>\$120,000</b>	<b>\$0</b>
<b>Description:</b> KPHD epidemiologists to provide expert research and overall management and delivery of OCH's analytic projects to include community health metric analysis, develop dashboards to oversee OCH and partner progress against project milestones, and develop and oversee methods for consistency and data validation.						
<b>2039</b>	KC-022-20	<b>Kitsap County</b> <i>Nurse Family Partnership</i>	Interlocal Agreement	01/01/2020-12/31/2020	<b>\$153,712</b>	<b>\$0</b>
<b>Description:</b> KPHD to deliver nurse home visiting services and provide a bilingual Community Health Worker for outreach and case management of high-risk, low-income mothers and their babies. This project has the goal of preventing mental illness, behavioral problems, and future addiction in young children by intervening with at-risk families.						
<b>PO 20257</b>	NA	<b>Xiologix LLC</b> <i>IT Equipment Purchase</i>	Purchase Order	NA	<b>\$0</b>	\$99,699.20
<b>Description:</b> Purchase of 3 Dell R640 servers and maintenance. Per agency policy; when a Washington State master contract is used to make a purchase greater than or equal to \$50,000, the Administrator shall inform the Board of the purchase at the next regular Board meeting during the consent agenda approval process.						

Green shading indicates agreement was attached for Board reference as it relates to the included amendment.

Blue shading indicates Administrator's notice to the Board for a purchase greater than \$50,000.

Goods or services purchased using a Washington State master contract are exempt from the District's Informal or Formal Competition requirements. Purchases using the master contract are typically completed using a purchase order, so a District contract is typically not required. When a Washington State master contract is used to make a purchase greater than or equal to \$50,000, the Administrator shall inform the Board of the purchase at the next regular Board meeting during the consent agenda approval process.

**AMENDMENT TO THE EMPLOYMENT AGREEMENT**

**Between  
KITSAP PUBLIC HEALTH DISTRICT  
And  
SUSAN TURNER, MD**

Kitsap Public Health District (District) and Susan Turner, MD, (Employee) agree to amend their Employment Agreement which was effective January 1, 2017 (Agreement). The parties mutually agree as follows:

1. Section 2 of the Agreement, Term of Employment, is stricken in its entirety and replaced with the following language:

The Employee's term of employment is indefinite in duration and Employee will serve in the position of Health Officer unless and until Employee's employment is terminated in accordance with Sections 8, 9, or 10 of the Agreement, subject to compliance with RCW 70.05.050.

2. Except as expressly provided in this Amendment, all other terms and conditions of the original Contract, and subsequent amendments, addenda or modifications thereto, remain in full force and effect.
3. This Amendment is effective on the date it is fully executed.

Dated this \_\_\_\_ day of \_\_\_\_\_, 2019      Dated this \_\_\_\_ day of \_\_\_\_\_, 2019

EMPLOYEE

KITSAP PUBLIC HEALTH DISTRICT

\_\_\_\_\_  
Susan Turner, MD, MPH, MS

\_\_\_\_\_  
Commissioner Robert Gelder, Chair  
Kitsap Public Health Board

**EMPLOYMENT AGREEMENT**  
**Between**  
**KITSAP PUBLIC HEALTH BOARD**  
**And**  
**SUSAN TURNER, MD**

The Kitsap Public Health Board (hereinafter referred to as the “Board”) and Susan Turner, MD, (hereinafter referred to as the “Employee”) agree as follows regarding the terms and conditions of the Employee’s employment:

**1. Scope of Employment**

The Board will employ the Employee as the Health Officer of the Kitsap Public Health District (hereinafter referred to as the “District”). The Employee’s duties are more fully described in Attachment A to this Agreement (the District’s Job Classification for Health Officer) and in RCW 70.05. The Employee will use her best efforts, skills, and abilities in performing the duties of such employment.

**2. Term of Employment**

The Employee will serve in the position of Health Officer until her position is modified or terminated in accordance with Section 8 and 9 of this Agreement and RCW 70.05.050. This Agreement is in effect from January 1, 2017, until December 31, 2019.

**3. Compensation of Employee**

(a) Wages. The Employee will be paid at a salary rate of \$14,445 per month effective January 1, 2017 until December 31, 2017. Such salary will be paid subject to applicable deductions and withholdings, and on the District’s regular payroll schedule. Effective January 1, 2018, and annually thereafter for the life of this Agreement, the Employee will receive any wage adjustments, including any cost-of living increases, market adjustments, or general increases, consistent with the adjustments and increases made to the wages of the District’s other non-union exempt-status employees. Additional adjustments to the Employee’s salary are at the discretion of the Board and will be based on evaluations of performance.

(b) Workweek. The basic workweek is 40 hours.

(c) Expenses. The Board will reimburse the Employee for all other work-related expenses incurred during the term of his employment as allowed by and pursuant to the District’s general expense reimbursement policies.

(d) Health Benefits. The Board will provide health care coverage for the Employee in the same manner as provided for the District’s other non-union exempt-status employees.

(e) Leave. The Employee will receive the same leave benefits as outlined in the District’s Personnel Manual for the District’s other non-union exempt-status employees. The Employee may carry over a maximum of three-hundred sixty (360) hours of general leave from one calendar year to the next. The Employee will receive compensation for a maximum of two

hundred and forty (240) hours of accrued, but unused, general leave at the termination of her employment with the District.

(f) Holidays. The Board provides paid leave on the following holidays: New Year's Day, Martin Luther King Jr. Day, President's Day, Memorial Day, Independence Day, Labor Day, Veteran's Day, Thanksgiving Day, Native American Heritage Day, (the Friday after Thanksgiving), Christmas, and one floating holiday of the Employee's choice. If a holiday falls on a Saturday, it shall be observed the preceding Friday. If a holiday falls on a Sunday, it shall be observed on the following Monday.

(g) Retirement Benefits. The Employee will contribute to and receive retirement benefits pursuant to the Washington Public Employees' Retirement System (PERS).

(h) Professional Liability Insurance. The District will provide professional liability coverage for the Employee while acting within the scope of her duties on behalf of the District.

(i) Other Benefits. For the duration of his employment with the District, the Employee will receive other benefits that are provided either currently or in the future to the District's other non-union, exempt-status employees.

#### **4. Performance Review**

The Employee will receive formal performance reviews at one-year intervals for the life of this Agreement.

#### **5. Professional Development**

The Board will reimburse the Employee for the costs associated with attending job-related professional and continuing education training programs as provided in the District's annual budget.

#### **6. Nondiscrimination**

The Employee will comply with all federal, state, and local laws that prohibit discrimination or harassment in employment.

#### **7. Integration**

This Agreement contains the entire agreement concerning the employment of Employee, and supersedes all previous communications, representations, or agreements, either verbal or written, between the parties. The parties stipulate that there are no promises, terms, conditions, representations, or obligations other than those specifically set forth in this document.

#### **8. Termination**

In compliance with RCW 70.05.050, the Board will provide the Employee with written notice of any disciplinary action that may include termination as a sanction. Prior to terminating the Employee, the Board will also provide the Employee with a hearing and an opportunity to be heard regarding any alleged disciplinary infractions or performance issues that may result in termination.

**9. Notice of Employee's Intention to Terminate**

In the event that the Employee terminates her employment with the District for any reason, the Employee agrees to provide the Board with ninety (90) days advance written notice. If the Employee fails to provide the Board with ninety (90) days advance written notice, the Board will not compensate the Employee for the value of any accrued but unused leave in accordance with Paragraph 3(e) of this Agreement.

**10. Notice of Employer's Intention to Terminate**

In the event that the Board terminates the Employee for convenience (as opposed to termination for "just cause"), the Board will provide, in addition to the notice and hearing required under RCW 70.05.050, ninety (90) days advance written notice to the Employee. At the Board's option, the Board may pay the Employee three (3) months of severance pay in lieu of ninety (90) days notice. For the purposes of this Agreement, "just cause" is any reason for which any other District non-union non-exempt employee may be discharged, as more fully described in the District's Personnel Manual in effect at the time of the termination. Employee will not be entitled to severance pay should the Employee be terminated for "just cause" or resign.

**11. Modification**

This Agreement may be amended or modified only in writing by the Board and signed by the current chair of the Board.

**12. Severability**

If any provision of this Agreement is held invalid, the remainder of the Agreement, and the remaining rights and obligations of the parties, shall be construed and enforced as if the Agreement did not contain the invalid part.

**13. Venue**

This Agreement shall be governed by the laws of the State of Washington, both as to interpretation and performance, and any action at law, suit in equity, or other proceeding for the enforcement of this Agreement or any provision thereof shall be instituted only in the courts of the State of Washington, County of Kitsap.

**14. Extraneous Representations**

The Employee has read and understands the whole of the above Agreement and states that no representation, promise, or agreement not expressed in this document has been made to induce the Employee to enter into it.

Dated this 12<sup>th</sup> day of Dec, 2016. Dated this 4 day of Dec, 2016.

**EMPLOYEE**

  
Susan Turner, MD, MPH, MS

**KITSAP PUBLIC HEALTH BOARD**

  
Mayor Becky Erickson, Chair



## KITSAP PUBLIC HEALTH DISTRICT

# CLASSIFICATION

### Attachment A HEALTH OFFICER

#### DEFINITION

Under policy direction from the Kitsap Public Health Board ("Board"), the Health Officer is responsible for and empowered to enforce the provisions of RCW 70.05.070 and other applicable state law. The incumbent is also responsible for overseeing the public health functions of community health assessment, public health policy development, and assurance of health service delivery throughout Kitsap County. The incumbent is expected to apply a thorough and complete knowledge of procedures related to the field of medicine, and local public health programs, laws and regulations, to varied and complex work situations. Duties require innovative leadership and active collaboration with a wide range of strategic partners and stakeholders to address public health issues in a rapidly changing community environment.

#### DISTINGUISHING CHARACTERISTICS

Appointed by and reporting directly to the Board, the incumbent serves as the District's Health Officer, responsible for the powers and duties assigned to the Health Officer under state law. This classification is distinguished from the Administrator who serves as executive secretary and administrative officer for the Board, and who is responsible for administering the operations of the District including such other administrative duties required by the Board, except for duties assigned to the Health Officer as enumerated in RCW 70.05.070 and other applicable state law. Although the Health Officer may delegate some responsibilities to fellow members of the Executive Leadership Team, the powers and duties set forth in RCW 70.05.070 are ultimately the responsibility of the Health Officer. This description reflects the general concept and intent of the classification and should not be construed as a detailed statement of all the work requirements that may be inherent in the position.

#### ESSENTIAL FUNCTIONS

Duties of the Health Officer are specifically delineated in RCW 70.050.070. The Health Officer is responsible and accountable for the performance of those duties in accordance with statutes. Additionally, the Health Officer is responsible to perform such typical duties as listed below:

- Participates in developing, recommending and implementing the District's long-term and short-range goals and objectives.
- Participates as a member of the Executive Leadership Team, overseeing the planning, development, and implementation of District administrative, legal, and personnel policies, procedures, and regulations.
- Participates in assessing the health status of the community. Provides oversight on comprehensive studies of potentially systemic threats to public health; researches, analyzes, compiles, prepares and presents conclusions, reports and recommended actions. Evaluates the causes of communicable diseases; determines appropriate evaluation and intervention strategies.
- Develops and implements public health policy, develops regulations, and provides information and recommendations regarding public health issues and activities.

- Takes actions as necessary to educate the community on public health issues to control and prevent the spread of dangerous, contagious or infectious diseases.
- Provides guidance and leadership in the development of diverse public health promotion and education programs and the prevention of environmental hazards.
- Provides consultation and direction of communicable disease protocols.
- Provides a leadership role in preparedness and response to biological, chemical terrorism.
- Coordinates public health responses with other public health jurisdictions as appropriate, including but not limited to providing short-term Deputy Health Officer coverage in the event of the absence of the Health Officer in another jurisdiction in Washington State, upon the agreement of both jurisdictions.
- Develops and issues public health advisories to medical providers, hospitals, and community agencies, and the public.
- Responds to media inquiries regarding County public health issues, disease outbreaks, and other health-related concerns.
- Consults with physicians in the diagnosis, investigation and treatment of communicable disease.
- Conducts or supervises medical and physical examinations, makes diagnoses and administers treatments as needed. Provides medical oversight of clinical programs. Reviews, revises or writes standing orders and protocols for clinical services.
- Makes recommendations on personnel actions such as hiring, terminations, discipline and size and composition of staff.
- Hires, trains, supervises and evaluates staff; establishes work priorities and performance standards; monitors performance and provides effective feedback.
- Works with staff to correct deficiencies; implements any necessary disciplinary action after appropriate consultation with the Administrator and Human Resources Manager.
- Reviews legislation as it impacts District programs.
- Performs lobbying activities by communicating directly with federal, state and local officeholders directly on official District business and advocating only the District's official position or interest of the District, as assigned by the Board.
- Coordinates resources and services, consults and collaborates with the medical community, hospital medical staff, other health care professionals, policy and advisory boards, and the public.
- Participates in administrative appeals regarding environmental health permit denials.
- Serves on various District and other municipal management teams and related community-wide committees. Provides high-level public health expertise and perspective regarding a wide range of issues.
- Identifies emerging medical and environmental issues and confers with and makes recommendations to appropriate staff on health-related issues.
- Provides public information in a courteous manner and emphasizes public accountability and a positive service approach with staff. Makes oral presentations and functions as District representative at meetings, hearings and conferences.
- Balances fiscal impact, objectives and community input when developing public health strategies, making recommendations and providing advice.
- Participates in the development and implementation of the District budget.
- Reports for scheduled work with regular, reliable and punctual attendance.
- Performs other duties as assigned.



## REQUIRED KNOWLEDGE & ABILITIES

### Knowledge of:

- Principles and practices of public health and the social determinants of health, including current trends in policy, research, treatment, prevention, education and related issues.
- Current principles and practices of public health administration, incorporating knowledge of community health, chronic disease, sanitation, environmental hazards, communicable disease control, epidemiology and emergency preparedness.
- Communicable disease management and mitigation.
- Community needs, resources and organizations related to public health and medical care.
- Current principles and practices of general and preventive medicine; and clinical protocols.
- Major types of services performed and responsibilities in public health and environmental health activities.
- Principles of disaster and emergency preparedness and response, including biological, chemical terrorism and weapons of mass destruction.
- Applicable laws, rules, regulations, ordinances and policies.
- Safety precautions, practices and procedures applicable to public health.

### Ability to:

- Communicate effectively, both orally and in writing, in clear, concise language appropriate for the purpose and parties addressed, including oral presentations before groups on a variety of complex and sensitive public health issues.
- Use tact, discretion and courtesy to gain the cooperation of others and establish and maintain positive, effective working relationships and rapport with physicians, attorneys, media representatives, coworkers, volunteers, representatives of other agencies and businesses, officials and diverse members of the public.
- Demonstrate cultural competency, interacting sensitively, effectively, and professionally with persons from diverse cultural, socioeconomic, educational, racial, ethnic and professional backgrounds, and persons of all ages and lifestyle preferences.
- Fulfill the commitment of the District to provide outstanding and effective customer service.
- Maintain high standards of personal and professional integrity and commitment to quality patient care at the highest level consistent with standards and regulations.
- Assure that absolute confidentiality is maintained as required and sensitive information is handled appropriately.
- Make timely decisions considering relevant factors and evaluating alternatives, exercising discretion and sound independent judgment.
- Read, understand, interpret and apply appropriately the terminology, instructions, policies, procedures, legal requirements and regulations pertinent to area of assignment.
- Organize, prioritize and coordinate work assignments; work effectively in a multi-task environment; take appropriate initiative; apply good judgment and logical thinking to obtain potential solutions to problems; resolve complex public health problems and make major decisions involving the implementation or interpretation of policies and regulations within the scope of knowledge and authority or refer to the appropriate person.
- Initiate, prepare and direct preparation of comprehensive charts, records, reports, materials, correspondence and other documents relevant to area of assignment.
- Proficiently operate computers, related software and other office equipment with sufficient speed and accuracy to accomplish assignments in a timely manner.

- Work effectively in a dynamic environment that is constantly changing, resulting in continually re-evaluating and shifting priorities.
- Work both independently and within a collaborative team-oriented environment; contribute openly, respectfully disagree, understand the ideas of others, listen well and work for consensus.

#### WORK ENVIRONMENT & PHYSICAL DEMANDS

- Work is performed primarily indoors in an office environment, with frequent travel to provide medical services, and to attend meetings, conferences, seminars, etc.
- Requires the ability to communicate with others orally, face to face and by telephone. Requires manual and finger dexterity and hand-eye-arm coordination to write and to operate computers and a variety of general office equipment. Requires mobility to accomplish other desktop work, retrieve files, and to move to various District locations. Requires visual acuity to read computer screens, printed materials, and detailed information. Essential duties may involve occasional kneeling, squatting, crouching, stooping, crawling, standing, bending, and climbing (to stack, store or retrieve supplies or various office equipment).
- Frequently assigned to respond to on-call coverage, including evenings, weekends and holidays.
- Duties require carrying a cell phone or other electronic device as well as being available to work as needed to meet District needs, which may include evenings, weekends and holidays.
- This is an overtime-exempt position, which may require working beyond the normally scheduled workweek, modifying existing work schedules, or flexing hours.
- Duties require carrying a cell phone or other electronic device as well as being on call on a 7/24-hours basis for Regional Duty Officer (RDO) assigned shifts.
- Exposure to individuals from the public who are upset, angry, agitated and sometimes hostile, requiring the use of conflict management and coping skills.
- Frequently required to perform work in confidence and under pressure for deadlines, and to maintain professional composure and tact, patience and courtesy at all times.
- The environment is dynamic and constantly changing, resulting in continually re-evaluating and shifting priorities.
- May be required to stay at or return to work during public health incidents and/or emergencies to perform duties specific to this classification or to perform other duties as requested in an assigned response position. This may require working a non-traditional work schedule or working outside normal assigned duties during the incident and/or emergency.

#### EDUCATION & EXPERIENCE REQUIREMENTS

- Doctor of Medicine or Osteopathy degree and previous related experience in both the medical field and public health field (see license requirement below); and
- Masters degree in Public Health or its equivalent as required in RCW 70.05.051.
- Must be qualified or provisionally qualified in accordance with the standards prescribed in RCW 70.05.051 through 70.05.055

#### LICENSES, CERTIFICATIONS & OTHER REQUIREMENTS

- A valid license to practice medicine and surgery or osteopathic medicine and surgery in Washington State is required.
- Registration with the Drug Enforcement Agency for prescription of controlled substances.

- Performance of job duties requires driving on a regular basis, a valid Washington State driver's license, the use of the incumbent's personal motor vehicle, and proof of appropriate auto insurance.

#### JOB CLASS INFORMATION & DISCLAIMERS

FLSA Status	Exempt
EEO Category	Officials and Administrators
Bargaining Unit Status	Executive Management

Classification History	The "Director of Health/Health Officer" job classification formerly held by one individual was replaced by two classifications, "Administrator" and "Health Officer," effective October 1, 2013
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Adopted	November 5, 2013
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The statements contained herein reflect general details as necessary to describe the principal functions for this job, the level of knowledge and skill typically required and the scope of responsibility, but should not be considered an all-inclusive listing of work requirements. Individuals may perform other duties as assigned including work in other functional areas to cover absences or relief, to equalize peak work periods, or to balance the workload.

The physical demands described above are representative of those that must be met by an employee to successfully perform the essential functions of the job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

**KITSAP PUBLIC HEALTH DISTRICT  
2018 – 2020 CONSOLIDATED CONTRACT**

**CONTRACT NUMBER: CLH18248**

**AMENDMENT NUMBER: 11**

PURPOSE OF CHANGE: To amend this contract between the DEPARTMENT OF HEALTH hereinafter referred to as “DOH”, and KITSAP PUBLIC HEALTH DISTRICT 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:
    - Injury & Violence Prevention (IVP)-Overdose Data to Action - Effective September 1, 2019
  - ☒ Amends Statements of Work for the following programs:
    - NEP-PIC NTA 0237 - Effective January 1, 2018
    - Tobacco & Vapor Product Prevention & Control Program - Effective March 29, 2019
  - ☐ Deletes Statements of Work for the following programs:
2. Exhibit B-11 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-10 Allocations as follows:
  - ☒ Increase of \$66,061 for a revised maximum consideration of \$5,705,177.
  - ☐ Decrease of \_\_\_\_\_ for a revised maximum consideration of \_\_\_\_\_.
  - ☐ No change in the maximum consideration of \_\_\_\_\_.  
Exhibit B Allocations are attached only for informational purposes.
3. Exhibit C-11 Schedule of Federal Awards, attached and incorporated by this reference, amends and replaces Exhibit C-10.

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.

KITSAP PUBLIC HEALTH DISTRICT

STATE OF WASHINGTON  
DEPARTMENT OF HEALTH

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

APPROVED AS TO FORM ONLY  
Assistant Attorney General

**2018-2020 CONSOLIDATED CONTRACT**  
**EXHIBIT A**  
**STATEMENTS OF WORK**  
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**Exhibit A  
Statement of Work  
Contract Term: 2018-2020**

**DOH Program Name or Title:** Injury & Violence Prevention (IVP)-Overdose Data to Action - Effective September 1, 2019

**Local Health Jurisdiction Name:** Kitsap Public Health District

**Contract Number:** CLH18248

**SOW Type:** Original      **Revision # (for this SOW)**

**Period of Performance:** September 1, 2019 through August 31, 2020

<b>Funding Source</b> <input checked="" type="checkbox"/> Federal Subrecipient <input type="checkbox"/> State <input type="checkbox"/> Other	<b>Federal Compliance (check if applicable)</b> <input checked="" type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development	<b>Type of Payment</b> <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
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**Statement of Work Purpose:** Kitsap County Public Health District (KCPHD) will support strategy 9 – Empowering Individuals to Make Safer Choices by coordinating with healthcare providers, behavioral healthcare providers, pharmacies, healthcare systems, and others to participate in building a new syringe exchange network across the community to improve access and engagement in treatment. KCPHD will convene a community meeting to discuss new syringe exchange sites, develop a recommendation for strategic expansion of comprehensive syringe exchange services, implement a feasibility assessment for any new sites and offer technical assistance and support.

**Revision Purpose:** N/A

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only)		Current Consideration	Change Increase (+)	Total Consideration
				Start Date	End Date			
FFY19 OVERDOSE DATA TO ACTION PREV	93.136	333.93.13	77520290	09/01/19	08/31/20	0	50,000	50,000
<b>TOTALS</b>						<b>0</b>	<b>50,000</b>	<b>50,000</b>

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.	Create a new syringe exchange network – engage local healthcare providers, systems, behavioral health, and other community members to partner on improved access to treatment and comprehensive care within the syringe exchange sites.		Progress report: Describe procedures, policies, participation in network and program design. Describe successes, challenges, and ongoing changes to program. Demonstrate how work aligns with Overdose Data to Action (OD2A) logic model.	Quarterly progress reports to DOH for all tasks.  Due Dates: September-November due December 10, 2019. December-February due March 10, 2020.	Monthly invoices for actual cost reimbursement will be submitted to DOH.  Total of all invoices will not exceed \$50,000 through August 31, 2020.
2.	Convene community wide meetings with all partners and potential partners to discuss new syringe exchange sites program development. Recommendation for strategic expansion, develop plan and policy.		Progress report: Report meeting minutes, participation and program development next steps that come out of the meetings. Demonstrate how	March-May due June 10, 2020.	(See Special Billing Requirements below.)

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
			work aligns with OD2A logic model.	June-August final report for this funding period due September 30, 2020.	
3.	Implement a feasibility assessment for new sites. Offer technical assistance and support to each new site. Consult with DOH drug user health and other SSP experts as needed.		Progress report: Share program feasibility assessment plan including description of program (activities, policies, procedures, etc.), indicators, data sources and collection methods, expected outcomes. Demonstrate how work aligns with OD2A logic model.		
4.	Participate in quarterly calls with DOH and grant partners. Share lessons learned and successes. More frequent one on one calls with DOH when needed.		Collaboration with grant partners and DOH to improve statewide efforts to address the opioid/all drug epidemic.		

**\*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 Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at:

<http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf>

**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 [USASpending.gov](http://USASpending.gov) by DOH as required by P.L. 109-282.

**Restrictions on Funds (what funds can be used for which activities, not direct payments, etc.)**

- Subrecipients may not use funds for research.
- Subrecipients may not use funds for clinical care except as allowed by law.
- Subrecipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- Generally, subrecipients may not use funds to purchase furniture or equipment.
- No funds may be used for:
  - Publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.

- In accordance with the United States Protecting Life in Global Health Assistance policy, all non-governmental organization (NGO) applicants acknowledge that foreign NGOs that receive funds provided through this award, either as a prime recipient or subrecipient, are strictly prohibited, regardless of the source of funds, from performing abortions as a method of family planning or engaging in any activity that promotes abortion as a method of family planning, or to provide financial support to any other foreign non-governmental organization that conducts such activities. See Additional Requirement (AR) 35 for applicability (<https://www.cdc.gov/grants/additionalrequirements/ar-35.html>).
- Program funds cannot be used for purchasing naloxone, implementing or expanding drug “take back” programs or other drug disposal programs (e.g. drop boxes or disposal bags), purchasing fentanyl test strips, or directly funding or expanding direct provision of substance abuse treatment programs. Such activities are outside the scope of this NOFO.

**Monitoring Visits (frequency, type)**

DOH program staff may conduct site visits up to twice per funding year.

**Special Billing Requirements**

Billing on an A19-1A invoice voucher must be received by DOH monthly.

**Special Instructions**

**The following funding statement must be used for media (publications, presentations, manuscripts, posters, etc.) created using OD2A funding:**

This publication (journal article, etc.) was supported by the Grant or Cooperative Agreement Number, NU17CE925007, funded by the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention or the Department of Health and Human Services.

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**Exhibit A  
Statement of Work  
Contract Term: 2018-2020**

**DOH Program Name or Title:** NEP-PIC NTA 0237 - Effective January 1, 2018

**Local Health Jurisdiction Name:** Kitsap Public Health District  
**Contract Number:** CLH18248

**SOW Type:** Revision      **Revision # (for this SOW)** 3

**Period of Performance:** January 1, 2018 through September 30, 2019

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

**Statement of Work Purpose:** The purpose of this statement of work is to provide additional resources for investigating and eliminating sources of bacterial pollution in shellfish growing areas in Kitsap County.

**NOTE:** Dates that precede January 1, 2018 are for reference only.

**Revision Purpose:** The purpose of this revision is to reduce the funding amount for Project Management (Task 1) due to spending being less than anticipated and increase funding for vouchers (Task 2) to add five (5) more vouchers, increasing the total from 72 to 77 due to a greater return rate than planned.

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only)		Current Consideration	Change None	Total Consideration
				Start Date	End Date			
PS SSI 1-5 PIC TASK 4	66.123	333.66.12	261K1208	01/01/18	09/30/19	28,805	0	28,805
<b>TOTALS</b>						<b>28,805</b>	<b>0</b>	<b>28,805</b>

**GOALS & MEASURABLE OBJECTIVES**

This simply summarizes key deliverables and measures called out in the tasks below. This table is a component of the FEATS report.

Description (e.g., “shellfish beds reopened”)	Units (e.g. “acres”)	Targets (“number”)
Prioritize DOH closed parcels and prevent new closures due to shoreline hot spots	DOH Closed parcels	15
Number of septic tank pump out vouchers provided	#Vouchers	<del>72</del> 75
Number of onsite sewage system (OSS) failures identified in priority hot spots	OSS failures	
Number of OSS failures corrected in priority hot spots	OSS corrected	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
<b>TASK 0. PROJECT DEVELOPMENT</b> This task must be completed before initiating any other work under this subaward. Work completed prior to the completion of Task 0 will be ineligible for reimbursement under this subaward.					
0.1	<b>Project Spatial Data and Climate Change Assessment</b> In the tasks below Subrecipients will create a detailed project outline and timeline to describe project expectations and outcomes. The detailed project plan will also identify how the objectives of the project will be evaluated, including quantifiable performance measures and targets. DOH will review project to see if actions may have climate change intersections. If there are strong climate change interconnections, DOH will work with the subrecipient on how the project may be developed to be climate resilient. DOH will work with the subrecipient on the plan and establish mutual expectations.  Subrecipients should provide relevant spatial data for their project and this should be identified in the detailed project plan. Subrecipients should consult with technical staff and spatial analysts where appropriate to determine the spatial data, associated metadata, and data storage location that are relevant for the project. All subrecipients should submit project coordinates (latitude, longitude) in decimal degrees.		Project Spatial Data and Climate Assessment	July 15, 2017	Reimbursement up to <b>\$1,760</b> based on actual costs.
0.2	<b>Quality Assurance Project Plan (QAPP) Development</b> Subrecipient will submit a Quality Assurance Project Plan (QAPP) or QAPP waiver using Environmental Protection Agency's (EPA's) National Estuary Program (NEP) guidance for QAPPs. If a QAPP is required, subrecipients will work with the Washington State Department of Ecology's QA Officer to develop and approve the QAPP. Work related to collecting environmental data may not begin until the QAPP or waivers are completed and		QAPP or QAPP waiver	Draft QAPP due within 30 days of subaward	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	approved. See EPA Programmatic Condition #5 in this agreement for more information.				
0.3	<b>Effectiveness Consultation (if necessary)</b> Consult via telephone call with Puget Sound Partnership (PSP) effectiveness team regarding data LHJ is gathering (30 mins). PSP effectiveness team will provide an analysis approach for the Near-Term Actions (NTAs), about a paragraph per project. PSP effectiveness team will provide an analysis of effectiveness of NTAs. Results will be presented to Strategic Initiative Advisory Team (SIAT).		Effectiveness Consultation (if necessary)	March 31, 2019	
<b>TASK 1. Project Management and Reporting</b> This task describes the data collection and reporting requirements associated with this subaward. Maintenance of project records, submittal of payment vouchers, fiscal forms, and progress reports; compliance with applicable procurement, contracting and interlocal agreement requirements; application for, receipt of, and compliance with all required permits, licenses, easements, or property rights necessary for the project and submittal of required performance items. Carry out project in accordance with any completion dates outlined in the agreement. Refer to and comply with all underlying federal terms and conditions.					
1.1	<b>Project Factsheet</b> Create a project factsheet (using included template) and submit it in MS Word with the first quarterly progress report.		Project Fact Sheet	July 15, 2017	Reimbursement up to <del>\$8,325</del> <b>\$7,090</b> based on actual costs.
1.2	<b>Bi-monthly (ConCon invoices are due every 60 days) Invoicing and Progress Summary</b> The subrecipient will email bi-monthly progress summary and invoicing related to project tasks and deliverables to the contract manager. The summary period is synced to inform the Grant Program’s EPA reporting schedule; therefore it is critical that the Project Sponsor submit these summaries to the Grant Program according to the following schedule. Progress Summaries shall include, at a minimum: <ul style="list-style-type: none"><li>A description of the work completed in the last performance period, including total spending by the project sponsor and any partners and any completed deliverables.</li><li>The status and completion date for the project activities and near-term deliverables.</li></ul>		Bi-monthly (every two months) invoice and project summaries.  FEATS will serve as project summary for performance periods that fall on or near FEATS due dates. See FEATS schedule in Task 1.2.1.  <u>Annual Performance Periods:</u>  First Period: January – February  Second Period: March –April (FEATS)	Due annually:  June 15 August 15 October 1 (FEATS) December 15 March 15 (FEATS) May 15 July 15 September 15	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<ul style="list-style-type: none"> <li>Description of any problem or circumstances affecting the completion date, scope of work, or costs.</li> <li>Evidence that all the reporting requirements have been satisfactorily completed (see below).</li> </ul>		Third Period: May – June 30  Fourth Period: July – August  Fifth Period: September – October (FEATS)  Sixth Period: November - December		
1.2.1	<b>Financial and Ecosystem Accounting Tracking System (FEATS)</b> Complete semi-annual FEATS progress reports, as well as a final FEATS report. The final FEATS report, reflecting the final project billing, will be provided during project closeout, after the end of the grant, and will describe the entire project, highlighting project outcomes and discussing lessons learned. See EPA Programmatic Condition #1.		Semi-annual FEATS reports	April 1 October 1  And upon project completion.	
1.2.2	<b>Puget Sound Partnership Required NTA Reporting</b> NTA owners are required to report on the following: <ul style="list-style-type: none"> <li>Implementation status of their actions on a semiannual basis</li> <li>Financial status of their actions on an annual basis</li> </ul>		1. Implementation Status          2. Financial Status	1: March 31-April 28, 2017 November 1-30, 2017 May 1-31, 2018 November 2018 Spring 2019 Upon project/NTA completion or  2.: June 30-August 15, 2017 June 29-August 13, 2018 Upon contract/NTA completion	
1.2.3	<b>STorage and RETrieval and Water Quality eXchange (STORET) Data Reporting</b> STORET refers to an electronic data system for water quality monitoring data developed by EPA. If subrecipients collect any physical, chemical or environmental data (e.g. dissolved oxygen, water temperature, salinity, turbidity,		STORET (if required)	Per FEATS schedule Task 1.2.1	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	pH, phosphorous, total nitrogen, E. coli or Enterococci, and other biological and habitat data) then STORET reporting will be required. Data for an entire calendar year (January 1 – December 31) should be submitted annually. To assist in tracking in STORET, name your project as follows: <b>NEP_2016_(insert organization name)</b> ; the unique project ID needs to be 35 characters or less. Include the STORET ID in the quarterly progress reports.				
1.2.4	<b>Women/Minority-Owned Business (MBE/WBE) Reports</b> MBE/WBE reporting is required annually. This federal reporting is required for assistance agreements where there are funds budgeted for procuring construction, equipment, services and supplies, including funds budgeted for direct procurement by the recipient or procurement under subawards or loans in the “Other” category that exceed the threshold amount of \$150,000., including amendments and/or modifications.		MBE/WBE Reporting	October 15, annually  And upon project completion.	
1.3	<b>Final Project Report</b> A final report will be written by the project owners that describes the methods, results, lessons learned and recommendations for future work. The final report will evaluate the success of achieving the performance measures identified in the detailed project plan. Included with the final project report will be an updated Project Factsheet (see 1.1).		Final Report ( <i>approx. 1-2 pages</i> ) and updated Fact Sheet	And upon project completion.	
<b>TASK 2. POLLUTION IDENTIFICATION AND CORRECTION (PIC) INCENTIVE VOUCHER PROGRAM</b> Provide septic tank pumping/inspections/riser installation vouchers to property owners with gravity flow drain fields within 200 feet of the marine shoreline or shoreline drainage that have no record of pumping or inspection in the past three years, and have not received incentives in the past.					
2.1	Properties with gravity flow drain fields within 200 feet of the marine shoreline or shoreline drainage, that have no record of pumping or inspection in the past three-years and that have not received incentives in the past will be targeted for offer of a voucher.		Septic tank pumping/ inspections/riser installation vouchers distributed  ( <del>72</del> 75 x \$250 per shoreline owner)	Ongoing. Report progress in summaries and FEATS per Task 1.	Reimbursement up to <del>\$18,015</del> <b>\$19,250</b> based on actual costs.

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
<b>TASK 3. BROADER IMPACTS AND COMMUNICATION</b> DOH will work with KPHD to determine targeted audience and ensure purpose of communication is clear.					
3.1	The subrecipient will submit high-quality project photos or video clips of the project (process, progress, etc.). Ensure anyone in the photo or video has signed a release in case photos or videos are used for future publications.		a) Submit high-quality project photos or video clips of the project (process, progress, etc.). b) Meet with Puget Sound Institute/Encyclopedia for Puget Sound staff at project initiation.	a) With final report  b) Project initiation	Reimbursement up to <b>\$705</b> based on actual costs.

**\*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 Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at:

<http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf>

BUDGET	
Category	Amount
Personnel/Salaries	<del>\$5,250</del> \$4,600
Fringe Benefits	<del>\$2,404</del> \$2,205
Travel	0
Equipment (federal definition)	0
Supplies	0
Subawards Name and amount each	0
Other Describe: Septic Pump Vouchers	<del>\$18,015</del> \$19,250
<b>Total Direct Charges</b>	<del>\$25,666</del> \$26,055
Indirect Charges (federally approved rate)	<del>\$3,139</del> \$2,750
<b>TOTAL</b>	<b>\$28,805</b>

**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 [USASpending.gov](http://USASpending.gov) by DOH as required by P.L. 109-282.

#### **Program Manual, Handbook, Policy References**

Shoreline Monitoring Plan, Kitsap Public Health District Pollution Identification and Correction Program, December 2015.

#### **Special References**

WAC 246-272A, RCW 70.118A, Puget Sound Action Agenda, Interim PIC Program Protocols

Federal funds from the Environmental Protection Agency (EPA) National Estuary Program (NEP) Account must be used to implement elements and activities of the local on-site sewage management plans that do not conflict with and are consistent with the goals, strategies, objectives, and actions of the Puget Sound Action Agenda.

#### **Monitoring Visits (frequency, type)**

The DOH program contact may conduct at least one monitoring visit during the life of this project. The type, duration, and timing of visit will be determined and scheduled in cooperation with the subawardee. The DOH Fiscal Monitoring Unit may at least one fiscal monitoring visit during the life of this project.

#### **Special Billing Requirements**

The subrecipient will email monthly invoices and progress summary related to project tasks and deliverables to the contract manager. DOH will assess progress and expenditures quarterly and may withdraw funds if they are not being spent in a timely manner or if invoices are not received monthly and accurate.

#### **Special Instructions**

Progress reports are due to DOH via email to [nichole.simmons@doh.wa.gov](mailto:nichole.simmons@doh.wa.gov) and [megan.schell@doh.wa.gov](mailto:megan.schell@doh.wa.gov) on the following dates: March 1, 2018, September 1, 2018, March 1, 2019, with final reporting due by April 30, 2019- upon contract completion. Minority and Women-Owned business Reporting is due to [kristy.warner@doh.wa.gov](mailto:kristy.warner@doh.wa.gov) and cc: [nichole.simmons@doh.wa.gov](mailto:nichole.simmons@doh.wa.gov) and [megan.schell@doh.wa.gov](mailto:megan.schell@doh.wa.gov) on the following dates: October 15 annually, and upon contract completion.

All environmental data must be entered by the LHJ into EPA's Storage and Retrieval data system (STORET) at <http://www.epa.gov/STORET>. The semi-annual report format and data reporting requirements will be provided by DOH and may be modified throughout the contract period via email announcement.

#### **Program Specific Requirements/Narrative**

The following provisions are the pass-thru requirements of all U.S. EPA - DOH subawards funded under cooperative agreement PC01J18001-0.

#### **Administrative Conditions**

##### **1. General Terms and Conditions - Effective March 29, 2016**

The subrecipient agrees to comply with the current EPA general terms and conditions available at: <https://www.epa.gov/grants/epa-general-terms-and-conditions-effective-march-29-2016-or-later>. These terms and conditions are in addition to the assurances and certifications made as part of the award and terms, conditions or restrictions cited below.

The EPA repository for the general terms and conditions by year can be found at: <https://www.epa.gov/grants/grant-terms-and-conditions#general>

##### **2. General Terms and Conditions - Consultant Cap - Additional Information**

In addition to the General Terms and Conditions #6 "Consultant Cap", as of January 1, 2016, the limit is \$614.48 per day \$76.81 per hour.

**NOTE:** For future years' limits, the subrecipient may find the annual salary for Level IV of the Executive Schedule on the following Internet site: <http://www.opm.gov/oca>. Select "Salary and Wages", and select "Rates of Pay for the Executive Schedule". The annual salary is divided by 2087 hours to determine the maximum hourly rate, which is then multiplied by 8 to determine the maximum daily rate.

##### **3. General Terms and Conditions – Cybersecurity**

The subrecipient agrees to comply with the current EPA general terms and conditions "Cybersecurity".

The terms and conditions can be found on the EPA Grants Terms and Conditions Website.

For STATE: <https://www.epa.gov/grants/state-grant-cybersecurity-condition>

For TRIBE: <https://www.epa.gov/grants/tribal-grant-cybersecurity-condition>

For Other Recipients: <http://www2.epa.gov/sites/production/files/2015-07/documents/cybersecuritygrantconditionforotherrecipients.pdf>.

#### **4. General Terms and Conditions - Indirect Costs for States and Tribal**

The cost principles of 2 CFR 200 Subpart E are applicable, as appropriate, to this subaward.

In addition to the General Terms and Conditions "Indirect Cost Rate Agreements", if the subrecipient does not have a previously established indirect cost rate, it agrees to prepare and submit its indirect cost rate proposal in accordance with 2 CFR 200 Appendix VII.

##### **For State Agencies**

The subrecipient must send its proposal to its cognizant federal agency within six (6) months after the close of the governmental unit's fiscal year. If EPA is the cognizant federal agency, the state subrecipient must send its indirect cost rate proposal within six (6) months after the close of the governmental unit's fiscal year to:

##### **Regular Mail**

Financial Analysis and Rate Negotiation Service Center Office of Acquisition Management  
U.S. Environmental Protection Agency  
1200 Pennsylvania Avenue, NW, MC 3802R  
Washington, DC 20460

##### **Mail Courier (e.g. FedEx, UPS, etc.)**

Financial Analysis and Rate Negotiation Service Center Office of Acquisition Management  
US Environmental Protection Agency  
1300 Pennsylvania Avenue, NW, 6th floor  
Bid and Proposal Room Number 61107  
Washington, DC 20004

##### **For Indian Tribe**

If the subrecipient does not have a previously established indirect cost rate, the subrecipient must submit their indirect cost rate proposals to:

National Business Center  
Indirect Cost Services  
U.S. Department of the Interior  
2180 Harvard Street, Suite 430  
Sacramento, CA 95815-3317

The subrecipient agrees to comply with the audit requirements in accordance with 2 CFR 200 Subpart F.

#### **5. Utilization of Small, Minority and Women's Business Enterprises (MBE/WBE)**

##### **General Compliance, 40 CFR, Part 33**

The subrecipient agrees to comply with the requirements of EPA's Disadvantaged Business Enterprise (DBE) Program for procurement activities under assistance agreements, contained in 40 CFR, Part 33.

##### **MBE/WBE Reporting, 40 CFR, Part 33, Subpart E**

MBE/WBE reporting is required in annual reports. Reporting is required for assistance agreements where there are funds budgeted for procuring construction, equipment, services and supplies, including funds budgeted for direct procurement by the subrecipient or procurement under subawards or loans in the "Other" category that exceed the threshold amount of \$150,000., including amendments and/or modifications.

Based on EPA's review of the planned budget, this award meets the conditions above and is subject to the Disadvantaged Business Enterprise (DBE) Program reporting requirements. However, if subrecipient believes this award does not meet these conditions, the subrecipient must provide a justification and budget detail within 21 days of the award date clearly demonstrating that, based on the planned budget, this award is not subject to the DBE reporting requirements to the Region 10 DBE Coordinator.



The subrecipient agrees to complete and submit a “MBE/WBE Utilization Under Federal Grants, Cooperative Agreements and Interagency Agreements” report (EPA Form 5700-52A) on an annual basis. All procurement actions are reportable, not just that portion which exceeds \$150,000.

When completing the annual report, subrecipients are instructed to check the box titled “annual” in section 1B of the form. For the final report, subrecipients are instructed to check the box indicated for the “last report” of the project in section 1B of the form. Annual reports are due by October 30<sup>th</sup> of each year. Final reports are due by October 30<sup>th</sup> or 90 days after the end of the project period, whichever comes first.

The reporting requirement is based on total procurements. Subrecipients with expended and/or budgeted funds for procurement are required to report annually whether the planned procurements take place during the reporting period or not. If no budgeted procurements take place during the reporting period, the subrecipient should check the box in section 5B when completing the form.

The current EPA Form 5700-52A can be found at the EPA Office of Small Business Program’s Home Page at <http://www.epa.gov/osbp/dbereporting.htm>.

This provision represents an approved deviation from the MBE/WBE reporting requirements as described in 40 CFR, Part 33, Section 33.502; however, the other requirements outlined in 40 CFR Part 33 remain in effect, including the Good Faith Effort requirements as described in 40 CFR Part 33 Subpart C, and Fair Share Objectives negotiation as described in 40 CFR Part 33 Subpart D and explained below.

#### **Six Good Faith Efforts, 40 CFR, Part 33, Subpart C**

Pursuant to 40 CFR, Section 33.301, the subrecipient agrees to make the following good faith efforts whenever procuring construction, equipment, services and supplies under an EPA financial assistance agreement, and to require that sub-subrecipients, loan subrecipients, and prime contractors also comply. Records documenting compliance with the six good faith efforts shall be retained:

- (a) Ensure DBEs are made aware of contracting opportunities to the fullest extent practicable through outreach and recruitment activities. For Indian Tribal, State and Local and Government subrecipients, this will include placing DBEs on solicitation lists and soliciting them whenever they are potential sources.
- (b) Make information on forthcoming opportunities available to DBEs and arrange time frames for contracts and establish delivery schedules, where the requirements permit, in a way that encourages and facilitates participation by DBEs in the competitive process. This includes, whenever possible, posting solicitations for bids or proposals for a minimum of 30 calendar days before the bid or proposal closing date.
- (c) Consider in the contracting process whether firms competing for large contracts could subcontract with DBEs. For Indian Tribal, State and local Government subrecipients, this will include dividing total requirements when economically feasible into smaller tasks or quantities to permit maximum participation by DBEs in the competitive process.
- (d) Encourage contracting with a consortium of DBEs when a contract is too large for one of these firms to handle individually.
- (e) Use the services and assistance of the SBA and the Minority Business Development Agency of the Department of Commerce.
- (f) If the prime contractor awards subcontracts, require the prime contractor to take the steps in paragraphs (a) through (e) of this section.

#### **Contract Administration Provisions, 40 CFR, Section 33.302**

The subrecipient agrees to comply with the contract administration provisions of 40 CFR, Section 33.302.

#### **Bidders List, 40 CFR, Section 33.501(b) and (c)**

Subrecipients of a Continuing Environmental Program Grant or other annual reporting grant, agree to create and maintain a bidders list. Subrecipients of an EPA financial assistance agreement to capitalize a revolving loan fund also agree to require entities receiving identified loans to create and maintain a bidders list if the subrecipient of the loan is subject to, or chooses to follow, competitive bidding requirements. Please see 40 CFR, Section 33.501 (b) and (c) for specific requirements and exemptions.

#### **Fair Share Objectives, 40 CFR, Part 33, Subpart D**

##### **(1) For Grant Awards \$250,000 or Less**

This assistance agreement is a Technical Assistance Grant (TAG); or the award amount is \$250,000 or less; or the total dollar amount of all of the subrecipient’s financial assistance agreements from EPA in the current Federal fiscal year is \$250,000 or less. Therefore, the subrecipient of this assistance agreement is exempt

from the fair share objective requirements of 40 CFR, Part 33, Subpart D, and is not required to negotiate fair share objectives/goals for the utilization of MBE/WBEs in its procurements.

(2) **For Subrecipients Accepting Goals**

A subrecipient must negotiate with the appropriate EPA award official, or his/her designee, fair share objectives for MBE and WBE participation in procurement under the financial assistance agreements.

In accordance with 40 CFR, Section 33.411 some subrecipients may be exempt from the fair share objectives requirements as described in 40 CFR, Part 33, Subpart D. Subrecipients should work with their DBE coordinator, if they think their organization may qualify for an exemption.

**Accepting the Fair Share Objectives/Goals of Another Subrecipient**

The dollar amount of this assistance agreement, or the total dollar amount of all of the subrecipient's financial assistance agreements in the current federal fiscal year from EPA is \$250,000, or more. The subrecipient accepts the applicable MBE/WBE fair share objectives/goals negotiated with EPA. The Region 10 fair share objectives/goals can be found: <http://www.epa.gov/osbp/pdfs/r10fairsharegoals.pdf>.

By signing this financial assistance agreement, the subrecipient is accepting the fair share objectives/goals and attests to the fact that it is purchasing the same or similar construction, supplies, services and equipment, in the same or similar relevant geographic buying market.

**Negotiating Fair Share Objectives/Goals, 40 CFR, Section 33.404**

The subrecipient has the option to negotiate its own MBE/WBE fair share objectives/goals. If the subrecipient wishes to negotiate its own MBE/WBE fair share objectives/goals, the subrecipient agrees to submit proposed MBE/WBE objectives/goals based on an availability analysis, or disparity study, of qualified MBEs and WBEs in their relevant geographic buying market for construction, services, supplies and equipment.

The submission of proposed fair share goals with the supporting analysis or disparity study means **that the subrecipient is not** accepting the fair share objectives/goals of another subrecipient. The subrecipient agrees to submit proposed fair share objectives/goals, together with the supporting availability analysis or disparity study, to the Regional MBE/WBE Coordinator within 120 days of its acceptance of the financial assistance award. EPA will respond to the proposed fair share objective/goals within 30 days of receiving the submission. If proposed fair share objective/goals are not received within the 120 day time frame, the subrecipient may not expend its EPA funds for procurements until the proposed fair share objective/goals are submitted.

(3) **For Subrecipients with Established Goals**

The subrecipient must negotiate with the appropriate EPA award official, or his/her designee, fair share objectives for MBE and WBE participation in procurement under the financial assistance agreements.

In accordance with 40 CFR, Section 33.411 some subrecipients may be exempt from the fair share objectives requirements described in 40 CFR, Part 33, Subpart D. Subrecipients should work with their DBE coordinator, if they think their organization may qualify for an exemption.

**Current Fair Share Objective/Goal**

The dollar amount of this assistance agreement or the total dollar amount of all of the subrecipient's financial assistance agreements in the current federal fiscal year from EPA is \$250,000, or more. The Region 10 fair share objectives/goals can be found: <http://www.epa.gov/osbp/pdfs/r10fairsharegoals.pdf>.

**Negotiating Fair Share Objectives/Goals**

In accordance with 40 CFR, Part 33, Subpart D, established goals/objectives remain in effect for three fiscal years unless there are significant changes to the data supporting the fair share objectives. The subrecipient is required to follow requirements as outlined in 40 CFR Part 33, Subpart D when renegotiating the fair share objectives/goals.

(4) **For DWSRF, CWSRF and BROWNFIELDS RLF Subrecipients ONLY**  
**Objective/Goals of Loan Subrecipients**

As a subrecipient of an EPA financial assistance agreement to capitalize revolving loan funds, the subrecipient agrees to either apply its own fair share objectives negotiated with EPA to identified loans using a substantially similar relevant geographic market, or negotiate separate fair share objectives with its identified loan subrecipients. These separate objectives/goals must be based on demonstrable evidence of the availability of MBEs and WBEs in accordance with 40 CFR, Part 33, Subpart D.

The subrecipient agrees that if procurements will occur over more than one year, the subrecipient may choose to apply the fair share objective in place either for the year in which the identified loan is awarded or for the year in which the procurement action occurs. The subrecipient must specify this choice in the financial assistance agreement, or incorporate it by reference therein.

(5) **R10 DBE Coordinator and Where to Send Report**

Andrea Bennett at (206) 553-1789 or [email: Bennett.Andrea@epa.gov](mailto:Bennett.Andrea@epa.gov). The coordinator can answer any MBE/WBE reporting questions you may have. MBE/WBE reports should be sent to the EPA Region 10, Grants and Interagency Agreements Unit, 1200 Sixth Avenue, Suite 900, OMP-173, Seattle, WA 98101 or FAX to (206) 553-4957.

**Programmatic Conditions**

**1. Semi-Annual Performance Reports**

The subrecipient shall submit performance reports every six (6) months during the life of the project. Reports are due 30 calendar days after the end of each reporting period. Reports shall be submitted to the DOH Contract Manager and may be provided electronically.

In accordance with 2 CFR 200.328, as appropriate, the subrecipient agrees to submit performance reports that include brief information on each of the following areas:

- (a) A comparison of actual accomplishments to the outputs/outcomes established in the assistance agreement work plan for the period;
- (b) The reasons why established goals were not met, if appropriate;
- (c) Additional pertinent information including, when appropriate, analysis and explanation of cost overruns or high unit costs.

In addition to the semi-annual performance reports, the subrecipient shall immediately notify the DOH Contract Manager of developments that have a significant impact on the award-supported activities. As appropriate, the subrecipient agrees to inform the DOH Contract Manager as soon as problems, delays or adverse conditions become known which will materially impair the ability to meet the outputs/outcomes specified in the assistance agreement work plan. This notification shall include a statement of the action taken or contemplated, and any assistance needed to resolve the situation.

The subrecipient will submit performance reports through EPA's Puget Sound Financial and Ecosystem Accounting Tracking System (FEATS). Reports are due at least 30 calendar days after the end of each reporting period. Earlier, but not later due dates may be mutually agreed upon by the Contract Manager and subrecipient in the award document. The reporting periods shall end March 31st and September 30th of each calendar year. Reports shall be submitted to the DOH Contract Manager on the FEATS form provided by the Contract Manager and shall be submitted by electronic mail. The subrecipient agrees to submit performance reports that include brief information on each of the following areas:

- (a) A comparison of actual accomplishments to the outputs/outcomes established in the assistance agreement work plan for the period;
- (b) The reasons for slippages if established outputs/outcomes were not met;
- (c) Additional pertinent information, including when appropriate, analysis and information of cost overruns or high unit costs.

**2. Final Performance Report**

The subrecipient shall submit a final performance report through FEATS, which is due 90 calendar days after the expiration or termination of the award. The report shall be submitted to the DOH Contract Manager and must be provided electronically. The report shall generally contain the same information as in the periodic reports, but should cover the entire project period. After completion of the project, the DOH Contract Manager may waive the requirement for a final performance report if the DOH Contract Manager deems such a report is inappropriate or unnecessary.

**3. Program Income - Addition**

If program income is generated, the subrecipient is required to account for program income related to this project. Program income earned during the project period shall be retained by the subrecipient and shall be added to funds committed to the project by EPA and the subrecipient, and shall be used to further eligible project objectives.

**4. Recognition of EPA Funding**

Reports, documents, signage, videos, or other media, developed as part of projects funded by this assistance agreement shall contain the following statement:

“This project has been funded wholly or in part by the United States Environmental Protection Agency under assistance agreement (number) to (subrecipient). The contents of this document do not necessarily reflect the views and policies of the Environmental Protection Agency, nor does mention of trade names or commercial products constitute endorsement or recommendation for use.”

**5. Quality Assurance Requirements (2 CFR 1500.11) (if applicable)**

**Acceptable Quality Assurance documentation must be submitted within 30 days of the acceptance of this agreement or another date as negotiated with the DOH Contract Manager and NEP Quality Assurance Coordinator.** No work involving direct measurements or data generation, environmental modeling, compilation of data from literature or electronic media, and data supporting the design, construction, and operation of environmental technology shall be initiated under this project until the EPA Project Officer, in concert with the EPA Quality Assurance Manager, has approved the quality assurance document.

Instructions to Submit Quality Assurance Documents for Review

Please refer to The Department of Ecology’s website at: <http://www.ecy.wa.gov/programs/eap/qa/docs/NEPQAPP/index.html> for guidance and templates. Submit the Acceptable Quality Assurance documentation to [Sara Sekerak at ssek461@ecy.wa.gov](mailto:Sara.Sekerak@ecy.wa.gov) (NEP Quality Assurance Coordinator) for review with a cc: to [megan.schell@doh.wa.gov](mailto:megan.schell@doh.wa.gov) and [Nichole.simmons@doh.wa.gov](mailto:Nichole.simmons@doh.wa.gov) (DOH NEP Contract Managers).

Additional information on these requirements can be found at the EPA Office of Grants and Debarment website: <http://www.epa.gov/ogd/grants/assurance.htm>.

**6. Peer Review**

The results of this project may affect management decisions relating to Puget Sound. Prior to finalizing any significant technical products the Principal Investigator (PI) of this project must solicit advice, review and feedback from a technical review or advisory group consisting of relevant subject matter specialists. A record of comments and a brief description of how respective comments are addressed by the PI will be provided to the Project Monitor prior to releasing any final reports or products resulting from the funded study.

**7. Competency of Organizations Generating and/or Using Environmental Measurement Data**

In accordance with Agency Policy Directive Number FEM-2012-02, Policy to Assure the Competency of Organizations Generating Environmental Measurement Data under Agency-Funded Assistance Agreements, subrecipient shall maintain competency for the duration of the project period of this agreement and this will be documented during the annual reporting process. A copy of the Policy is available online at [http://www.epa.gov/fem/lab\\_comp.htm](http://www.epa.gov/fem/lab_comp.htm) or a copy may also be requested by contacting the DOH Contract Manager for this award.

Federal Assistance Agreement Funds Up To \$200,000

Subrecipient agrees that if the total federal funding obligated on this award exceeds \$200,000 (resulting from subsequent amendments to this agreement) and will involve the use or generation of environmental data it will (unless it has otherwise done so) demonstrate competency prior to carrying out any activities involving the generation or use of environmental data under this agreement.

Federal Assistance Agreement Funds Exceed or Expect to Exceed \$200,000

Subrecipient agrees, by entering into this agreement, that it has demonstrated competency prior to award, or alternatively, where a pre-award demonstration of competency is not practicable. Subrecipient agrees to submit documentation and demonstrate competency prior to carrying out any activities under the award involving the generation or use of environmental data.

Shellfish Strategic Initiative Quality Assurance Coordinator Contact: Tom Gries at [tgr1461@ecy.wa.gov](mailto:tgr1461@ecy.wa.gov)

**8. STORET Requirement**

Subrecipients are required to institute standardized reporting requirements into their work plans and include such costs in their budgets. All water quality data generated in accordance with an EPA approved Quality Assurance Project Plan as a result of this assistance agreement, either directly or by subaward, will be required to be transmitted into the Agency’s Storage and Retrieval (STORET) data warehouse using either WQX or WQX web. Water quality data appropriate for STORET include physical, chemical, and biological sample results for water, sediment and fish tissue. The data include toxicity data, microbiological data, and the metrics and indices generated from biological and habitat data. The Water Quality Exchange (WQX) is the water data schema associated with the EPA, State and Tribal Exchange Network. Using the WQX schema partners map their database structure to the WQX/STORET structure. WQX web is a web based tool to convert data into the STORET format for smaller data generators that are not direct partners on the Exchange Network. More information about WQX, WQX web, and the STORET warehouse, including tutorials, can be found at

<http://www.epa.gov/storet/wqx/>

If activities submitted as match for this federal assistance agreement involve the generation of water quality data, the resulting information must be publicly accessible (in STORET or some other database). Subrecipients are encouraged to develop a cross walk between any non-STORET database utilized for the storage of water quality data associated with match activities and EPA's Water Quality Exchange (WQX).

**9. Riparian Buffers**

Riparian buffer restoration projects in agricultural areas shall be consistent with the interim riparian buffer recommendations provided to EPA and the Natural Resource Conservation Service by National Marine Fisheries Service letters of January 30, 2013 (stamp received date - February 4, 2013) and April 9, 2013 (stamp received date – April 16, 2013), or the October 28, 2013 guidance. Grantees shall confirm in writing projects' consistency with the recommendations referenced above. When developing project proposals, grantees also should consider the extent to which proposals include appropriate riparian buffers or otherwise address pollution sources on other water courses on the properties in the project area to support water quality and salmon recovery. Deviations can only be obtained through an exception approved by EPA. In order for EPA to evaluate a request for an exception, the grantee must submit the scientific rationale demonstrating adequacy of buffers for supporting water quality and salmon recovery. The request must summarize tribal input on the scientific rationale or other relevant issues. The scientific rationale could be developed from sources such as site-specific assessment data, salmon recovery plans, Total Maximum Daily Loads (TMDLs) and the state nonpoint plan. EPA will confer with the National Oceanic and Atmospheric Administration (NOAA) and the Washington Department of Ecology and provide the opportunity for affected tribes to consult with EPA before making a final decision on a deviation request.

**10. International Travel (Including Canada)**

All International Travel must be approved by the Office of International and Tribal Affairs (OITA) BEFORE travel occurs. Even a brief trip to a foreign country, for example to attend a conference, requires OITA approval. Please contact your DOH Contract Manager as soon as possible if travel is planned out of the country, including Canada and/or Mexico, so that they can obtain appropriate approvals from EPA Headquarters. If you have questions, please contact your DOH Contract Manager listed in this award document.

**11. Geospatial Data Standards**

All geospatial data created must be consistent with Federal Geographic Data Committee (FGDC) endorsed standards. Information on these standards may be found at [www.fgdc.gov](http://www.fgdc.gov)

**12. ULO Stretch Goal**

Subrecipients should manage their programs and subaward funding in ways that reduce the length of time that federal funds obligated and committed to subaward projects are “unspent” federal funds, not yet drawn down through disbursements.

EPA encourages the reduction of these unliquidated obligations (ULOs) by applying the following programmatic term and condition to these assistance agreements Assistance agreement subrecipients are to apply these “stretch” goals throughout the life of the assistance agreement and to confer with your DOH Contract Manager whenever instances arise that make attainment of these stretch goals unlikely.

A stretch goal for utilization of funds is established. All funds should be spent by 2 years.

**Stretch Goal**

Funds Awarded in FY 2016

(October, 1, 2016-September 30, 2017)

Should all Be Drawn Down by March 2019

**DOH Program Contact**

Contract Manager: Nichole Simmons, Office of Environmental Health and Safety, PO Box 47824, Olympia, WA 98504-7824; 360.236.3208; [nichole.simmons@doh.wa.gov](mailto:nichole.simmons@doh.wa.gov)

Grant Coordinator: Megan Schell, Office of Environmental Health and Safety, PO Box 47824, Olympia WA 98504-7824; 360.236.3307; [megan.schell@doh.wa.gov](mailto:megan.schell@doh.wa.gov)

**Exhibit A  
Statement of Work  
Contract Term: 2018-2020**

**DOH Program Name or Title:** Tobacco & Vapor Product Prevention & Control  
Program - Effective March 29, 2019

**Local Health Jurisdiction Name:** Kitsap Public Health District

**Contract Number:** CLH18248

**SOW Type:** Revision      **Revision # (for this SOW)** 2

**Period of Performance:** March 29, 2019 through June 30, 2020

<b>Funding Source</b> <input checked="" type="checkbox"/> Federal Subrecipient <input checked="" type="checkbox"/> State <input type="checkbox"/> Other	<b>Federal Compliance (check if applicable)</b> <input checked="" type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development	<b>Type of Payment</b> <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
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**Statement of Work Purpose:** The purpose of this statement of work is to provide state and federal funding for tobacco and vapor product prevention and control activities.

**Revision Purpose:** The purpose of this revision is to recode \$8,451 in Youth Tobacco Vapor Products to FPH-Youth Tobacco Vapor Prevention, add an additional 16,061 to Foundational Public Health (FPH)-Youth Tobacco Vapor Prevention, and make an edit to task #5.

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only)		Current Consideration	Change Increase (+)	Total Consideration
				Start Date	End Date			
Youth Tobacco Vapor Products	N/A	334.04.93	77410890	07/01/19	06/30/20	46,854	-8,451	38,403
FFY19 Tobacco Prevention	93.305	333.93.30	77410280	03/29/19	04/28/20	24,482	0	24,482
SFY20 Marijuana Education	N/A	334.04.93	77420820	07/01/19	06/30/20	5,950	0	5,950
FPH-Youth Tobacco Vapor Prevention	N/A	334.04.93	77410621	07/01/19	06/30/20	0	24,512	24,512
<b>TOTALS</b>						<b>77,286</b>	<b>16,061</b>	<b>93,347</b>

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	<b>Planning and Coordination</b> <u>Required:</u> A. Revise and update 2018-2019 implementation plan for 2019-2020 using a template provided by Tobacco and Vapor Product Prevention and Control Program (TVPPCP) involving representatives from all counties within the respective Accountable Communities of Health (ACH) region. B. Attend at least two (2) in-person statewide planning meetings and one (1) webinar convened by the WA State DOH TVPPCP to		Monthly Progress Report (due the 15 <sup>th</sup> of the month) and Expenditure Report and Request for Reimbursement (due the 30 <sup>th</sup> of the month.)	03/29/19 - 06/30/20	Funding utilized: State and federal (YTVPP and CDC)  Reimbursement for actual expenditures, not to exceed total funding consideration.  A19-1A invoice for TVPPCP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract.



Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	reduce tobacco-related disparities, prevent youth initiation, promote and support cessation, and eliminate secondhand exposure to smoke and vape emissions. Include partners from respective ACH region as resources permit.				The expenditure worksheet in the TVPPCP budget workbook must be completed by the 30 <sup>th</sup> of the month following the month in which costs were incurred.
2	<p><b>Prevent Tobacco use Among Youth and Young Adults with Emphasis on Nicotine Consumed Through Electronic Cigarettes/Vapor Products</b></p> <p><b>Required:</b></p> <p>Create and implement an internal and external communications plan addressing diverse audiences to educate about Tobacco and Vape 21 (<a href="#">Engrossed House Bill 1074.</a>). Ensure all communications materials are culturally and linguistically appropriate.</p>		Monthly Progress Report (due the 15 <sup>th</sup> of the month) and Expenditure Report and Request for Reimbursement (due the 30 <sup>th</sup> of the month.)	03/29/19 - 06/30/20	<p>Funding utilized: State and federal (YTVPP and CDC)</p> <p>Reimbursement for actual expenditures, not to exceed total funding consideration.</p> <p>A19-1A invoice for TVPPCP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract.</p> <p>The expenditure worksheet in the TVPPCP budget workbook must be completed by the 30<sup>th</sup> of the month following the month in which costs were incurred.</p>
3	<p><b>Promote and Support Tobacco Cessation</b></p> <p><b>Required:</b></p> <p>A. Educate providers about cessation resources and referral processes, including those for the Washington State Tobacco Quitline (WAQL) and 2Morrow Health application.</p> <p>B. In collaboration with TVPPCP, incorporate 2019-2020 Centers for Disease Control and Prevention (CDC) (e.g., <i>Tips</i>® campaign) materials into agency social media content, and report communications and media efforts in a template provided by the TVPPCP as part of the monthly reporting requirement.</p>		Monthly Progress Report (due the 15 <sup>th</sup> of the month) and Expenditure Report and Request for Reimbursement (due the 30 <sup>th</sup> of the month.)	03/29/19 - 04/28/20	<p>Funding utilized: State and federal (YTVPP and CDC)</p> <p>Reimbursement for actual expenditures, not to exceed total funding consideration.</p> <p>A19-1A invoice for TVPPCP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract.</p>

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<p><b><u>As resources permit:</u></b></p> <p>C. In collaboration with TVPPCP, assess provider tobacco dependence treatment practices in three health system entities within region (e.g., hospitals, clinics).</p>				The expenditure worksheet in the TVPPCP budget workbook must be completed by the 30 <sup>th</sup> of the month following the month in which costs were incurred.
4	<p><b>Eliminate Exposure to Secondhand Smoke and Vape Emissions</b></p> <p><b><u>Required:</u></b></p> <p>A. Ensure LHJ websites in respective ACH regions are updated with contact information for smoking in public places and vaping in public places violations, and that there is a set protocol on responding to complaints.</p> <p><b><u>As resources permit:</u></b></p> <p>B. Plan and implement activities within LHJ's respective ACH region addressing local smoking and vaping in public places policies.</p> <p>C. Conduct outreach and/or provide technical assistance to local agencies and organizations interested in adopting and/or that have adopted voluntary smoke-free and vape-free campus and/or organizational policies.</p>		Monthly Progress Report (due the 15 <sup>th</sup> of the month) and Expenditure Report and Request for Reimbursement (due the 30 <sup>th</sup> of the month.)	07/01/19 - 06/30/20	<p>Funding utilized: State (YTVPP)</p> <p>Reimbursement for actual expenditures, not to exceed total funding consideration.</p> <p>A19-1A invoice for TVPPCP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract.</p> <p>The expenditure worksheet in the TVPPCP budget workbook must be completed by the 30<sup>th</sup> of the month following the month in which costs were incurred.</p>
5	<p><b>SFY20 Marijuana Education</b></p> <ul style="list-style-type: none"> <li>The TVPPCP regional contractor will work collaboratively with their marijuana prevention partners in their regions and communities to address vaping in schools.</li> <li>The TVPPCP priority population and regional contractor will coordinate efforts to provide education, technical assistance and resources to schools on the development and implementation of vapor product policies, including alternatives to suspension.</li> <li>Educational presentations will address any potential changes to current policies and the strengthening or development of needed policies. <i>all presentations must be approved by the TVPPCP program manager.</i> Organizations or schools demonstrating readiness for policy</li> </ul>		Monthly Progress Report (due the 15 <sup>th</sup> of the month) and Expenditure Report and Request for Reimbursement (due the 30 <sup>th</sup> of the month)	07/01/19 - 06/30/20	<p>Funding utilized: State [Marijuana Prevention and Education (MPEP)]</p> <p>Implementation Plans due by August 15, 2019, including detailed activities for which the MPEP funding is to be used. These plans will need to be approved by the respective contract manager before work can begin. TVPPCP will approve plans by August 30, 2019.</p>



Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	change will be prioritized for additional educational presentations and technical assistance.				<p>Reimbursement for actual expenditures, not to exceed total funding consideration. A19-1A invoice for TVPPCP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract.</p> <p>The expenditure worksheet in the TVPPCP budget workbook must be completed by the 30<sup>th</sup> of the month following the month in which costs were incurred.</p>

**\*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 Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at:  
<http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf>

**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 [USASpending.gov](http://USASpending.gov) by DOH as required by P.L. 109-282.

**Program Specific Requirements/Narrative**

**Definitions:**

CONTRACTOR – LHJ performing work as a Subrecipient under this statement of work.

**A. Contractor will:**

1. Fulfill program administration roles and responsibilities:
  - Ensure required infrastructure. It is recommended that each regional contractor have 0.4 FTE but will have no less than a .25 FTE (10 hours/week).
  - Participate in required conference calls, trainings, webinars, and in-person meetings for TVPPCP contractors hosted by DOH.
    - Participate in contract management conference calls/webinars with Tobacco and Vapor Product Prevention and Control Program (TVPPCP) every other month, beginning in July 2018. The purpose of the calls are to review activity status and plans, identify next steps and timelines, request for and receive technical assistance, and for collaboration and sharing regional work.

- Attend at least two (2) in-person statewide planning meetings and one (1) webinar convened by the WA State Department of Health Tobacco and Vapor Product Prevention and Control Program to reduce tobacco-related disparities, prevent youth initiation, promote and support cessation, and eliminate secondhand exposure to smoke and vape emissions. Include partners from respective ACH region as resources permit.
- Submit an Annual Implementation Plan and Budget according to the deadlines in Section E below.
- Submit accurate and complete progress reports, budgets, and A19-1A invoices, using the required guidance, reporting tool or system, and deadlines (see Section E below) provided by DOH.
- Act as the fiduciary agent if subcontracting. DOH must be notified and approve of any subcontractors; however, subcontractor performance is the responsibility of each TVPPCP Regional Contractor.
- Meet all requirements outlined in the TVPPCP Work Plan and Reporting Guidebook provided by TVPPCP.
- Have completed background checks and on file for any staff or volunteer (funded and/or representing a TVPPCP contractor or subcontractor) who will be with youth and unsupervised. Prohibit any staff with a felony conviction related to their duties from supervising and interacting with minors while performing the duties of this contract. This requirement is consistent with existing statute RCW 9.96A.020.

**B. DOH will support Contractor by providing:**

1. Timely communications regarding funding amounts and/or funding reductions.
2. An annual calendar of key events, required and optional trainings and other key dates.
3. Contract oversight and point of contact for overall project coordination, technical assistance, and facilitation of project communication.
4. Templates for implementation plan, budget workbook, and reporting requirements.
5. Technical assistance on meeting project goals, objectives, and activities related to:
  - a) Adapting required and innovative activities to ensure they are culturally and linguistically appropriate evidence-based or evidence-informed, or promising programs.
  - b) Developing and adapting project materials so they are culturally and linguistically appropriate using Cultural and Linguistically Appropriate Services (CLAS) standards <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53>.
  - c) Providing relevant resources and training, as resources permit.
  - d) Meeting performance measure, evaluation, and data collection requirements.
  - e) Interpreting DOH guidelines, requirements, and expectations. This includes making determinations of whether TVPPCP funds may be used for activities and projects proposed by the LHJ.

**C. Program Administration:**

1. The contractor shall perform the requirements and activities defined in this statement of work (SOW) and the Tobacco and Vapor Product Prevention and Control Program (TVPPCP) Work Plan and Reporting Guidebook, revised 2019. At a minimum, program and fiscal performance will be monitored and evaluated monthly by the assigned DOH staff based on each contractor's Monthly Progress Report, and Monthly Expenditure Worksheet and A19-1A invoice. TVPPCP staff will also monitor and evaluate regional program performance during on-site visits [minimum one (1) per biennium] following requirements and protocols provided by TVPPCP.
2. The contractor shall provide DOH with the program administrator's name, address, telephone number, and any subsequent changes. This contract information will be kept in an internal DOH database, along with the same information of all staff supported in part/full with TVPPCP funds. Failure of the contractor to perform activities (including those subcontracted to other agencies or organizations) as described in the DOH-approved SOW included herein and subsequent amendments, and in accordance with DOH administrative and Contract Performance Policies, and with any applicable local, state, or federal law or regulation, may result in the reduction of funds, suspension of services, or the termination of this SOW.
3. DOH reserves the right to determine the amount of any reduction to this statement of work, based on contractor's performance. Any reduction shall be based on a review of the contractor's expenditure patterns and actual performance.
4. Make reasonable efforts throughout the period of performance, to identify and leverage resources from private or public entities to support costs under this program.
5. The contractor's annual work plan and budget must be approved by TVPPCP contract manager prior to implementation. This includes execution of subcontracts within the region. Any changes to either the work plan or budget, must also be approved by the DOH contract manager prior to implementation.

**D. Subcontractor Requirements:**

1. When subcontracting with an organization that is leading regional efforts in one or more counties, the Regional Contractor is required to include language in these contracts that reflects the following:
  - Submit monthly progress reports and invoices that reflect work performed and funding spent using tools provided by DOH or the Regional Contractor. Due dates may be set by the Regional Contractor to ensure they can meet the deadlines in Section E below.
2. When subcontracting with an organization to work directly with youth (ages 0-17), the Regional Contractor is required to include language in these contracts that reflects the following:
  - a) Provide verification that background checks have been completed for any staff and volunteers who will work with youth (ages 0-17) and are on file.

**E. Required Plans and Reports**

The contractor shall submit required reports by the date due using required forms according to procedures issued by DOH. These reports and their due dates shall include, but not be limited to:

<u>Report</u>	<u>Date Due</u>
1. Submit an annual plan and budget	Annually, no later than July 30, 2019, using a template provided by TVPPCP. DOH approval will occur no later than August 15, 2019. Update as needed on SharePoint.
2. Expenditure Report and Request for Reimbursement (A19-1A)	A19-1A and updated budget workbook due the 30 <sup>th</sup> of the month following the month in which costs are incurred.
3. Final Expenditure Projections, Report and Request for Reimbursement (FY Closeout)	Year-end projections are due as follows: FY20: July 10, 2020  Final Expenditure Reports are due within 45 days of the end of the contract year
4. Monthly Progress Report	The 15 <sup>th</sup> of the month following the month in which activities were performed, including the final monthly progress report. Monthly reports of work will include a narrative on overall progress using the reporting template located on SharePoint provided by TVPPCP. All documents related to task activities will be attached.
5. Assessment and Evaluation	Using a template provided by TVPPCP, complete project evaluation activity developed and coordinated by TVPPCP as requested.

**The contractor shall be obligated to submit required reports after the close of the contract period, during the transfer of obligations to another contractor, or upon termination of the contract for any reason.**

**F. Payment**

1. All expenditures incurred and reimbursements made for performance under this statement of work shall be based on actual allowable costs in accordance with the Tobacco and Vapor Product Prevention and Control Program (TVPPCP) Work Plan and Reporting Guidebook, revised 2019.
2. DOH will reimburse the contractor for actual allowable program costs. Billings for services on a monthly fraction of the budget will not be accepted or approved.
3. DOH shall pay the contractor all allowable costs incurred as evidenced by a proper invoice submitted to DOH on a timely basis, insofar as those allowable and allocable costs do not exceed that amount appropriated or otherwise available for such purposes as stated herein, or in subsequent amendments.
4. DOH shall pay for costs under this statement of work up to a total not exceeding the total funding consideration amount. Costs allowable under this statement of work are based on DOH-approved budget for periods of performance: July 1, 2019 to June 30, 2020.
5. Authorized and allowable program expenditures shall be reimbursed upon receipt and approval of the Monthly Progress Report, Monthly Expenditure Report and Request for Reimbursement form (A19-1A) according to Section E of this contract. If the Monthly Progress Report, Expenditure Report and/or Request for Reimbursement form (A19-1A) are not completed within 60 days of the month when expenditures were incurred, DOH may withhold approval and payment, at its discretion, until the 30th of the month following submittal.

6. Final expenditure projections must be submitted by the 10th of July to allow DOH to appropriately accrue funds to make final payments.
7. The final Monthly Expenditure Report and Request for Reimbursement form must be submitted to DOH no later than 45 days following the end of the contract year in order to assure reimbursement of approved costs.
8. Backup documentation can include, but is not limited to; receipts, invoices, billing records, work orders, positive time and attendance records (timesheets), travel vouchers and accounting expense reports. Backup documentation shall be kept on file by the fiscal agent and made available upon request by DOH.
9. Submission of electronic reports, deliverables, and other invoice attachments are preferred; however hard copies are acceptable.

**G. Program Manual, Handbook, Policy References**

Meet requirements outlined in the Tobacco and Vapor Product Prevention and Control Program (TVPPCP) Work Plan and Reporting Guidebook, Budget Workbook

**H. Restrictions on Funds:**

**Federal Funding Restrictions and Limitations:**

- Awardees may not use federal funds for lobbying.
- Awardees may not use funds for research.
- Awardees may not use funds for clinical care.
- Awardees may not use funds to supplant existing state funding or to supplant funds from federal or state sources.
- Awardees may use funds only for reasonable program purposes, including personnel, travel, supplies, and sources.
- Awardees are the direct and primary recipients in a cooperative agreement program and must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.
- Awardees are generally not allowed to use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- Awardees may not be reimbursed for pre-award costs.
- Awardees may only use funds for evidence-based tobacco control interventions, strategies, and activities.
- Awardees may not use funds to provide direct cessation services or other direct services other than those through evidence-based quit line services.
- Awardees may not use funds to purchase nicotine replacement therapy or other products used for cessation.
- Awardees may not use funds to purchase K-12 school curricula.
- Recipients may only expend funds for reasonable program purposes, including personnel, travel, supplies, and services, such as contractual.

**Notice of Funding Opportunity (NOFO) Restrictions:** Recipients may not use funds for research. Recipients may not use funds for clinical care. Recipients may not use funds to supplant existing state funding or to supplant funds from federal or state sources. Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and sources. Recipients are the direct and primary recipients in a cooperative agreement program and must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible. Recipients are generally not allowed to use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget. Recipients may not be reimbursed pre-award costs. Recipients may only use funds for evidence-based tobacco control interventions, strategies, and activities. Recipients may not use funds to provide direct cessation services or other direct services other than those through evidence-based quitline services. Recipients may not use funds to purchase nicotine replacement therapy or other products used for cessation. Recipients may not use funds to purchase K-12 school curricula. In addition, other than for normal and recognized executive-legislative relationships, no funds may be used for: (1) publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body; (2) the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body. NOTE: See Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC recipients.

**Required Disclosures for Federal Awardee Performance and Integrity Information System**

**(FAPIS):** Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services Romero Stokes, Grants Management Specialist Centers for Disease Control and Prevention.

**Office of Grants Services (OGS) Office of Financial Resources (OFR) Office of the Chief Operating Officer (OCOO)**

2920 Brandywine Road Mailstop E-09

Atlanta, Georgia 30341

Email: [rstokes@cdc.gov](mailto:rstokes@cdc.gov) (Include “Mandatory Grant Disclosures” in subject line)

AND

U.S. Department of Health and Human Services Office of the Inspector General

ATTN: Mandatory Grant Disclosures, Intake Coordinator 330 Independence Avenue, SW Cohen Building, Room 5527

Washington, DC 20201

Fax: (202)-205-0604 (Include “Mandatory Grant Disclosures” in subject line) or

Email: [MandatoryGranteeDisclosures@oig.hhs.gov](mailto:MandatoryGranteeDisclosures@oig.hhs.gov)

Subrecipients must include this mandatory disclosure requirement in all subawards and contracts under this award. Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

**I. Special References (RCWs, WACs, etc)**

As a provision of the Youth Tobacco and Vapor Product Prevention Account, [RCW 70.155.120](#), DOH shall, within up to seventy percent of available funds, provide grants to local health departments or other local community agencies to develop and implement coordinated tobacco and vapor product intervention strategies to prevent and reduce tobacco and vapor product use by youth.

**DOH Program Contact**

Stacia Wasmundt, Contract Manager

Youth Tobacco and Vapor Product Prevention Consultant

Office of Healthy and Safe Communities

Tobacco and Vapor Product Prevention and Control Program

Washington State Department of Health

Street Address: 310 Israel Rd SE, Tumwater, WA 98501

Mailing Address: PO Box 47848, Olympia, WA 98504

Telephone: 360-236-2568 / Fax: 360-236-3646

Email: [stacia.wasmundt@doh.wa.gov](mailto:stacia.wasmundt@doh.wa.gov)

**DOH Fiscal Contact**

Sharon Shields

Fiscal Consultant

Prevention and Community Health

Washington State Department of Health

Street Address: 310 Israel Rd SE, Tumwater, WA 98501

Mailing Address: PO Box 47855, Olympia, WA 98504

Telephone: 360-236-3609/ Fax: 360-664-2619

Email: [sharon.shields@doh.wa.gov](mailto:sharon.shields@doh.wa.gov)

Kitsap Public Health District

**EXHIBIT B-11**  
**ALLOCATIONS**  
**Contract Term: 2018-2020**

**Contract Number:** CLH18248

**Date:** September 16, 2019

**Indirect Rate as of January 2018: 34.98% Admin & Fac.; 37.62% Community Hlth Pgms (inc. Admin) & 40.39% Environmental Hlth Pgms (inc. Admin)**

**Indirect Rate as of January 2019: 37.38% Admin & Fac.; 39.19% Community Hlth Pgms (inc. Admin) & 39.83% Environmental Hlth Pgms (inc. Admin)**

Chart of Accounts Program Title	Federal Award Identification #	Amend #	CFDA*	BARS Revenue Code**	Statement of Work Funding Period		DOH Use Only Chart of Accounts Funding Period		Amount	Funding Period Sub Total	Chart of Accounts Total
					Start Date	End Date	Start Date	End Date			
FFY20 CSS USDA FINI Prog Mgnt	NGA Not Received	Amd 8	10.331	333.10.33	10/01/19	03/31/20	10/01/19	03/31/20	(\$13,410)	\$25,000	\$145,847
FFY20 CSS USDA FINI Prog Mgnt	NGA Not Received	Amd 6	10.331	333.10.33	10/01/19	03/31/20	10/01/19	03/31/20	\$38,410		
FFY19 CSS USDA FINI Prog Mgnt	20157001823357	Amd 8	10.331	333.10.33	10/01/18	09/30/19	10/01/18	09/30/19	(\$10,716)	\$78,347	
FFY19 CSS USDA FINI Prog Mgnt	20157001823357	N/A	10.331	333.10.33	10/01/18	09/30/19	10/01/18	09/30/19	\$89,063		
FFY18 CSS USDA FINI Prog Mgnt	20157001823357	Amd 8	10.331	333.10.33	01/01/18	09/30/18	10/01/17	09/30/18	(\$7,500)	\$42,500	
FFY18 CSS USDA FINI Prog Mgnt	20157001823357	Amd 6	10.331	333.10.33	01/01/18	09/30/18	10/01/17	09/30/18	(\$95,842)		
FFY18 CSS USDA FINI Prog Mgnt	20157001823357	Amd 2	10.331	333.10.33	01/01/18	09/30/18	10/01/17	09/30/18	\$55,060		
FFY18 CSS USDA FINI Prog Mgnt	20157001823357	N/A	10.331	333.10.33	01/01/18	09/30/18	10/01/17	09/30/18	\$90,782		
FFY20 CSS IAR SNAP Ed Prog Mgnt-Region 5	207WAWA5Q3903	Amd 10	10.561	333.10.56	10/01/19	09/30/20	10/01/19	09/30/20	\$83,000	\$83,000	\$83,000
FFY19 CSS IAR SNAP Ed Program Mgnt	197WAWA5Q3903	Amd 9	10.561	333.10.56	10/01/18	09/30/19	10/01/18	09/30/19	\$708	\$69,875	\$159,906
FFY19 CSS IAR SNAP Ed Program Mgnt	197WAWA5Q3903	Amd 4	10.561	333.10.56	10/01/18	09/30/19	10/01/18	09/30/19	\$69,167		
FFY18 CSS IAR SNAP Ed Program Mgnt CF	187WAWA5Q3903	Amd 4	10.561	333.10.56	10/01/18	09/30/19	10/01/18	09/30/19	\$13,833	\$13,833	
FFY18 CSS IAR SNAP Ed Program Mgnt	187WAWA5Q3903	Amd 4	10.561	333.10.56	01/01/18	09/30/18	10/01/17	09/30/18	\$8,150	\$69,281	
FFY18 CSS IAR SNAP Ed Program Mgnt	187WAWA5Q3903	Amd 2	10.561	333.10.56	01/01/18	09/30/18	10/01/17	09/30/18	\$26,548		
FFY18 CSS IAR SNAP Ed Program Mgnt	187WAWA5Q3903	N/A	10.561	333.10.56	01/01/18	09/30/18	10/01/17	09/30/18	\$34,583		
FFY17 CSS IAR SNAP Ed Program Mgnt CF	1717WAWA5Q390	N/A	10.561	333.10.56	01/01/18	09/30/18	10/01/17	09/30/18	\$6,917	\$6,917	
FFY19 Housing People with AIDS Formula	WAH18-F999	Amd 8	14.241	333.14.24	07/01/19	06/30/20	07/01/19	06/30/20	\$53,379	\$53,379	\$141,402
FFY18 Housing People with AIDS Formula	WAH18-F999	Amd 8	14.241	333.14.24	07/01/18	06/30/19	07/01/18	06/30/19	\$36,083	\$88,023	
FFY18 Housing People with AIDS Formula	WAH18-F999	Amd 5	14.241	333.14.24	07/01/18	06/30/19	07/01/18	06/30/19	\$51,940		
PS SSI 1-5 BEACH Task 4	01J18001	Amd 7	66.123	333.66.12	03/01/19	10/31/19	07/01/17	10/31/19	\$5,800	\$5,800	\$11,600
PS SSI 1-5 BEACH Task 4	01J18001	Amd 1	66.123	333.66.12	03/01/18	10/31/18	07/01/17	06/30/19	\$5,800	\$5,800	
PS SSI 1-5 PIC Task 4	01J18001	Amd 2, 8	66.123	333.66.12	01/01/18	09/30/19	07/01/17	06/30/19	(\$50,000)	\$28,805	\$28,805
PS SSI 1-5 PIC Task 4	01J18001	N/A, Amd 8	66.123	333.66.12	01/01/18	09/30/19	07/01/17	06/30/19	\$78,805		
FFY19 Swimming Beach Act Grant IAR (ECY)	01J49701	Amd 7	66.472	333.66.47	03/01/19	10/31/19	12/15/18	10/31/19	\$14,000	\$14,000	\$28,000
FFY18 Swimming Beach Act Grant IAR (ECY)	00J75501	Amd 1	66.472	333.66.47	03/01/18	10/31/18	12/15/17	12/14/18	\$14,000	\$14,000	
FFY17 EPR PHEP BP1 LHJ Funding	NU90TP921889-01	Amd 2	93.069	333.93.06	01/01/18	06/30/18	07/01/17	07/02/18	\$44,006	\$163,223	\$163,223
FFY17 EPR PHEP BP1 LHJ Funding	NU90TP921889-01	N/A	93.069	333.93.06	01/01/18	06/30/18	07/01/17	07/02/18	\$119,217		
FFY18 EPR PHEP BP1 Supp LHJ Funding	NU90TP921889-01	Amd 5	93.069	333.93.06	07/01/18	06/30/19	07/01/18	06/30/19	\$5,318	\$295,345	\$295,345
FFY18 EPR PHEP BP1 Supp LHJ Funding	NU90TP921889-01	Amd 4	93.069	333.93.06	07/01/18	06/30/19	07/01/18	06/30/19	\$290,027		

Kitsap Public Health District

**EXHIBIT B-11**  
**ALLOCATIONS**  
Contract Term: 2018-2020

Contract Number: CLH18248  
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FFY19 PHEP BP1 LHJ Funding	NU90TP922043	Amd 10	93.069	333.93.06	07/01/19	06/30/20	07/01/19	06/30/20	\$295,345	\$295,345	\$295,345
FFY19 Overdose Data to Action Prev	NU17CE925007	Amd 11	93.136	333.93.13	09/01/19	08/31/20	09/01/19	08/31/20	\$50,000	\$50,000	\$50,000
FFY17 317 Ops	5NH23IP000762-05-00	N/A	93.268	333.93.26	01/01/18	06/30/18	04/01/17	06/30/18	\$4,837	\$4,837	\$4,837
FFY17 AFIX	5NH23IP000762-05-00	Amd 2, 4	93.268	333.93.26	07/01/18	06/30/19	04/01/17	06/30/19	\$27,563	\$27,563	\$41,821
FFY17 AFIX	5NH23IP000762-05-00	N/A	93.268	333.93.26	01/01/18	06/30/18	04/01/17	06/30/18	\$14,258	\$14,258	
FFY17 Increasing Immunization Rates	NH23IP000762	Amd 3, 4	93.268	333.93.26	07/01/18	06/30/19	07/01/18	06/30/19	\$16,134	\$16,134	\$16,134
FFY20 PPHF Ops	NH23IP922619	Amd 9	93.268	333.93.26	07/01/19	06/30/20	07/01/19	06/30/20	\$2,500	\$2,500	\$5,000
FFY17 PPHF Ops	NH23IP000762	Amd 3, 4	93.268	333.93.26	07/01/18	06/30/19	04/01/18	06/30/19	\$2,500	\$2,500	
FFY20 VFC IQIP	NH23IP922619	Amd 9	93.268	333.93.26	07/01/19	06/30/20	07/01/19	06/30/20	\$27,588	\$27,588	\$27,588
FFY20 VFC Ops	NH23IP922619	Amd 9	93.268	333.93.26	07/01/19	06/30/20	07/01/19	06/30/20	\$16,134	\$16,134	\$23,188
FFY17 VFC Ops	5NH23IP000762-05-00	N/A	93.268	333.93.26	01/01/18	06/30/18	04/01/17	06/30/18	\$7,054	\$7,054	
FFY19 Tobacco Prevention	U58DP006004	Amd 9	93.305	333.93.30	03/29/19	04/28/20	03/29/19	04/28/20	\$24,482	\$24,482	\$35,494
FFY19 Tobacco Prevention	U58DP006004	Amd 9	93.305	333.93.30	03/29/19	06/30/19	03/29/19	03/28/20	(\$6,120)	\$0	
FFY19 Tobacco Prevention	U58DP006004	Amd 8	93.305	333.93.30	03/29/19	06/30/19	03/29/19	03/28/20	\$6,120		
FFY18 Tobacco Prevention	U58DP006004	Amd 2	93.305	333.93.30	03/29/18	03/28/19	03/29/18	03/28/19	\$11,012	\$11,012	
FFY19 Phys Actvty & Nutrition Prog	NU58DP006504	Amd 10	93.439	333.93.43	09/30/19	09/29/20	09/30/19	09/29/20	\$60,000	\$60,000	\$120,000
FFY18 Phys Actvty & Nutrition Prog	NU58DP006504	Amd 8	93.439	333.93.43	03/01/19	09/29/19	09/28/18	09/29/19	\$60,000	\$60,000	
FFY17 TCPI PTN Contracts	1L1331455	Amd 1, 3	93.638	333.93.63	01/01/18	09/28/18	09/29/17	09/28/18	\$73,117	\$73,117	\$73,117
FFY18 PHBG Tobacco PPHF	NB01OT009234	Amd 4	93.758	333.93.75	10/01/18	09/30/19	10/01/18	09/30/19	\$40,000	\$40,000	\$69,034
FFY17 PHBG Tobacco PPHF	NB01OT00918	Amd 3	93.758	333.93.75	01/01/18	09/29/18	07/01/17	09/30/18	\$3,235	\$29,034	
FFY17 PHBG Tobacco PPHF	NB01OT00918	Amd 2, 3	93.758	333.93.75	01/01/18	09/29/18	07/01/17	09/30/18	\$5,799		
FFY17 PHBG Tobacco PPHF	NB01OT00918	N/A, Amd 3	93.758	333.93.75	01/01/18	09/29/18	07/01/17	09/30/18	\$20,000		
FFY17 EPR HPP BP1 Healthcare System Prep	NU90TP921889-01	Amd 2	93.889	333.93.88	01/01/18	06/30/18	07/01/17	07/02/18	\$4,477	\$18,420	\$18,420
FFY17 EPR HPP BP1 Healthcare System Prep	NU90TP921889-01	N/A	93.889	333.93.88	01/01/18	06/30/18	07/01/17	07/02/18	\$13,943		



Kitsap Public Health District

EXHIBIT B-11  
ALLOCATIONS  
Contract Term: 2018-2020

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FFY19 RW HIV Peer Nav Proj-Proviso	5X07HA000832800	Amd 8	93.917	333.93.91	04/01/19	06/30/19	04/01/19	06/30/19	\$14,353	\$14,353	\$71,765
FFY18 RW HIV Peer Nav Proj-Proviso	5X07HA000832800	Amd 4	93.917	333.93.91	04/01/18	03/31/19	04/01/18	03/31/19	\$22,871	\$57,412	
FFY18 RW HIV Peer Nav Proj-Proviso	5X07HA000832800	Amd 2, 4	93.917	333.93.91	04/01/18	03/31/19	04/01/18	03/31/19	\$34,541		
FFY18 RW HIV Provider Capacity-Proviso	5X07HA000832800	Amd 2, 4	93.917	333.93.91	04/01/18	03/31/19	04/01/18	03/31/19	\$30,695	\$30,695	\$30,695
FFY20 MCHBG LHJ Contracts	B04MC32578	Amd 10	93.994	333.93.99	10/01/19	09/30/20	10/01/19	09/30/20	\$159,854	\$159,854	\$439,599
FFY19 MCHBG LHJ Contracts	B04MC32578	Amd 4	93.994	333.93.99	10/01/18	09/30/19	10/01/18	09/30/19	\$159,854	\$159,854	
FFY18 MCHBG LHJ Contracts	B04MC31524	N/A	93.994	333.93.99	01/01/18	09/30/18	10/01/17	09/30/18	\$119,891	\$119,891	
GFS-Group B (FO-SW)		Amd 10	N/A	334.04.90	07/01/20	12/31/20	07/01/19	06/30/21	\$10,000	\$10,000	\$20,000
GFS-Group B (FO-SW)		Amd 10	N/A	334.04.90	07/01/19	06/30/20	07/01/19	06/30/21	\$10,000	\$10,000	
GFS-Group B (FO-SW)		Amd 3	N/A	334.04.90	01/01/18	06/30/18	07/01/17	06/30/19	(\$10,000)	\$0	
GFS-Group B (FO-SW)		N/A	N/A	334.04.90	01/01/18	06/30/18	07/01/17	06/30/19	\$10,000		
FY2 Group B Programs for DW (FO-SW)		Amd 3	N/A	334.04.90	07/01/18	06/30/19	07/01/18	06/30/19	\$10,000	\$10,000	\$30,000
FY1 Group B Programs for DW (FO-SW)		Amd 3	N/A	334.04.90	01/01/18	06/30/18	01/01/18	06/30/18	\$20,000	\$20,000	
Healthy Communities		Amd 10	N/A	334.04.91	07/01/19	06/30/20	07/01/19	06/30/21	\$3,425	\$3,425	\$3,425
State Drug User Health Program		Amd 9	N/A	334.04.91	07/01/19	06/30/20	07/01/19	06/30/21	\$40,000	\$40,000	\$94,478
State Drug User Health Program		Amd 8	N/A	334.04.91	01/01/19	06/30/19	07/01/18	06/30/19	\$54,478	\$54,478	
State HIV CS/End AIDS WA		Amd 8	N/A	334.04.91	01/01/19	06/30/19	07/01/17	06/30/19	\$2,083	\$12,496	\$23,948
State HIV CS/End AIDS WA		Amd 6	N/A	334.04.91	01/01/19	06/30/19	07/01/17	06/30/19	\$10,413		
State HIV CS/End AIDS WA		Amd 6	N/A	334.04.91	10/01/18	12/31/18	07/01/17	06/30/19	\$2,083	\$2,083	
State HIV CS/End AIDS WA		Amd 2	N/A	334.04.91	07/01/18	12/31/18	07/01/17	06/30/19	\$6,246	\$6,246	
State HIV CS/End AIDS WA		Amd 2	N/A	334.04.91	03/01/18	06/30/18	07/01/17	06/30/19	\$3,123	\$3,123	
State HIV Prevention		Amd 8	N/A	334.04.91	01/01/19	06/30/19	07/01/17	06/30/19	(\$43,333)	\$0	\$51,667
State HIV Prevention		Amd 6	N/A	334.04.91	01/01/19	06/30/19	07/01/17	06/30/19	\$43,333		
State HIV Prevention		Amd 6	N/A	334.04.91	07/01/18	12/31/18	07/01/17	06/30/19	\$11,667	\$31,667	
State HIV Prevention		N/A	N/A	334.04.91	07/01/18	12/31/18	07/01/17	06/30/19	\$20,000		
State HIV Prevention		N/A	N/A	334.04.91	01/01/18	06/30/18	07/01/17	06/30/19	\$20,000	\$20,000	
State HIV Prevention PrEP		Amd 3	N/A	334.04.91	07/01/18	06/30/19	07/01/17	06/30/19	\$9,172	\$9,172	\$13,758
State HIV Prevention PrEP		Amd 2	N/A	334.04.91	01/01/18	06/30/18	07/01/17	06/30/19	\$4,586	\$4,586	



Kitsap Public Health District

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SFY2 Lead Environments of Children		Amd 7	N/A	334.04.93	07/01/18	06/30/19	07/01/18	06/30/19	(\$3,000)	\$2,000	\$5,000
SFY2 Lead Environments of Children		Amd 4	N/A	334.04.93	07/01/18	06/30/19	07/01/18	06/30/19	\$5,000		
SFY1 Lead Environments of Children		Amd 1	N/A	334.04.93	01/01/18	06/30/18	07/01/17	06/30/18	\$3,000	\$3,000	
SFY20 Marijuana Education		Amd 10	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/20	\$5,950	\$5,950	\$5,950
SFY21 Marijuana Tobacco Edu		Amd 9	N/A	334.04.93	07/01/20	12/31/20	07/01/20	06/30/21	\$247,509	\$247,509	\$898,341
SFY20 Marijuana Tobacco Edu		Amd 9	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/20	\$247,509	\$247,509	
SFY19 Marijuana Tobacco Edu		Amd 3	N/A	334.04.93	07/01/18	06/30/19	07/01/18	06/30/19	\$247,509	\$247,509	
SFY19 Marijuana Tobacco Edu		Amd 2	N/A	334.04.93	07/01/18	06/30/19	07/01/18	06/30/19	\$7,501	\$7,501	
SFY18 Marijuana Tobacco Edu		Amd 3	N/A	334.04.93	01/01/18	06/30/18	07/01/17	06/30/18	\$49,558	\$148,313	
SFY18 Marijuana Tobacco Edu		N/A	N/A	334.04.93	01/01/18	06/30/18	07/01/17	06/30/18	\$98,755		
Rec Shellfish/Biotoxin		Amd 9	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/21	\$15,000	\$15,000	\$37,500
Rec Shellfish/Biotoxin		N/A	N/A	334.04.93	01/01/18	06/30/19	07/01/17	06/30/19	\$22,500	\$22,500	
Small Onsite Management (ALEA)		Amd 9	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/21	\$45,000	\$45,000	\$75,000
Small Onsite Management (ALEA)		Amd 5	N/A	334.04.93	07/01/18	06/30/18	07/01/17	06/30/19	\$15,662	\$15,662	
Small Onsite Management (ALEA)		Amd 5	N/A	334.04.93	01/01/18	06/30/18	07/01/17	06/30/19	(\$15,662)	\$14,338	
Small Onsite Management (ALEA)		N/A, Amd 5	N/A	334.04.93	01/01/18	06/30/18	07/01/17	06/30/19	\$30,000		
Wastewater Management-GFS		Amd 9	N/A	334.04.93	07/01/20	12/31/20	07/01/19	06/30/21	\$15,000	\$15,000	\$45,000
Wastewater Management-GFS		N/A	N/A	334.04.93	07/01/18	06/30/19	07/01/17	06/30/19	\$30,000	\$30,000	
<b>FPH-Youth Tobacco Vapor Prevention</b>		<b>Amd 11</b>	<b>N/A</b>	<b>334.04.93</b>	07/01/19	06/30/20	07/01/19	06/30/21	<b>\$24,512</b>	<b>\$24,512</b>	<b>\$24,512</b>
<b>Youth Tobacco Vapor Products</b>		<b>Amd 11</b>	<b>N/A</b>	<b>334.04.93</b>	07/01/19	06/30/20	07/01/19	06/30/21	<b>(\$8,451)</b>	<b>\$38,403</b>	<b>\$121,091</b>
Youth Tobacco Vapor Products		Amd 9	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/21	\$46,854		
Youth Tobacco Vapor Products		Amd 6	N/A	334.04.93	01/01/18	06/30/19	07/01/17	06/30/19	\$36,000	\$82,688	
Youth Tobacco Vapor Products		Amd 2, 6	N/A	334.04.93	01/01/18	06/30/19	07/01/17	06/30/19	\$25,544		
Youth Tobacco Vapor Products		Amd 2, 6	N/A	334.04.93	01/01/18	06/30/19	07/01/17	06/30/19	\$4,655		
Youth Tobacco Vapor Products		N/A, Amd 6	N/A	334.04.93	01/01/18	06/30/19	07/01/17	06/30/19	\$16,489		
ADAP Rebate (Local) 19-21		Amd 9	N/A	334.04.98	07/01/19	06/30/20	07/01/19	06/30/21	\$91,728	\$91,728	\$91,728

Kitsap Public Health District

**EXHIBIT B-11**  
**ALLOCATIONS**  
**Contract Term: 2018-2020**

**Contract Number:** CLH18248  
**Date:** September 16, 2019

**Indirect Rate as of January 2018: 34.98% Admin & Fac.; 37.62% Community Hlth Pgms (inc. Admin) & 40.39% Environmental Hlth Pgms (inc. Admin)**  
**Indirect Rate as of January 2019: 37.38% Admin & Fac.; 39.19% Community Hlth Pgms (inc. Admin) & 39.83% Environmental Hlth Pgms (inc. Admin)**

Chart of Accounts Program Title	Federal Award Identification #	Amend #	CFDA*	BARS Revenue Code**	Statement of Work Funding Period		DOH Use Only Chart of Accounts Funding Period		Amount	Funding Period Sub Total	Chart of Accounts Total
					Start Date	End Date	Start Date	End Date			
FFY17 ADAP Rebate (Local) 17-19		Amd 5	N/A	334.04.98	07/01/18	06/30/19	07/01/17	06/30/19	(\$225,000)	\$82,556	\$348,834
FFY17 ADAP Rebate (Local) 17-19		Amd 3	N/A	334.04.98	07/01/18	06/30/19	07/01/17	06/30/19	\$82,556		
FFY17 ADAP Rebate (Local) 17-19		N/A, Amd 3	N/A	334.04.98	07/01/18	06/30/19	07/01/17	06/30/19	\$225,000		
FFY17 ADAP Rebate (Local) 17-19		Amd 2	N/A	334.04.98	01/01/18	06/30/18	07/01/17	06/30/19	\$41,278	\$266,278	
FFY17 ADAP Rebate (Local) 17-19		N/A	N/A	334.04.98	01/01/18	06/30/18	07/01/17	06/30/19	\$225,000		
SFY17 Managed Care Org		Amd 1	N/A	334.04.98	01/01/18	06/30/18	07/01/17	06/30/18	(\$32,678)	\$6,536	\$6,536
SFY17 Managed Care Org		N/A	N/A	334.04.98	01/01/18	06/30/18	07/01/17	06/30/18	\$39,214		
FFY20 RW Grant Year Local (Rebate)		Amd 9	N/A	334.04.98	04/01/20	06/30/20	04/01/20	03/31/21	\$116,146	\$116,146	\$914,043
FFY19 RW Grant Year Local (Rebate)		Amd 9	N/A	334.04.98	07/01/19	03/31/20	04/01/19	03/31/20	\$348,437	\$348,437	
FFY19 RW Grant Year Local (Rebate)		Amd 6	N/A	334.04.98	04/01/19	06/30/19	04/01/19	03/31/20	\$112,230	\$112,230	
FFY18 RW Grant Year Local (Rebate)		Amd 6	N/A	334.04.98	01/01/19	03/31/19	04/01/18	03/31/19	\$112,230	\$112,230	
FFY18 RW Grant Year Local (Rebate)		Amd 5	N/A	334.04.98	07/01/18	03/31/19	04/01/18	03/31/19	\$225,000	\$225,000	
FFY19 RW Local Proviso		Amd 9	N/A	334.04.98	07/01/19	06/30/20	07/01/19	06/30/20	\$41,749	\$41,749	\$41,749
FPHS Funding for LHJs		Amd 10	N/A	336.04.25	07/01/20	12/31/20	07/01/19	06/30/21	\$147,345	\$147,345	\$442,035
FPHS Funding for LHJs		Amd 10	N/A	336.04.25	07/01/19	06/30/20	07/01/19	06/30/21	\$147,345	\$147,345	
FPHS Funding for LHJs Dir		Amd 3	N/A	336.04.25	07/01/18	06/30/19	07/01/17	06/30/19	\$147,345	\$147,345	
YR 20 SRF - Local Asst (15%) (FS) SS		Amd 3	N/A	346.26.64	01/01/18	12/31/18	07/01/15	12/31/18	(\$14,750)	\$0	\$0
YR 20 SRF - Local Asst (15%) (FS) SS		N/A, Amd 3	N/A	346.26.64	01/01/18	12/31/18	07/01/15	12/31/18	\$14,750		
YR 21 SRF - Local Asst (15%) (FS) SS		Amd 10	N/A	346.26.64	01/01/18	06/30/19	07/01/17	06/30/19	(\$13,250)	\$14,250	\$14,250
YR 21 SRF - Local Asst (15%) (FS) SS		Amd 6, 10	N/A	346.26.64	01/01/18	06/30/19	07/01/17	06/30/19	\$12,750		
YR 21 SRF - Local Asst (15%) (FS) SS		Amd 3, 6, 10	N/A	346.26.64	01/01/18	06/30/19	07/01/17	06/30/19	\$14,750		
YR 22 SRF - Local Asst (15%) (FO-SW) SS		Amd 10	N/A	346.26.64	01/01/19	12/31/19	07/01/19	06/30/21	\$12,750	\$12,750	\$12,750
YR 20 SRF - Local Asst (15%) (FS) TA		Amd 3	N/A	346.26.66	01/01/18	12/31/18	07/01/15	12/31/18	(\$2,000)	\$0	\$0
YR 20 SRF - Local Asst (15%) (FS) TA		N/A, Amd 3	N/A	346.26.66	01/01/18	12/31/18	07/01/17	12/31/18	\$2,000		
YR 20 SRF - Prog Mgmt (10%) (FS) TA		Amd 6	N/A	346.26.66	01/01/18	12/31/18	07/01/15	12/31/18	\$468	\$1,268	\$1,268
YR 20 SRF - Prog Mgmt (10%) (FS) TA		Amd 3	N/A	346.26.66	01/01/18	12/31/18	07/01/15	12/31/18	\$800		

Kitsap Public Health District

**EXHIBIT B-11  
ALLOCATIONS  
Contract Term: 2018-2020**

**Contract Number: CLH18248  
Date: September 16, 2019**

**Indirect Rate as of January 2018: 34.98% Admin & Fac.; 37.62% Community Hlth Pgms (inc. Admin) & 40.39% Environmental Hlth Pgms (inc. Admin)**

**Indirect Rate as of January 2019: 37.38% Admin & Fac.; 39.19% Community Hlth Pgms (inc. Admin) & 39.83% Environmental Hlth Pgms (inc. Admin)**

Chart of Accounts Program Title	Federal Award Identification #	Amend #	CFDA*	BARS Revenue Code**	Statement of Work Funding Period		DOH Use Only Chart of Accounts Funding Period		Amount	Funding Period Sub Total	Chart of Accounts Total
					Start Date	End Date	Start Date	End Date			
YR 21 SRF - Local Asst (15%) (FS) TA		Amd 10	N/A	346.26.66	01/01/18	06/30/19	07/01/17	06/30/19	(\$1,249)	\$1,900	\$1,900
YR 21 SRF - Local Asst (15%) (FS) TA		Amd 6, 10	N/A	346.26.66	01/01/18	06/30/19	07/01/17	06/30/19	\$1,949		
YR 21 SRF - Local Asst (15%) (FS) TA		Amd 3, 6, 10	N/A	346.26.66	01/01/18	06/30/19	07/01/17	06/30/19	\$1,200		
YR 22 SRF - Local Asst (15%) (FO-SW) TA		Amd 10	N/A	346.26.66	01/01/19	12/31/19	07/01/19	06/30/21	\$1,249	\$1,249	\$1,249
<b>TOTAL</b>									<b>\$5,705,177</b>	<b>\$5,705,177</b>	
<b>Total consideration:</b>	<b>\$5,639,116</b>									<b>GRAND TOTAL</b>	<b>\$5,705,177</b>
	<b>\$66,061</b>										
<b>GRAND TOTAL</b>	<b>\$5,705,177</b>									<b>Total Fed</b>	<b>\$2,379,165</b>
										<b>Total State</b>	<b>\$3,326,012</b>

\*Catalog of Federal Domestic Assistance

\*\*Federal revenue codes begin with "333". State revenue codes begin with "334".

# Exhibit C-11 Schedule of Federal Awards

AMENDMENT #11

Date: September 16, 2019

KITSAP PUBLIC HEALTH DISTRICT-SWV0027359-00  
CONTRACT CLH18248-Kitsap Public Health District  
CONTRACT PERIOD: 01/01/2018-12/31/2020

Chart of Accounts Program Title	BARS	DOH Federal Award Date	Total Amt Federal Award	Allocation Period Start Date	End Date	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Award Identification Number	Federal Grant Award Name
FFY20 CSS USDA FINI PROGRAM MGMT	333.10.33	NGA Not Received	NGA Not Received	10/01/19	03/31/20	\$25,000	10.331	Food Insecurity Nutrition Incentive Grants	USDA-National Institute of Food and Agriculture	NGA Not Received	NGA Not Received
FFY19 CSS USDA FINI PROGRAM MGMT	333.10.33	08/26/15	\$5,859,307	10/01/18	09/30/19	\$78,347	10.331	Food Insecurity Nutrition Incentive Grants	USDA-National Institute of Food and Agriculture	20157001823357	WASHINGTON STATE DEPARTMENT OF HEALTH FINI GRANT PROJECT
FFY18 CSS USDA FINI PROGRAM MGMT	333.10.33	08/26/15	\$5,859,307	01/01/18	09/30/18	\$42,500	10.331	Food Insecurity Nutrition Incentive Grants	USDA-National Institute of Food and Agriculture	20157001823357	WASHINGTON STATE DEPARTMENT OF HEALTH FINI GRANT PROJECT
FFY20 CSS IAR SNAP ED PROG MGNT-REGION 5	333.10.56	NGA Not Received	NGA Not Received	10/01/19	09/30/20	\$83,000	10.561	State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	Department of Agriculture Food and Nutrition Service	NGA Not Received	NGA Not Received
FFY19 CSS IAR SNAP-ED PROG MGNT	333.10.56	09/28/18	\$5,386,268	10/01/18	09/30/19	\$69,875	10.561	State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	Department of Agriculture Food and Nutrition Service	197WAWA5Q3903	SNAP 2YR NUTRITION ED OBESITY
FFY18 CSS IAR SNAP-ED PROGRAM MGNT CF	333.10.56	09/28/17	\$5,300,000	10/01/18	09/30/19	\$13,833	10.561	State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	Department of Agriculture Food and Nutrition Service	187WAWA5Q3903	2018 SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM EDUCATION (SNAP-ED)
FFY18 CSS IAR SNAP-ED PROGRAM MGNT	333.10.56	09/28/17	\$5,300,000	01/01/18	09/30/18	\$69,281	10.561	State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	Department of Agriculture Food and Nutrition Service	187WAWA5Q3903	2018 SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM EDUCATION (SNAP-ED)
FFY17 CSS IAR SNAP-ED PROGRAM MGNT CF	333.10.56	09/10/16	\$5,739,856	01/01/18	09/30/18	\$6,917	10.561	State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	Department of Agriculture Food and Nutrition Service	1717WAWA5Q390	2018 SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM EDUCATION (SNAP-ED)
FFY19 HOUSING PEOPLE WITH AIDS FORMULA	333.14.24	08/07/18	\$955,996	07/01/19	06/30/20	\$53,379	14.241	Housing Opportunities for Persons with AIDS	Department of Housing and Urban Development	WAH18-F999	HOUSING OPPORTUNITIES FOR PERSON WITH AIDS (HOPWA) PROGRAM
FFY18 HOUSING PEOPLE WITH AIDS FORMULA	333.14.24	08/07/18	\$955,996	07/01/18	06/30/19	\$88,023	14.241	Housing Opportunities for Persons with AIDS	Department of Housing and Urban Development	WAH18-F999	HOUSING OPPORTUNITIES FOR PERSON WITH AIDS (HOPWA) PROGRAM
PS SSI 1-5 PIC TASK 4	333.66.12	08/02/16	\$9,200,000	01/01/18	09/30/19	\$28,805	66.123	Puget Sound Action Agenda: Technical Investigations and Implementation Assistance Program	Environmental Protection Agency Region 10	01J18001	PUGET SOUND SHELLFISH STRATEGIC INITIATIVE LEAD
PS SSI 1-5 BEACH TASK 4	333.66.12	08/02/16	\$9,200,000	03/01/18	10/31/19	\$11,600	66.123	Puget Sound Action Agenda: Technical Investigations and Implementation Assistance Program	Environmental Protection Agency Region 10	01J18001	PUGET SOUND SHELLFISH STRATEGIC INITIATIVE LEAD
FFY19 SWIMMING BEACH ACT GRANT IAR (ECY)	333.66.47	12/01/18	\$91,991	03/01/19	10/31/19	\$14,000	66.472	Beach Monitoring and Notificaiton Program Implementation Grants	Environmental Protection Agency Office of Water	01J49701	MARINE SWIMMING BEACH MONITORING AND PUBLIC NOTIFICATION
FFY18 SWIMMING BEACH ACT GRANT IAR (ECY)	333.66.47	12/15/17	\$91,990	03/01/18	10/31/18	\$14,000	66.472	Beach Monitoring and Notificaiton Program Implementation Grants	Environmental Protection Agency Office of Water	00J75501	MARINE SWIMMING BEACH MONITORING AND PUBLIC NOTIFICATION
FFY19 PHEP BP1 LHJ FUNDING	333.93.06	06/29/19	\$11,307,904	07/01/19	06/30/20	\$295,345	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP922043	PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) COOPERATIVE AGREEMENT

# Exhibit C-11 Schedule of Federal Awards

AMENDMENT #11

Date: September 16, 2019

KITSAP PUBLIC HEALTH DISTRICT-SWV0027359-00  
CONTRACT CLH18248-Kitsap Public Health District  
CONTRACT PERIOD: 01/01/2018-12/31/2020

Chart of Accounts Program Title	BARS	DOH Federal Award Date	Total Amt Federal Award	Allocation Period Start Date End Date	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Award Identification Number	Federal Grant Award Name
FFY18 EPR PHEP BP1 SUPP LHJ FUNDING	333.93.06	08/01/18	\$11,062,782	07/01/18 06/30/19	\$295,345	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921889-01	HOSPITAL PREPAREDNESS PROGRAM AND PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT
FFY17 EPR PHEP BP1 LHJ FUNDING	333.93.06	07/18/17	\$11,062,782	01/01/18 06/30/18	\$163,223	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921889-01	HOSPITAL PREPAREDNESS PROGRAM AND PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT
FFY19 OVERDOSE DATA TO ACTION PREV	333.93.13	08/12/19	\$4,390,240	09/01/19 08/31/20	\$50,000	93.136	Injury Prevention and Control Research and State and Community-Based Programs	Department of Health and Human Services-Centers for Disease Control and Prevention-National Center for Injury Prevention and Control	NU17CE925007	WASHINGTON STATE DEPARTMENT OF HEATLH OVERDOSE DATA TO ACTION
FFY20 VFC OPS	333.93.26	07/01/19	\$9,234,835	07/01/19 06/30/20	\$16,134	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY20 VFC IQIP	333.93.26	07/01/19	\$9,234,835	07/01/19 06/30/20	\$27,588	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY20 PPHF OPS	333.93.26	07/01/19	\$9,234,835	07/01/19 06/30/20	\$2,500	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY17 VFC OPS	333.93.26	03/03/17	\$1,201,605	01/01/18 06/30/18	\$7,054	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	5NH23IP000762-05-00	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY17 PPHF OPS	333.93.26	06/29/18	\$3,634,512	07/01/18 06/30/19	\$2,500	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP000762	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY17 INCREASING IMMUNIZATION RATES	333.93.26	06/29/18	\$1,722,443	07/01/18 06/30/19	\$16,134	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP000762	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY17 AFIX	333.93.26	03/03/17	\$1,672,289	01/01/18 06/30/19	\$41,821	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	5NH23IP000762-05-00	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY17 317 OPS	333.93.26	03/03/17	\$575,969	01/01/18 06/30/18	\$4,837	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	5NH23IP000762-05-00	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY19 TOBACCO PREVENTION	333.93.30	03/04/19	\$5,538,507	03/29/19 04/28/20	\$24,482	93.305	National State Based Tobacco Control Programs	Department of Health and Human Services Centers for Disease Control and Prevention	NU58DP006004	TOBACCO CONTROL PROGRAM
FFY18 TOBACCO PREVENTION	333.93.30	03/22/18	\$1,081,051	03/29/18 03/29/19	\$11,012	93.305	National State Based Tobacco Control Programs	Department of Health and Human Services Centers for Disease Control and Prevention	U58DP006004	TOBACCO CONTROL PROGRAM
FFY19 PHYS ACTVTY & NUTRITION PROG	333.93.43	NGA Not Received	NGA Not Received	09/30/19 09/29/20	\$60,000	93.439	State Physical Activity and Nutrition (SPAN)	Department of Health and Human Services	NGA Not Received	NGA Not Received
FFY18 PHYS ACTVTY & NUTRITION PROG	333.93.43	09/01/18	\$923,000	03/01/19 09/29/19	\$60,000	93.439	State Physical Activity and Nutrition (SPAN)	Department of Health and Human Services	NU58DP006504	STATE PHYSICAL ACTIVITY AND NUTRITION-WASHINGTON (SPANWA)

Exhibit C-11 Schedule of Federal Awards

AMENDMENT #11

Date: September 16, 2019

KITSAP PUBLIC HEALTH DISTRICT-SWV0027359-00  
CONTRACT CLH18248-Kitsap Public Health District  
CONTRACT PERIOD: 01/01/2018-12/31/2020

Chart of Accounts Program Title	BARS	DOH Federal Award Date	Total Amt Federal Award	Allocation Period		Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Award Identification Number	Federal Grant Award Name
FFY17 TCPI PTN CONTRACTS	333.93.63	09/24/15	\$11,254,883	01/01/18	09/28/18	\$73,117	93.638	ACA-Transforming Clinical Practice Initiative: Practice Transformation Networks (PTNs)	Department of Health and Human Services Centers for Medicare and Medicaid Services	1L1331455	TRANSFORMING CLINICAL PRACTICES INITIATIVE
FFY18 PHBG TOBACCO PPHF	333.93.75	08/31/18	\$1,675,032	10/01/18	09/30/19	\$40,000	93.758	Preventive Health and Health Services Block Grant funded solely with Prevention and Public Health Funds (PPHF)	Department of Health and Human Services Health Centers for Disease Control and Prevention	NB01OT009234	PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT 2018
FFY17 PHBG TOBACCO PPHF	333.93.75	03/09/17	\$1,557,831	01/01/18	09/29/18	\$29,034	93.758	Preventive Health and Health Services Block Grant funded solely with Prevention and Public Health Funds (PPHF)	Department of Health and Human Services Health Centers for Disease Control and Prevention	NB01OT00918	PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT
FFY17 EPR HPP BP1 HEALTHCARE SYS PREP	333.93.88	07/18/17	\$4,279,234	01/01/18	06/30/18	\$18,420	93.889	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921889-01	HPP AND PHEP COOPERATIVE AGREEMENT
FFY19 RW HIV PEER NAV PROJ-PROVISO	333.93.91	04/02/18	\$13,631,623	04/01/19	06/30/19	\$14,353	93.917	HIV Care Formula Grants	Department of Health and Human Services Health Resources and Services Administration	5X07HA000832800	RYAN WHITE CARE ACT TITLE II
FFY18 RW HIV PROVIDER CAPACITY-PROVISO	333.93.91	04/02/18	\$13,631,623	04/01/18	03/31/19	\$30,695	93.917	HIV Care Formula Grants	Department of Health and Human Services Health Resources and Services Administration	5X07HA000832800	RYAN WHITE CARE ACT TITLE II
FFY18 RW HIV PEER NAV PROJ-PROVISO	333.93.91	04/02/18	\$13,631,623	04/01/18	03/31/19	\$57,412	93.917	HIV Care Formula Grants	Department of Health and Human Services Health Resources and Services Administration	5X07HA000832800	RYAN WHITE CARE ACT TITLE II
FFY20 MCHBG LHJ CONTRACTS	333.93.99	11/14/18	\$2,225,977	10/01/19	09/30/20	\$159,854	93.994	Maternal and Child Health Services Block Grant to the States	Department of Health and Human Services Health Resources and Services Administration	B04MC32578	MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT
FFY19 MCHBG LHJ CONTRACTS	333.93.99	11/14/18	\$2,225,977	10/01/18	09/30/19	\$159,854	93.994	Maternal and Child Health Services Block Grant to the States	Department of Health and Human Services Health Resources and Services Administration	B04MC32578	MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT
FFY18 MCHBG LHJ CONTRACTS	333.93.99	10/20/17	\$1,650,528	01/01/18	09/30/18	\$119,891	93.994	Maternal and Child Health Services Block Grant to the States	Department of Health and Human Services Health Resources and Services Administration	B04MC31524	MATERNAL AND CHILD HEALTH SERVICES
TOTAL						\$2,379,165					

**DATA SHARING AGREEMENT**  
**FOR**  
**CONFIDENTIAL INFORMATION OR LIMITED DATASET(S)**  
**BETWEEN**  
**STATE OF WASHINGTON DEPARTMENT OF HEALTH**  
**AND**  
**CONTRACTORS, LOCAL HEALTH JURISDICTIONS OR OTHER INFORMATION**  
**RECIPIENTS**

This Agreement documents the conditions under which the Washington State Department of Health shares confidential information, access to data from a statewide data system operated by the Washington State Department of Health, or limited Dataset(s) with other entities.

**CONTACT INFORMATION FOR ENTITIES RECEIVING AND PROVIDING INFORMATION**

	<b>INFORMATION PROVIDER</b>	<b>INFORMATION RECIPIENT</b>
Organization Name	Washington State Department of Health (DOH)	Local Health Jurisdiction: Kitsap Public Health District
<b>Business Contact Name</b>	Jerrod Davis	Siri Kushner
Title	Assistant Secretary of Health	Assistant Community Health Director
Address		345 6 <sup>th</sup> Street, Suite 300 Bremerton WA 98337
Telephone #	360-236-4204	360-728-2224
Email Address	Jerrod.davis@doh.wa.gov	<a href="mailto:Siri.kushner@kitsappublichealth.org">Siri.kushner@kitsappublichealth.org</a>
<b>IT Security Contact</b>	Tracy Auldredge	Ed North
Title	DOH Chief Information Security Officer	Program Manager Information Technology
Address	PO Box 49704 Olympia, WA 98504	345 6 <sup>th</sup> Street, Suite 300 Bremerton WA 98337
Telephone #	360-236-4432	360-728-2268
Email Address	<a href="mailto:tracy.auldredge@doh.wa.gov">tracy.auldredge@doh.wa.gov</a>	<a href="mailto:Ed.north@kitsappublichealth.org">Ed.north@kitsappublichealth.org</a>
<b>Privacy Contact Name</b>		April Fisk
Title	DOH Chief Information Governance Officer	Program Coordinator 2
Address	P. O. Box 47890 Olympia, WA 98504-7890	345 6 <sup>th</sup> Street, Suite 300 Bremerton WA 98337
Telephone #	(360) 236-4237	360-728-2232
Email Address	privacy.officer@doh.wa.gov	April.fisk@kitsappublichealth.org



## **DEFINITIONS**

**Authorized user** means a recipient's employees, agents, assigns, representatives, independent contractors, or other persons or entities authorized by the data recipient to access, use or disclose information through this agreement.

**Authorized user agreement** means the confidentiality agreement a recipient requires each of its Authorized Users to sign prior to gaining access to Public Health Information.

**Breach of confidentiality** means unauthorized access, use or disclosure of information received under this agreement. Disclosure may be oral or written, in any form or medium.

**Breach of security** means an action (either intentional or unintentional) that bypasses security controls or violates security policies, practices, or procedures.

**Confidential information** means information that is protected from public disclosure by law. There are many state and federal laws that make different kinds of information confidential. In Washington State, the two most common are the Public Records Act RCW 42.56, and the Healthcare Information Act, RCW 70.02.

**Data storage** means electronic media with information recorded on it, such as CDs/DVDs, computers and similar devices.

**Data transmission** means the process of transferring information across a network from a sender (or source), to one or more destinations.

**Direct identifier** Direct identifiers in research data or records include names; postal address information ( other than town or city, state and zip code); telephone numbers, fax numbers, e-mail addresses; social security numbers; medical record numbers; health plan beneficiary numbers; account numbers; certificate /license numbers; vehicle identifiers and serial numbers, including license plate numbers; device identifiers and serial numbers; web universal resource locators (URLs); internet protocol (IP) address numbers; biometric identifiers, including finger and voice prints; and full face photographic images and any comparable images.

**Disclosure** means to permit access to or release, transfer, or other communication of confidential information by any means including oral, written, or electronic means, to any third party except the party identified or the party that provided or created the record.

**Encryption** means the use of algorithms to encode data making it impossible to read without a specific piece of information, which is commonly referred to as a "key". Depending on the type of information shared, encryption may be required during data transmissions, and/or data storage.

**Health care information** means any information, whether oral or recorded in any form or medium, that identifies or can readily be associated with the identity of a patient and directly relates to the patient's health care....” RCW 70.02.010(7)

**Health information** is any information that pertains to health behaviors, human exposure to environmental contaminants, health status, and health care. Health information includes health

care information as defined by RCW 70.02.010 and health related data as defined in RCW 43.70.050.

**Health Information Exchange (HIE)** means the statewide hub that provides technical services to support the secure exchange of health information between HIE participants.

**Human subjects research; human subject** means a living individual about whom an investigator (whether professional or student) conducting research obtains (1) data through intervention or interaction with the individual, or (2) identifiable private information.

**Human research review** is the process used by institutions that conduct human subject research to ensure that:

- the rights and welfare of human subjects are adequately protected;
- the risks to human subjects are minimized, are not unreasonable, and are outweighed by the potential benefits to them or by the knowledge gained; and
- the proposed study design and methods are adequate and appropriate in light of the stated research objectives.

Research that involves human subjects or their identifiable personal records should be reviewed and approved by an institutional review board (IRB) per requirements in federal and state laws and regulations and state agency policies.

**Identifiable data or records** contains information that reveals or can likely associate the identity of the person or persons to whom the data or records pertain. Research data or records with direct identifiers removed, but which retain indirect identifiers, are still considered identifiable.

**Indirect identifiers** are indirect identifiers in research data or records that include all geographic identifiers smaller than a state, including, city, county, precinct, Zip code, and their equivalent postal codes, except for the initial three digits of a ZIP code; all elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, date of death; and all ages over 89 and all elements of dates (including year) indicative of such age, except that such age and elements may be aggregated into a single category of age 90 or older.

**Limited dataset** means a data file that includes potentially identifiable information. A limited dataset does not contain direct identifiers.

**Normal business hours** are state business hours Monday through Friday from 8:00 a.m. to 5:00 p.m. except state holidays.

**Potentially identifiable information** means information that includes indirect identifiers which may permit linking an individual to that person's health care information. Examples of potentially identifiable information include:

- birth dates;
- admission, treatment or diagnosis dates;
- healthcare facility codes;
- other data elements that may identify an individual. These vary depending on factors such as the geographical location and the rarity of a person's health condition, age, or other characteristic.

**Restricted confidential information** means confidential information where especially strict handling requirements are dictated by statutes, rules, regulations or contractual agreements. Violations may result in enhanced legal sanctions.

**State holidays** Days of the week excluding weekends and state holidays; namely, New Year's Day, Martin Luther King Jr. Day, President's Day, Memorial Day, Labor Day, Independence Day, Veterans' Day, Thanksgiving day, the day after Thanksgiving day, and Christmas. Note: When January 1, July 4, November 11 or December 25 falls on Saturday, the preceding Friday is observed as the legal holiday. If these days fall on Sunday, the following Monday is the observed holiday.

**Statewide data system operated by the Washington State Department of Health** means a data system that the Washington State Department of Health operates and controls for the benefit and use of all local health jurisdictions.

# TERMS AND CONDITIONS

## I. PURPOSE

The purpose of this data sharing agreement is to allow local health jurisdictions access to all Washington residents' patient level hepatitis B virus (HBV) and hepatitis C virus (HCV) data in the following statewide data system operated and controlled by the Washington State Department of Health: Washington Disease Reporting System (WDRS). It is necessary to share these data across health jurisdictions continuously because chronic HBV or HCV infected individuals can live for decades with the disease and furthermore their jurisdiction of residence is no longer remaining stable throughout the course of their illness. The ability to view public health information about an infected individual across jurisdictional borders will support more effective and efficient public health practices by eliminating duplicative work across local health departments within the state of Washington. Access to statewide data across local health jurisdictions is provided for the purpose of conducting disease case investigations and implementing effective public health intervention strategies to mitigate the further spread of disease within Washington state. The audience for case information stored in WDRS is public health professionals working within one of the 35 local health jurisdictions (LHJ) in WA state or a contract public health professional working with one of those 35 LHJs who has signed the Use and Disclosure of Confidential Information document set forth in Appendix A.

## II. DESCRIPTION OF INFORMATION

- A. TYPE OF INFORMATION: Information Provider will make available the following information under this Agreement:

Case information for all of the HBV and HCV cases residing in the local health jurisdictions that have signed this Agreement across the entire HBV and HCV model within WDRS.

The information described in this section is:

Restricted Confidential Information (Category 4)

Any reference to data/information in this Agreement shall be the data/information as described above.

- B. USE OF INFORMATION: Information recipients may download, copy, and use data that pertain to individuals residing within their jurisdiction for the purpose of public health investigations and disease intervention strategies, internal planning and analysis, and presentation and publication involving HBV or HCV. Information recipients shall not publish data nor engage in disease investigations\* from the shared statewide system when those data pertain to individuals residing in other local health jurisdictions (that are not, in the case of health districts, within the jurisdiction in which districts have legal authority to enforce and lead public health investigations and disease intervention strategies), but they may be used for internal planning purposes).

\*Exclusions are when there is approval from the other jurisdiction's disease control

officer or other senior staff, or when one jurisdiction is aware of an emergency need for investigation/intervention that the other jurisdiction cannot address in a timely fashion. In that later situation, the other jurisdiction must be notified of the investigation/intervention as soon as possible, and no later than two working days.

The Information Recipient agrees to strictly limit use of information obtained or created under this Agreement to the purposes stated above. For example, the Information Recipient agrees not to:

- Disclose information received under this Agreement for any non-public health purpose.
- Use information received under this Agreement to contact individuals residing outside of any recipients' jurisdiction without the consent of the health officer or other senior staff from the current jurisdiction of residence (emergency situations excluded, such as in the case of an impending delivery of an HBV-infected mother where there has been no prenatal care).

The Information Recipient shall construe this clause to provide the maximum protection of the information that the law allows.

C. **STATUTORY AUTHORITY TO SHARE INFORMATION:** DOH statutory authority to disclose the confidential information or limited Dataset(s) identified in this Agreement to the Information Recipient: RCW 70.02.050(2)(b), which allows disclosure of non-STD health care information without the patient's authorization when needed to protect the public health. As discussed above in Section 1, access to statewide HBV and HBC data across local health jurisdictions allows local health to effectively conduct disease case investigations within their jurisdictions and protect public health by implementing effective public health intervention strategies to mitigate the further spread of disease within Washington state. In addition, RCW 70.02.220(7) also allows disclosure of information and records related to sexually transmitted disease to local public health authorities when needed to protect public health.

D. **ACCESS TO INFORMATION:**

- **METHOD OF ACCESS/TRANSFER**

DOH Web Application: Washington Disease Reporting System (WDRS)

- **FREQUENCY OF ACCESS/TRANSFER**

As available within the period of performance stated in Paragraph XXI of the Agreement

## E. RIGHTS IN INFORMATION

Information Recipient agrees to provide, if requested, copies of any research papers or reports prepared as a result of access to DOH information under this Agreement for DOH review prior to publishing or distributing.

In no event shall the Information Provider be liable for any damages, including, without limitation, damages resulting from lost information or lost profits or revenue, the costs of recovering such Information, the costs of substitute information, claims by third parties or for other similar costs, or any special, incidental, or consequential damages, arising out of the use of the information. The accuracy or reliability of the Information is not guaranteed or warranted in any way and the information Provider's disclaim liability of any kind whatsoever, including, without limitation, liability for quality, performance, merchantability and fitness for a particular purpose arising out of the use, or inability to use the information.

Please submit the following:

Copies of research papers or reports to the attention of:  
Jerrod Davis, Assistant Secretary of Health  
(electronic copies will be provided).

## III. SAFEGUARDING INFORMATION

### A. CONFIDENTIALITY

Information Recipient agrees to:

- Follow DOH small numbers standards as well as dataset specific small numbers requirements. (Appendix D) Exceptions may be made with the approval of each jurisdictions health officer or other senior official.
- Limit access and use of the information:
  - To the minimum amount of information.
  - To the fewest people.
  - For the least amount of time required to do the work.
- Assure that all people with access to the information understand their responsibilities regarding it.
- Assure that every person (e.g., employee or agent) with access to the information signs and dates the "Use and Disclosure of Confidential Information Form" (Appendix A) before accessing the information.
  - Retain a copy of the signed and dated form as long as required in Data Disposition Section.

The Information Recipient acknowledges the obligations in this section survive completion, cancellation, expiration or termination of this Agreement.

## B. SECURITY

The Information Recipient assures that its security practices and safeguards meet Washington State Office of the Chief Information Officer (OCIO) security standard 141.10 [\*Securing Information Technology Assets\*](#).

For the purposes of this Agreement, compliance with the HIPAA Security Standard and all subsequent updates meets OCIO standard 141.10 “Securing Information Technology Assets.”

The Information Recipient agrees to adhere to the Data Security Requirements in Appendix B. The Information Recipient further assures that it has taken steps necessary to prevent unauthorized access, use, or modification of the information in any form.

The Information Recipient agrees to notify the DOH Chief Information Security Officer (or other senior DOH official who will then notify the DOH Chief Security Officer, such as the “Overall Responsible Person”) within two (2) business days of any suspected or actual confidentiality or security breach.

## C. BREACH NOTIFICATION

The Information Recipient shall notify the DOH Chief Information Security Officer (or other senior DOH official who will then notify the DOH Chief Security Officer, such as the “Overall Responsible Person”) within two (2) business days of any suspected or actual breach of security or confidentiality of information covered by the Agreement.

## D. DATA DISPOSITION

Unless otherwise directed in writing by the DOH Business Contact, at the end of this Agreement, or at the discretion and direction of DOH, the Information Recipient shall:

Immediately destroy all printed copies of any data provided under this Agreement after it has been used for the purposes specified in the Agreement. Acceptable methods of destruction are described in Appendix B. Upon completion, the Information Recipient shall submit the attached Certification of Data Disposition (Appendix C) to the DOH Business Contact.

## IV. RE-DISCLOSURE OF INFORMATION

Information Recipient agrees to not disclose in any manner all or part of the information identified in this Agreement except as the law requires, this Agreement permits, or with specific prior written permission by the Secretary of the Department of Health.

If the Information Recipient receives a records request where all or part of the information subject to this Agreement is responsive to the request: the Information Recipient will notify the DOH Privacy Officer of the request ten (10) business days prior to disclosing to the requestor. The notice must:

- Be in writing;
- Include a copy of the request or some other writing that shows the:
  - Date the Information Recipient received the request; and
  - The DOH records that the Information Recipient believes are responsive to the request and the identity of the requestor, if known.

#### **V. ATTRIBUTION REGARDING INFORMATION**

Information Recipient agrees to cite “Washington State Department of Health” or other citation as specified, as the source of the information subject of this Agreement in all text, tables and references in reports, presentations and scientific papers.

Information Recipient agrees to cite its organizational name as the source of interpretations, calculations or manipulations of the information subject of this Agreement.

#### **VI. OTHER PROVISIONS**

All data must be stored within the United States.

#### **VII. AGREEMENT ALTERATIONS AND AMENDMENTS**

This Agreement may be amended by mutual agreement of the parties. Such amendments shall not be binding unless they are in writing and signed by personnel authorized to bind each of the parties

#### **VIII. CAUSE FOR IMMEDIATE TERMINATION**

The Information Recipient acknowledges that unauthorized use or disclosure of the data/information or any other violation of sections II or III, and appendices A or B, may result in the immediate termination of this Agreement.

#### **IX. CONFLICT OF INTEREST**

The DOH may, by written notice to the Information Recipient:

Terminate the right of the Information Recipient to proceed under this Agreement if it is found, after due notice and examination by the Contracting Office that gratuities in the form of entertainment, gifts or otherwise were offered or given by the Information Recipient, or an agency or representative of the Information Recipient, to any officer or employee of the DOH, with a view towards securing this Agreement or securing favorable



treatment with respect to the awarding or amending or the making of any determination with respect to this Agreement.

In the event this Agreement is terminated as provided in (a) above, the DOH shall be entitled to pursue the same remedies against the Information Recipient as it could pursue in the event of a breach of the Agreement by the Information Recipient. The rights and remedies of the DOH provided for in this section are in addition to any other rights and remedies provided by law. Any determination made by the Contracting Office under this clause shall be an issue and may be reviewed as provided in the "disputes" clause of this Agreement.

## **X. DISPUTES**

Except as otherwise provided in this Agreement, when a genuine dispute arises between the DOH and the Information Recipient and it cannot be resolved, either party may submit a request for a dispute resolution to the Contracts and Procurement Unit. The parties agree that this resolution process shall precede any action in a judicial and quasi-judicial tribunal. A party's request for a dispute resolution must:

- Be in writing and state the disputed issues, and
- State the relative positions of the parties, and
- State the information recipient's name, address, and his/her department agreement number, and
- Be mailed to the DOH contracts and procurement unit, P. O. Box 47905, Olympia, WA 98504-7905 within thirty (30) calendar days after the party could reasonably be expected to have knowledge of the issue which he/she now disputes.

This dispute resolution process constitutes the sole administrative remedy available under this Agreement.

## **XI. EXPOSURE TO DOH BUSINESS INFORMATION NOT OTHERWISE PROTECTED BY LAW AND UNRELATED TO CONTRACT WORK**

During the course of this contract, the information recipient may inadvertently become aware of DOH business information unrelated to this agreement. Information recipient will treat such information respectfully, recognizing DOH relies on public trust to conduct its work. This information may be hand written, typed, electronic, or verbal, and come from a variety of sources.

## **XII. GOVERNANCE**

This Agreement is entered into pursuant to and under the authority granted by the laws of the state of Washington and any applicable federal laws. The provisions of this Agreement shall be construed to conform to those laws.

In the event of an inconsistency in the terms of this Agreement, or between its terms and any applicable statute or rule, the inconsistency shall be resolved by giving precedence in the following order:

- Applicable Washington state and federal statutes and rules;
- Any other provisions of the Agreement, including materials incorporated by reference.

### **XIII. HOLD HARMLESS**

Each party to this Agreement shall be solely responsible for the acts and omissions of its own officers, employees, and agents in the performance of this Agreement and all liability, loss, cost, damage, and expense arising therefrom. Neither party to this Agreement will be responsible for the acts and omissions of entities or individuals not party to this Agreement. DOH and the Information Recipient shall cooperate in the defense of tort lawsuits, when possible. In the event of liability for damages resulting from the concurrent negligence of both parties, each party's liability shall be only to the extent of its negligence. This hold harmless shall extend to claims arising after this Agreement is terminated.

### **XIV. LIMITATION OF AUTHORITY**

Only the Authorized Signatory for DOH and information recipient shall have the express, implied, or apparent authority to alter, amend, modify, or waive any clause or condition of this Agreement on behalf of the DOH. No alteration, modification, or waiver of any clause or condition of this Agreement is effective or binding unless made in writing and signed by the Authorized Signatory for DOH.

### **XV. RIGHT OF INSPECTION**

The Information Recipient shall provide the DOH and other authorized entities the right of access to its facilities at all reasonable times, in order to monitor and evaluate performance, compliance, and/or quality assurance under this Agreement on behalf of the DOH.

### **XVI. SEVERABILITY**

If any term or condition of this Agreement is held invalid, such invalidity shall not affect the validity of the other terms or conditions of this Agreement, provided, however, that the remaining terms and conditions can still fairly be given effect.

### **XVII. SURVIVORSHIP**

The terms and conditions contained in this Agreement which by their sense and context, are intended to survive the completion, cancellation, termination, or expiration of the Agreement shall survive.

**XVIII. TERMINATION**

Either party may terminate this Agreement upon 90 days prior written notification to the other party. If this Agreement is so terminated, the parties shall be liable only for performance rendered or costs incurred in accordance with the terms of this Agreement prior to the effective date of termination.

**XIX. WAIVER OF DEFAULT**

This Agreement, or any term or condition, may be modified only by a written amendment signed by the Information Provider and the Information Recipient. Either party may propose an amendment.

Failure or delay on the part of either party to exercise any right, power, privilege or remedy provided under this Agreement shall not constitute a waiver. No provision of this Agreement may be waived by either party except in writing signed by the Information Provider or the Information Recipient.

**XX. ALL WRITINGS CONTAINED HEREIN**

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

**XXI. PERIOD OF PERFORMANCE**

This Agreement shall be effective from \_\_\_\_\_ through \_\_\_\_\_ (5 years from agreement inception date).

**IN WITNESS WHEREOF, the parties have executed this Agreement as of the date of last signature below.**

**INFORMATION PROVIDER**

State of Washington Department of Health

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

**INFORMATION RECIPIENT**

Kitsap Public Health District

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

## APPENDIX A

### USE AND DISCLOSURE OF CONFIDENTIAL INFORMATION

People with access to confidential information are responsible for understanding and following the laws, policies, procedures, and practices governing it. Below are key elements:

A. CONFIDENTIAL INFORMATION

Confidential information is information federal and state law protects from public disclosure. Examples of confidential information are social security numbers, and healthcare information that is identifiable to a specific person under RCW 70.02. The general public disclosure law identifying exemptions is RCW 42.56.

B. ACCESS AND USE OF CONFIDENTIAL INFORMATION

1. Access to confidential information must be limited to people whose work specifically requires that access to the information.
2. Use of confidential information is limited to purposes specified elsewhere in this Agreement.

C. DISCLOSURE OF CONFIDENTIAL INFORMATION

1. An Information Recipient may disclose an individual's confidential information received or created under this Agreement to that individual or that individual's personal representative consistent with law.
2. An Information Recipient may disclose an individual's confidential information, received or created under this Agreement only as permitted under the **Re-Disclosure of Information** section of the Agreement, and as state and federal laws allow.

D. CONSEQUENCES OF UNAUTHORIZED USE OR DISCLOSURE

An Information Recipient's unauthorized use or disclosure of confidential information is the basis for the Information Provider immediately terminating the Agreement. The Information Recipient may also be subject to administrative, civil and criminal penalties identified in law.

## APPENDIX B

### DATA SECURITY REQUIREMENTS

#### Protection of Data

The Information Recipient agrees to store information received under this Agreement (the data) within the United States on one or more of the following media, and to protect it as described below:

##### A. Passwords

1. Passwords must always be encrypted. When stored outside of the authentication mechanism, passwords must be in a secured environment that is separate from the data and protected in the same manner as the data. For example passwords stored on mobile devices or portable storage devices must be protected as described under section Appendix B: F. Data storage on mobile devices or portable storage media.
2. Complex Passwords are:
  - At least 8 characters in length.
  - Contain at least three of the following character classes: uppercase letters, lowercase letters, numerals, special characters.
  - Do not contain the user's name, user ID or any form of their full name.
  - Do not consist of a single complete dictionary word, but can include a passphrase.
  - Changed at least every 120 days.

##### B. Hard disk drives – Data stored on workstation hard disks:

1. The data must be encrypted as described under section F. Data storage on mobile devices or portable storage media. Encryption is not required when Potentially Identifiable Information is stored temporarily on local workstation hard disks. Temporary storage is thirty (30) days or less.
2. Access to the data is restricted to authorized users by requiring logon to the local workstation using a unique user ID and Complex Password, or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Accounts must lock after 5 unsuccessful access attempts and remain locked for at least 15 minutes, or require administrator reset.

##### C. Network server and storage area networks (SAN)

1. Access to the data is restricted to authorized users through the use of access control lists which will grant access only after the authorized user has authenticated to the network.

2. Authentication must occur using a unique user ID and Complex Password, or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Accounts must lock after 5 unsuccessful access attempts, and remain locked for at least 15 minutes, or require administrator reset.
3. The data are located in a secured computer area, which is accessible only by authorized personnel with access controlled through use of a key, card key, or comparable mechanism.
4. If the servers or storage area networks are not located in a secured computer area **or** if the data is classified as Confidential or Restricted it must be encrypted as described under F. Data storage on mobile devices or portable storage media.

**D. Optical discs (CDs or DVDs)**

1. Optical discs containing the data must be encrypted as described under F. Data storage on mobile devices or portable storage media.
2. When not in use for the purpose of this Agreement, such discs must be locked in a drawer, cabinet or other physically secured container to which only authorized users have the key, combination or mechanism required to access the contents of the container.

**E. Access over the Internet or the State Governmental Network (SGN).**

1. When the data is transmitted between DOH and the Information Recipient, access is controlled by the DOH, who will issue authentication credentials.
2. Information Recipient will notify DOH as soon as possible (and no less often than quarterly) whenever:
  - a) An authorized person in possession of such credentials is terminated or otherwise leaves the employ of the Information Recipient;
  - b) Whenever a person's duties change such that the person no longer requires access to perform work for this Contract.
3. The data must not be transferred or accessed over the Internet by the Information Recipient in any other manner unless specifically authorized within the terms of the Agreement.
  - a) If so authorized the data must be encrypted during transmissions using a key length of at least 128 bits. Industry standard mechanisms and algorithms, such as those validated by the National Institute of Standards and Technology (NIST) are required.

- b) Authentication must occur using a unique user ID and Complex Password (of at least 10 characters). When the data is classified as Confidential or Restricted, authentication requires secure encryption protocols and multi-factor authentication mechanisms, such as hardware or software tokens, smart cards, digital certificates or biometrics.
- c) Accounts must lock after 5 unsuccessful access attempts, and remain locked for at least 15 minutes, or require administrator reset.

#### **F. Data storage on mobile devices or portable storage media**

1. Examples of mobile devices are: smart phones, tablets, laptops, notebook or netbook computers, and personal media players.
2. Examples of portable storage media are: flash memory devices (e.g. USB flash drives), and portable hard disks.
3. The data must not be stored by the Information Recipient on mobile devices or portable storage media unless specifically authorized within the terms of this Agreement. If so authorized:
  - a) The devices/media must be encrypted with a key length of at least 128 bits, using industry standard mechanisms validated by the National Institute of Standards and Technologies (NIST).
    - Encryption keys must be stored in a secured environment that is separate from the data and protected in the same manner as the data.
  - b) Access to the devices/media is controlled with a user ID and a Complex Password (of at least 6 characters), or a stronger authentication method such as biometrics.
  - c) The devices/media must be set to automatically wipe or be rendered unusable after no more than 10 failed access attempts.
  - d) The devices/media must be locked whenever they are left unattended and set to lock automatically after an inactivity activity period of 3 minutes or less.
  - e) The data must not be stored in the Cloud. This includes backups.
  - f) The devices/ media must be physically protected by:
    - Storing them in a secured and locked environment when not in use;
    - Using check-in/check-out procedures when they are shared; and
    - Taking frequent inventories.
4. When passwords and/or encryption keys are stored on mobile devices or portable storage media they must be encrypted and protected as described in this section.

## G. Backup Media

The data may be backed up as part of Information Recipient's normal backup process provided that the process includes secure storage and transport, and the data is encrypted as described under *F. Data storage on mobile devices or portable storage media*.

## H. Paper documents

Paper records that contain data classified as Confidential or Restricted must be protected by storing the records in a secure area which is only accessible to authorized personnel. When not in use, such records is stored in a locked container, such as a file cabinet, locking drawer, or safe, to which only authorized persons have access.

## I. Data Segregation

1. To the greatest extent possible, the data must be segregated or otherwise distinguishable from all other data. This is to ensure that when no longer needed by the Information Recipient, all of the data can be identified for return or destruction. It also aids in determining whether the data has or may have been compromised in the event of a security breach. Exceptions to this rule include (1) data imported from an external jurisdiction to be merged with case data for individuals under investigation by any participating jurisdiction (thus, this data may become part of the jurisdictions' own case report); and (2) aggregate tallies of data which may be conducted by any jurisdiction for any other jurisdiction provided that (a) small number guidelines are followed and (b) that publications naming external jurisdictions are approved by the health officer or other senior personal from that external jurisdiction.
2. When it is not feasible or practical to segregate the data from other data, then *all* commingled data is protected as described in this Exhibit.

## J. Data Disposition

If data destruction is required by the Agreement, the data must be destroyed using one or more of the following methods:

### Data stored on:

Hard disks

### Is destroyed by:

Using a "wipe" utility which will overwrite the data at least three (3) times using either random or single character data, or

Degaussing sufficiently to ensure that the data cannot be reconstructed, or

Physically destroying the disk , or

Delete the data and physically and logically secure data storage systems that continue to be used for the storage of Confidential or Restricted information to prevent any



future access to stored information. One or more of the preceding methods is performed before transfer or surplus of the systems or media containing the data.

Paper documents with Confidential or Restricted information	On-site shredding, pulping, or incineration, or Recycling through a contracted firm provided the Contract with the recycler is certified for the secure destruction of confidential information.
Optical discs (e.g. CDs or DVDs)	Incineration, shredding, or completely defacing the readable surface with a course abrasive.
Magnetic tape	Degaussing, incinerating or crosscut shredding.
Removable media (e.g. floppies, USB flash drives, portable hard disks, Zip or similar disks)	Using a “wipe” utility which will overwrite the data at least three (3) times using either random or single character data. Physically destroying the disk. Degaussing magnetic media sufficiently to ensure that the data cannot be reconstructed.

#### **K. Notification of Compromise or Potential Compromise**

The compromise or potential compromise of the data is reported to DOH at [privacy.officer@doh.wa.gov](mailto:privacy.officer@doh.wa.gov), within two (2) business days of discovery.

## APPENDIX C

### CERTIFICATION OF DATA DISPOSITION

Date of Disposition \_\_\_\_\_

- ☐ All copies of any Datasets related to agreement DOH#\_\_\_\_\_ have been deleted from all data storage systems. These data storage systems continue to be used for the storage of confidential data and are physically and logically secured to prevent any future access to stored information. Before transfer or surplus, all data will be eradicated from these data storage systems to effectively prevent any future access to previously stored information.
- ☐ All copies of any Datasets related to agreement DOH#\_\_\_\_\_ have been eradicated from all data storage systems to effectively prevent any future access to the previously stored information.
- ☐ All materials and computer media containing any data related to agreement DOH #\_\_\_\_\_ have been physically destroyed to prevent any future use of the materials and media.
- ☐ All paper copies of the information related to agreement DOH #\_\_\_\_\_ have been destroyed on-site by cross cut shredding.
- ☐ All copies of any Datasets related to agreement DOH #\_\_\_\_\_ that have not been disposed of in a manner described above, have been returned to DOH.
- ☐ Other

The data recipient hereby certifies, by signature below, that the data disposition requirements as provided in agreement DOH # \_\_\_\_\_, Paragraph 7, Exhibit #1, Data Disposition, have been fulfilled as indicated above.

\_\_\_\_\_  
Signature of data recipient

\_\_\_\_\_  
Date

## **APPENDIX D**

### **DOH SMALL NUMBERS STANDARDS FOR DATA PUBLISHING**

- Aggregate data so that the need for suppression is minimal. Suppress all non-zero counts which are less than ten.
- Suppress rates or proportions derived from those suppressed counts.
- Assure that suppressed cells cannot be recalculated through subtraction, by using secondary suppression as necessary. Survey data from surveys in which 80% or more of the eligible population is surveyed should be treated as non-survey data.
- When a survey includes less than 80% of the eligible population, and the respondents are unequally weighted, so that cell sample sizes cannot be directly calculated from the weighted survey estimates, then there is no suppression requirement for the weighted survey estimates.
- When a survey includes less than 80% of the eligible population, but the respondents are equally weighted, then survey estimates based on fewer than 10 respondents should be “top-coded” (estimates of less than 5% or greater than 95% should be presented as 0-5% or 95-100%).

**PROFESSIONAL SERVICES AGREEMENT**  
**Between**  
**KITSAP PUBLIC HEALTH DISTRICT**  
**AND**  
**OLYMPIC COMMUNITY OF HEALTH**

This Professional Services Agreement (“Agreement”) is made and entered into between Olympic Community of Health, hereinafter referred to as OCH, and the Kitsap Public Health District, a Health District organized pursuant to chapter 70.46 Revised Code of Washington and Chapter 9.52 Kitsap County Code, hereinafter referred to as “Contractor.” The parties mutually agree as follows:

- I. **Period of Performance:** The period of performance of this Agreement shall begin January 1, 2020 and shall be completed no later than December 31, 2020, unless terminated sooner or extended as provided for herein.
- II. **Services:** OCH requires Contractor to provide expert research and analytical support to OCH’s efforts. Scope of Work is hereto attached and hereinafter incorporated as **ATTACHMENT A**.
- III. **Qualifications/Eligibility:** Contractor will have the qualifications necessary to successfully complete the objectives of this Agreement. Contractor hereby affirms that he/she is eligible to work in the United States as set forth in the Immigration Reform and Control Act (IRCA).
- IV. **Assignment, Delegation and Subcontracting:** Contractor will perform under the Agreement using only its bona fide employees or agents, and the obligations and duties of Contractor under the Agreement will not be assigned, delegated or subcontracted to any other person or firm.
- V. **Compensation:** OCH agrees to pay Contractor a total compensation not to exceed \$120,000.00 during the Agreement. Compensation will be based on invoices submitted by Contractor itemizing hours worked with a detailed description of services performed. Contractor will be paid only for work expressly authorized in the Agreement. Contractor will be reimbursed for travel and lodging at the federally established rate. Contractor’s indirect rate is limited to 25%. Contractor will not be entitled to payment for any services that were performed prior to the effective date of the Agreement or after its termination, unless a provision of the Agreement expressly provides otherwise.
- VI. **Notices:** Any notices will be effective if personally served upon the other party or if mailed by registered or certified mail, return receipt requested, to the addresses set out in the Agreement representative’s provision of the Agreement. Notice may also be given by facsimile or email with the original to follow by regular mail. Notice will be deemed to be given three days following the date of mailing, or immediately if personally served. For service by facsimile, service will be effective at the beginning of the next working day. Notices shall be sent to:

If to OCH:  
Olympic Community of Health  
ATTN: Celeste Schoenthaler  
PO Box 641  
Port Townsend, WA 98368  
(360) 633-9241  
[celeste@olympicCH.org](mailto:celeste@olympicCH.org)

If to CONTRACTOR:  
Kitsap Public Health District  
ATTN: Keith Grellner  
345 6<sup>th</sup> Street, Suite 300  
Bremerton, WA 98337  
(360) 728-2284  
[keith.grellner@kitsappublichealth.org](mailto:keith.grellner@kitsappublichealth.org)

- VII. **Billings:** Billings to OCH shall be submitted no more frequently than every 30 days, and shall be sent via electronic mail to: [margaret@olympicch.org](mailto:margaret@olympicch.org)

Contractor agrees to comply with applicable rules and regulations associated with federal funds. Contractor must follow all Federal Cost Principles and Uniform Administrative Requirements associated with federal funds. Costs must be necessary and reasonable; allocable; authorized or not prohibited under federal, state, or local laws and regulations; and documented.

- VIII. **Independent Contractor:** Contractor and its employees or agents performing under this Agreement are not employees or agents of OCH.

- IX. **Rights in Data:** All reports, drawings, plans, specifications, all forms of electronic media, and data and documents produced in the performance of the work under the Agreement will be “works for hire” as defined by the U.S. Copyright Act of 1976 and will be owned by OCH. Ownership includes the right to copyright, patent, license to publish, translate, reproduce, modify, deliver, register, dispose of, and the ability to transfer these rights.

An electronic copy of all word processing documents will be submitted to OCH upon request or at the end of the job using the word processing program and version specified by OCH.

- X. **Indemnification:** The Parties to this Agreement shall defend, indemnify and hold the other party, its officers, officials, employees and volunteers harmless from any and all claims, injuries, damages, losses or suits including attorney fees, arising out of or resulting from the acts, errors or omissions in performance of this Agreement, except for injuries and damages caused by sole negligence. Solely for the purposes of this provision, Contractor waives its immunity under Title 51 (Industrial Insurance) of the Revised Code of Washington and acknowledges that this waiver was mutually negotiated by the parties. This provision will survive the expiration or termination of this Agreement.

- XI. **Insurance:** Contractor shall procure and maintain for the duration of the Agreement, insurance against claims for injuries to persons or damage to property which may arise from or in connection with the performance of the work hereunder by Contractor, its agents, representatives, or employees.

**No Limitation.** Contractor’s maintenance of insurance as required by the agreement shall not be construed to limit the liability of the Contractor to the coverage provided by such insurance, or otherwise limit OCH’s recourse to any remedy available at law or in equity.

A. Minimum Scope of Insurance

Contractor shall obtain insurance of the types described below:

1. **Automobile Liability** insurance covering all owned, non-owned, hired and leased vehicles. Coverage shall be written on Insurance Services Office (ISO) form CA 00 01 or a substitute form providing equivalent liability coverage. If necessary, the policy shall be endorsed to provide contractual liability coverage.
2. **Commercial General Liability** insurance shall be written on ISO occurrence form CG 00 01 and shall cover liability arising from premises, operations, independent Contractors and personal injury and advertising injury.

3. Workers' Compensation coverage as required by the Industrial Insurance laws of the state of Washington.
4. Professional Liability insurance appropriate to Contractor's profession. Contractor shall provide OCH with proof of liability insurance or professional errors and omissions coverage appropriate to its profession.

B. Minimum Amounts of Insurance

Contractor shall maintain the following insurance limits:

1. Automobile Liability insurance with a minimum combined single limit for bodily injury and property damage of \$1,000,000 per accident.
2. Commercial General Liability insurance shall be written with limits no less than \$1,000,000 each occurrence, \$2,000,000 general aggregate.
3. Professional Liability insurance shall be written with limits no less than \$1,000,000 per claim and \$1,000,000 policy aggregate limit.

C. Other Insurance Provisions

The insurance policies are to contain, or be endorsed to contain, the following provisions for Automobile Liability, Professional Liability and Commercial General Liability insurance:

1. Contractor's insurance coverage shall be primary insurance as respect OCH. Any insurance, self-insurance, or insurance pool coverage maintained by OCH shall be excess of Contractor's insurance and shall not contribute with it.
2. Contractor's insurance shall be endorsed to state that coverage shall not be cancelled by either party, except after thirty (30) days prior written notice by certified mail, return receipt requested, has been given to OCH.

D. Acceptability of Insurers

Insurance is to be placed with insurers with a current A.M. Best rating of not less than A:VII.

E. Verification of Coverage

Contractor shall furnish OCH with original certificates and a copy of the amendatory endorsements upon request.

- XII. **Safeguarding of Information:** The use or disclosure by the Parties of any information or documents obtained by Contractor in the course of contract performance for any purpose not directly connected with Contractor's responsibilities under this Agreement is prohibited except as may be required by law.
- XIII. **Statutory and Regulatory Compliance:** The Parties shall comply with all applicable federal, state, and local laws, regulations, guidelines, and standards in the performance of this Agreement.

- XIV. **Compliance with State and Federal Confidentiality Laws:** The Parties shall not use protected health information created or shared under this Agreement in any manner that would constitute a violation of the Health Information Portability and Accountability Act, commonly known as HIPAA, or RCW 70.02, and any regulations enacted pursuant to its provisions and shall sign a Business Associate Agreement which is attached hereto and incorporated hereinafter by as **ATTACHMENT B.**
- XV. **Certification Regarding Suspension and Debarment:** Contractor, by completing and returning to OCH the “Debarment, Suspension, Ineligibility or Voluntary Exclusion Certification Form,” and completing, signing and returning to OCH the “Certification Regarding Debarment, Suspension, Ineligibility or Voluntary Exclusion for Lower Tier Covered Transactions” form, (to be supplied to lower tier participants; see **ATTACHMENT C**, certifies that it is not debarred, suspended, or proposed for debarment by any federal agency.
- XVI. **Records Inspection and Retention:** OCH may, at reasonable times, inspect the books and records of Contractor relating to the performance of the Agreement. The Parties will retain for audit purposes all Contract-related records for at least six years after termination of the Agreement.
- XVII. **Non-Discrimination:** The Parties shall not discriminate against any employee or applicant for employment because of race, color, sex, religion, national origin, creed, marital status, age, Vietnam era or disabled veteran status, sexual preference, or the presence of any sensory mental or physical handicap.
- XVIII. **Amendment:** This Agreement may be modified only by a written amendment executed by authorized representatives of both parties.
- XIX. **Termination:**
- A. **For Convenience:** Either party may terminate the Agreement, in whole or in part, at any time, by at least thirty (30) days written notice to the other. Contractor shall be paid for work performed and expenses incurred to the date of termination.
  - B. **For Funding:** If funding for the Agreement or matter is withdrawn, reduced or limited in any way after the Agreement is signed or becomes effective, the Parties may summarily terminate the Agreement notwithstanding any other termination provision in the Agreement. Termination under this provision will be effective upon the date specified in the written notice of termination. No costs incurred after the effective date of the termination will be paid.
  - C. **For Cause:** If the either party fails to perform in the manner called for in the Agreement, or if either party fails to comply with any other provision of the Agreement and fails to correct such noncompliance with thirty (30) days written notice thereof, the aggrieved party may terminate the Agreement for cause. Termination shall be effected by serving a notice of termination on the party setting forth the manner in which the party is in default. Contractor shall be paid for services performed in accordance with the manner of performance set forth in this Agreement.
  - D. **For Default:** Either party may terminate the Agreement upon giving written notice to the other party in the event the other party is in breach of a material provision of this agreement and shall have failed to cure such breach within thirty (30) days.

- XX. **Dispute Resolution:** In the event that a dispute or conflict arises under the Agreement that the Parties are unable to resolve with good faith efforts, they shall allow the dispute to be decided by a Dispute Panel in the following manner: A Mediator shall be mutually appointed by both parties, and each party shall appoint an additional member to the Dispute Panel. The Dispute Panel shall review the facts, Agreement terms and applicable statutes and rules and make a determination of the dispute. The determination of the Dispute Panel shall be final and binding on the Parties hereto. The Parties shall equally share the costs, if any, for the services of the Dispute Panel.
- XXI. **Choice of Law:** This Agreement has been and shall be construed as having been made and delivered within the State of Washington and it is agreed by each party hereto that this Agreement shall be governed by the laws of the State of Washington, both as to its interpretation and performance. Any action at law, suit in equity, or judicial proceeding arising out of this Agreement shall be instituted and maintained only in any of the courts of competent jurisdiction in Kitsap County, Washington.
- XXII. **No Waiver:** The Parties agree that the excuse or forgiveness of performance, or waiver of any provisions of the Agreement, does not constitute a waiver of such provision or future performance, or prejudice the right of the waiving party to enforce any of the provisions of the Agreement at a later time.
- XXIII. **Severability:** If a court of competent jurisdiction holds any provision of the Agreement to be illegal, invalid or unenforceable, in whole or in part, the validity of the remaining provisions will not be affected, and the parties' rights and obligations will be construed and enforced as if the Agreement did not contain the particular provision held to be invalid. If any provision of the Agreement conflicts with any statutory provision of the State of Washington, the provision will be deemed inoperative to the extent of the conflict or modified to conform to statutory requirements.
- XXIV. **Survival:** Those provisions of the Agreement that by their sense and purpose should survive expiration or termination of the Agreement shall so survive. Those provisions include, but are not necessarily limited to, the following: Indemnification, Termination, Disputes, Confidentiality, Choice of Law, No Waiver, Records Inspection and Retention, and Severability.
- XXV. **Entire Agreement:** This Agreement constitutes the entire agreement between the parties regarding its subject matter. Any oral or written representations not expressly incorporated in this Agreement are specifically excluded.



IN WITNESS WHEREOF, the Parties have executed this Agreement as of the date set forth below.

**OLYMPIC COMMUNITY OF HEALTH**

**KITSAP PUBLIC HEALTH DISTRICT**

By: \_\_\_\_\_  
Celeste Schoenthaler, Director

By: \_\_\_\_\_  
Keith Grellner, Administrator

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

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

<b>Funding Source</b>	
<b>Program:</b>	Medical Assistance Program
<b>Federal Contract/Grant:</b>	CMMS
<b>CFDA:</b>	93.778

## **ATTACHMENT A**

### **Scope of Work**

Overall management and delivery of analytic projects, including timeliness, quality and value.

- Provide evaluation to support the selection, design, and ongoing monitoring of projects.
- Manage multiple resources and projects concurrently to ensure successful completion of analytic projects.
- Advise OCH team and leadership on goals, measures, strategy, and tactics to support organization direction, projects and quality improvement.
- Work collaboratively on and contribute to reports and planning documents required of the OCH.
- Prepare community health metric analyses to inform project selection and progress monitoring.
- Serve as primary contact to partner organizations on all phases of analytic analyses from problem definition through presentation, appropriately reporting progress and results throughout projects.
- Utilize quantitative and qualitative data to develop reports, visualizations and/or dashboards to display OCH and partner progress against project goals and milestones.
- Create compelling presentations which tell an analytic story; use data to provide actionable insights and recommendations in language that resonates with diverse partners, including non-technical audiences.
- Support development of presentations by OCH team members ensuring communication of accurate, compelling data.
- Participate in process to determine funds flow and payment distribution. Develop and manage the OCH partner payment tool per the specifications of the board approved payment policy.
- Manage, store and protect category 1 (public) and category 2 (sensitive) data.
- Provide accurate work estimates and oversee delivery.
- Oversee the collection and interpretation of quantitative and qualitative data and develop and utilize methods for consistency and data validation to ensure data accuracy.
- Ensure data and measures are in place to produce program performance reports for Board, funders, contractors and other partners.
- Assist in synthesizing large amounts of data into meaningful conclusions and support any root cause analysis.
- Convene and prepare materials for the OCH Performance, Measurement and Evaluation Committee.
- Act as liaison to data and assessment teams within partner organizations (for example, hospitals, local health jurisdictions, community action agencies, area agencies on aging, physical and behavioral health providers, among others).
- Communicate and coordinate with partners, including staff, management, advocacy groups, consumer groups, committee members etc. to meet OCH program goals and objectives.
- Support staff, Board, committees, and workgroups to characterize community health issues using data, reports, community health needs assessments, focus groups, key informants, surveys, and community feedback.
- Work with state-level committees, workgroups, staff, and others from organizations such as Department of Health and Health Care Authority to leverage data and information that supports OCH programs.

## **AGREEMENT KC-022-20**

This Agreement is entered, into between Kitsap County and the Kitsap Public Health District for the Improving the Health of High-Risk Mothers and Children.

### **I. Purpose**

This Agreement is for the appropriation of \$153,712, for the purpose of augmenting state and federal funding of mental health, chemical dependency and therapeutic court programs and services with the goal of preventing and reducing the impacts of disabling chemical dependency and mental illness by creating and investing in effective, data-driven programs for a continuum of recovery-oriented systems of care per RCW 82.14.460 for the time period January 1, 2020 – December 31, 2020. Funding must be used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services. No funding provided under this Agreement may be used to supplant existing funding for these programs.

### **II. Collaboration and Collective Impact**

The Kitsap Public Health District shall take the initiative to work with other systems to reduce fragmentation or duplication and to strengthen working relationships utilizing collective impact strategies. The Kitsap Public Health District will provide quarterly updates on collaborative efforts and outreach activities that will include issues mutually identified by the Kitsap Public Health District and respective systems that can be addressed through collective impact strategies. Examples of such systems include: mental health, aging, veterans, child protection and welfare, adult protection and welfare, education, juvenile justice, housing, employment services, primary health care plans and other publicly-funded entities promoting substance abuse and mental health services.

All entities providing services to working age adults and youth shall establish a connection with the local WorkSource system to ensure people have access to employment training and placement services.

### **III. Identification and Coordination of Available Funding Sources**

The Kitsap Public Health District is required to identify and coordinate all available funding resources to pay for the mental health and chemical dependency services funded by this Agreement, including Federal (Medicaid and Affordable Care Act, etc.), State, local, private insurance and other private sources. The 1/10<sup>th</sup> of 1% funding should be utilized as a Payor of Last Resort.

#### **IV. Project Description**

This project will provide behavioral health services within the Prevention, Early Intervention level of the continuum of care and addresses the following strategic goals:

- Improve the health status and wellbeing of Kitsap County residents.
- Reduce the incidence and severity of chemical dependency and/or mental health disorders in adults and youth.

This two-tier project has the goal of preventing mental illness, behavioral problems, and future addiction in young children by intervening with families who either have, or are at risk for, substance abuse and/or mental health problems. There are two components to this project 1. providing evidence-based Nurse Family Partnership (NFP) services to at least 12 low-income, high-risk first-time mothers and their babies (note total number of clients served by NFP annually is 50-60). 2. improving access to services by utilizing a community health worker (CHW) for outreach and community infrastructure support.

#### **V. Project Activities**

The Kitsap Public Health District will provide the following for the Nurse Family Partnership (NFP) Program:

- Maintain 0.5 FTE Nurse Family Partnership (NFP) nurse home visitor.
- NFP staff will participate in ongoing training and education as required by NFP Nursing Services Organization.
- NFP supervisor will participate in ongoing training, education, and consultation as required to support quality, fidelity, and specific population needs.
- Existing caseload will be maintained at twelve (12) families.
- Maintain outreach and referral plan to reach target population and maintain caseload.
- Provide Home Visits for first time, low-income pregnant women, mothers and infants.
- New clients will be enrolled before twenty-nine (29) weeks of pregnancy and receive visits according to NFP guidelines.
- Content of home visits will be aligned with NFP guidelines.
- Staff who provide home visits will receive individual reflective supervision.
- All staff will participate in reflective case conferences.
- Supervisors and nurse home visitors will review and utilize their data.
- Data will be used for quality and fidelity monitoring and improvement.

The Kitsap Public Health District will provide the following to improve access to services:

- Staff a bilingual (English-Spanish) Community Health Worker (CHW) who will work with the Parent Child Health (PCH) and Nurse Family Partnership team of registered nurses. The CHW will be a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served.
- The CHW will serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.
- Prenatal and postpartum assessments which include depression and Adverse Childhood Experiences (ACEs) screening.
- Health and parenting education.
- Referrals to community resources and case management.
- Expand outreach efforts to enroll more eligible women.
- Case management activities that can be done by a community health worker (CHW).

## **VI. Project Design**

The Improving Health and Resiliency of High-Risk Mothers and Their Children project (hereafter referred to as “Improving Health project”) includes providing an evidence-based nurse home visiting service to families and strengthening prevention and early intervention infrastructure in Kitsap County. With the use of a best practice evidenced based program and a collective impact approach, this project will improve the health status and wellbeing of Kitsap residents.

The project has two components: 1. providing evidence-based Nurse Family Partnership (NFP) services to at least 12 low-income, high-risk first-time mothers and their babies (note total number of clients served by NFP annually is 50-60). 2. improving access to services by utilizing a community health worker (CHW) for outreach and community infrastructure support.

The NFP program is a parental and infancy home visitation service that aims to improve the health, well-being, and self-sufficiency of first time parents and their children. Program activities are designed to link families to needed services, promote good decision making, assist families in making healthy choices, and help women build supportive relationships with families and friends. NFP nurses assess for signs and symptoms of Substance Use Disorders (SUDs), mental illness, and Adverse Childhood Experiences (ACEs) with every client. The nurses provide education to promote health and, because of their trusting relationships with their clients, they are often able to support a parent’s readiness to seek needed treatment services.

The CHW is an established liaison between health/social services and the community and has facilitated access to services with culturally appropriate strategies. The CHW for this project is bilingual in English and Spanish and has been able to provide targeted outreach to Kitsap’s Spanish speaking population. In this proposal the CHW will continue to outreach to our Spanish speaking population and will identify other hard to

reach populations with the plan to develop culturally appropriate strategies for engagement. In addition to outreach, the CHW has been integral in the development of new relationships with community partners. These partners all contribute to our prevention and early intervention infrastructure in Kitsap. An additional activity for the proposal this year includes the development of a centralized referral system for early childhood intervention programs to increase access and services for pregnant and childbearing age women that need mental health and substance abuse treatment. Families are often confused about what services they can access and providers also have challenges keeping up to date on program requirements for appropriate referrals. Creating a centralized process intends to reduce community confusion and increase the likelihood that residents can obtain the appropriate needed services in a timely manner.

## **VII. Project Outcomes and Measurements**

The Kitsap Public Health District will participate in the Evaluation Plan for Treatment Sales Tax Programs. Programs or services implemented under the Treatment Sales Tax are monitored by the Citizens Advisory Committee. The Kitsap Public Health District will have an evaluation plan with performance measures developed in partnership with Kitsap Public Health District Epidemiologist. The emphasis will be on capturing data at regular intervals that can be used to determine whether Treatment Sales Tax funded programs met expectations. Some common measures will be identified that will be reported on. Evaluation efforts must include standardized data collection and reporting processes that produce the following types of information:

- Quantity of services (outputs).
- Level of change occurring among participants (outcomes).
- Return-on-investment or cost-benefit (system savings) if evidence-based.
- Adherence to the model (fidelity).
- Common measures (to be identified by the Citizens Advisory Committee and Kitsap Public Health District staff that all programs must report on).

Data will be collected to monitor the following goals and objectives identified by the Kitsap Public Health District:

Goal 1: Prevent mental illness, behavioral problems, and future addiction in young children by intervening with families who either have or are at risk for substance abuse and/or mental health problems.

Objective #1: Funded case load of at least twelve (12) mothers and infants (0.5 FTE Nurse) will be maintained through December 31, 2020.

Objective #2: Maintain an average retention rate of 85% for NFP clients over the course of the program year (January-December 2020).

Objective #3: By December 31, 2020 CHW has at least 250 unduplicated outreach and case management encounters.

Objective #4: At least 80% of NFP clients with a potential or identified mental health problem will show improvement in knowledge, behavior, or status as measured by the Omaha System Problem Rating Scale at graduation from services.

Objective #5: At least 80% of NFP clients with a potential or identified substance use problem will show improvement in knowledge, behavior, or status as measured by the Omaha System Problem Rating Scale at graduation from services.

Objective #6: At least 80% or more of NFP clients with a parenting/caretaking problem will show improvement in knowledge, behavior, or status as measured by the Omaha System Problem Rating Scale at graduation from services.

Goal #2: NFP program maintains high fidelity to the NFP evidence-based model.

Objective #7: By December 31, 2020, KPHD will maintain required high fidelity to the NFP model, as required by the National Service Office.

Objective #8: By December 31, 2020, NFP CAB will convene at least 4 meetings to advise, support and sustain the NFP program.

Objective #9: Survey 30 past and current clients about their ability to seek and utilize resources related to mental health and substance abuse concerns.

## **VIII. Data Collection**

The Kitsap Public Health District will provide a Quarterly Report to the Kitsap County Department of Human Services by April 30, July 31, October 31, 2020 and January 31, 2021 each year funding is received under this grant detailing progress made on program outcomes during the quarter, what other funding sources have been investigated, and what the future potential for alternative funding is. In addition, outcomes identified in the Evaluation Plan for Mental Health, Chemical Dependency and Therapeutic Court Programs will be reported.

## **IX. Billing and Payment**

Payments to Kitsap Public Health District shall be requested using an invoice form, which is supplied by the County. Kitsap Public Health District invoices must be sent to the County by the fifteenth (15th) calendar day after the end of the month.

The Kitsap Public Health District is authorized to receive payments in accordance with the cost reimbursable budget included under this Agreement. The Kitsap Public Health District will comply with the following standards as applicable.

Reimbursement Request – Upon Completion of each month, the Kitsap Public Health District must provide to the County a written explanation of expenditures which are less than 90% of, or more than 115% of the year-to-date budgeted total.

All payments to be made by the County under this Agreement shall be made to:

Kitsap Public Health District  
345 6th Street, Suite 300  
Bremerton, WA 98337

The Agreement shall not exceed the total amount indicated on the cover sheet of this Agreement and any other modifications hereof.

**X. Duration**

This agreement is in effect from January 1, 2020 – December 31, 2020.

**XI. Amendments**

This agreement may only be modified by one or more written amendments duly approved and executed by both parties.

**XII. Attachments**

The parties acknowledge that the following attachments constitute a part of this agreement:

**Attachment A: Budget**



This Agreement shall be effective January 1, 2020.

DATED this \_\_\_\_ day \_\_\_\_\_, 2019.

DATED this \_\_\_\_ day \_\_\_\_\_, 2019.

**KITSAP PUBLIC HEALTH DISTRICT**

**KITSAP COUNTY BOARD OF  
COMMISSIONERS**

\_\_\_\_\_  
Keith Grellner  
Administrator

\_\_\_\_\_  
**EDWARD E. WOLFE**, Chair

\_\_\_\_\_  
**CHARLOTTE GARRIDO**, Commissioner

\_\_\_\_\_  
**ROBERT GELDER**, Commissioner

**ATTEST:**

\_\_\_\_\_  
Dana Daniels, Clerk of the Board

**Approved as to form by the Prosecuting Attorney's Office**

## ATTACHMENT A: BUDGET SUMMARY/ESTIMATED EXPENDITURES

**Kitsap County Human Services Department**  
Expenditure Plan: January 1, 2020 - December 31, 2020

Agency Name: Kitsap Public Health District  
Project Name: Improving Health for High Risk Mothers (NFP)  
Contract: \$153,712 Contract # KC-022-20

Contract Line item	1/1/2020 3/31/2020	4/1/2020 6/30/2020	7/1/2020 9/30/2020	10/1/2020 12/31/2020	Total Budget
<b>Personnel</b>	<b>\$ 35,968.25</b>	<b>\$ 35,968.25</b>	<b>\$ 35,968.25</b>	<b>\$ 35,968.25</b>	<b>\$ 143,873.00</b>
Manager and Staff (Program Related)	25,550.00	25,550.00	25,550.00	25,550.00	102,200.00
Fringe Benefits	10,418.25	10,418.25	10,418.25	10,418.25	41,673.00
<b>Supplies &amp; Equipment</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Equipment	-	-	-	-	-
Office Supplies	-	-	-	-	-
Other (Describe):	-	-	-	-	-
<b>Administration</b>	<b>\$ 2,459.75</b>	<b>\$ 2,459.75</b>	<b>\$ 2,459.75</b>	<b>\$ 2,459.75</b>	<b>\$ 9,839.00</b>
Advertising/Marketing	-	-	-	-	-
Audit/Accounting	-	-	-	-	-
Communication	180.00	180.00	180.00	180.00	720.00
Insurance/Bonds	-	-	-	-	-
Postage/Printing	-	-	-	-	-
Training/Travel/Transportation	450.00	450.00	450.00	450.00	1,800.00
% Indirect	1,829.75	1,829.75	1,829.75	1,829.75	7,319.00
Other (Describe):	-	-	-	-	-
Other (Describe):	-	-	-	-	-
<b>Operations &amp; Maintenance</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Janitorial Service	-	-	-	-	-
Maintenance Contracts	-	-	-	-	-
Maintenance of Existing Landscaping	-	-	-	-	-
Repair of Equipment and Property	-	-	-	-	-
Utilities	-	-	-	-	-
Other (Describe):	-	-	-	-	-
Other (Describe):	-	-	-	-	-
<b>Other</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Debt Service	-	-	-	-	-
Other (Describe):	-	-	-	-	-
Other (Describe):	-	-	-	-	-
<b>Project Budget Total</b>	<b>\$ 38,428.00</b>	<b>\$ 38,428.00</b>	<b>\$ 38,428.00</b>	<b>\$ 38,428.00</b>	<b>\$ 153,712.00</b>

## VENDOR COPY

**Kitsap Public Health District**

345 6th Street, Suite 300  
 Bremerton, WA 98337  
 (360) 728-2295 FAX (360) 813-1446

2019

**Purchase Order  
 Number: 20257**

Federal ID# 42-1689063

**The following number must appear on all related correspondence, shipping papers and invoices:**

**P.O. Number: 20257**

**TO:**

Xiologix LLC  
 8050 SW Warm Springs Street, Ste. 100  
 Tualatin, OR 97062

**Ship To:**

Kitsap Public Health District  
 345 6th Street, Suite 300  
 Bremerton, WA 98337-1866

P.O. DATE	REQUISITIONER	SHIP VIA	ACCOUNT #
11/14/2019	EDWIN NORTH	Deliver	

QTY	Product #	DESCRIPTION	CHARGE TO	UNIT PRICE	TOTAL
		The Health District's Master Contract Agreement Number Is 39330, NASPO Master Price Agreement No. MNWNC-108 and Washington State Contract No 05815-003, See attached detail quote			\$0.00
1 order	Q#JC008446 V1	3xDell R640 servers and maintenances	45 IT	\$91,217.15	\$91,217.15
					\$0.00

SUBTOTAL \$91,217.15

SHIPPING & HANDLING \$250.00

TAX \$8,232.05

**TOTAL \$99,699.20**

1. Please send 2 copies of your invoice
2. Please notify us immediately if you are unable to ship as specified
3. Send all correspondence to:  
 Purchasing  
 Kitsap Public Health District  
 345 6th Street, Suite 300  
 Bremerton, WA 98337

**Authorized by:**

**Authorized by:**

**Date:**

*Loan Nguyen*  
*Judy Holt*  
 11/14/19

Printed: 11/14/2019 3:53:13 PM

**Xiologix**

8050 SW Warm Springs St. Suite 100  
Tualatin, OR 97062  
(503) 691-4364



**We have prepared a quote for you**

**Combined quote**

QUOTE # JC008446 V1

PREPARED FOR

**Kitsap Public Health District**

PREPARED BY

**Jeff Cook**

## Dell servers

Qty	Product Details	MSRP	Sell	Total
<b>Washington State - Dell</b>				
<b>NASPO Master Price Agreement No. MNWNC-108 and Washington State Contract No 05815-003</b>				
3xDell R640 servers, each with: - Dual Intel Xeon Silver 4110 2.1GHz 8 core processors - 192GB RAM (12x16GB) - Boot from dual 32GB SD cards - no hard drives or RAID card - 2x10G SFP+ with optical transveivers and 2x1G Ethernet ports - Dual port 16G FC HBA - iDRAC9 Enterprise - Dual power supply - 3 years NBD maintenance				
3	<b>PowerEdge R640 Server</b>	\$14,366.00	\$8,370.00	\$25,110.00
3	<b>PowerEdge R640 Motherboard</b>	\$0.00	\$0.00	\$0.00
3	<b>No Trusted Platform Module</b>	\$0.00	\$0.00	\$0.00
3	<b>No Hard Drive, No Backplane chassis</b>	\$0.00	\$0.00	\$0.00
3	<b>PowerEdge R640 Shipping</b>	\$0.00	\$0.00	\$0.00
3	<b>PowerEdge R640 x8 Drive Shipping Material</b>	\$0.00	\$0.00	\$0.00
3	<b>Intel Xeon Silver 4110 2.1G, 8C/16T, 9.6GT/s 2UPI, 11M Cache, Turbo, HT (85W) DDR4-2400</b>	\$0.00	\$0.00	\$0.00
3	<b>Intel Xeon Silver 4110 2.1G, 8C/16T, 9.6GT/s 2UPI, 11MCache, Turbo, HT (85W) DDR4-2400</b>	\$0.00	\$0.00	\$0.00
3	<b>DIMM Blanks for System with 2 Processors</b>	\$0.00	\$0.00	\$0.00
3	<b>Standard 1U Heatsink</b>	\$0.00	\$0.00	\$0.00
3	<b>Standard 1U Heatsink</b>	\$0.00	\$0.00	\$0.00
3	<b>2666MT/s RDIMMs</b>	\$0.00	\$0.00	\$0.00
3	<b>Performance Optimized</b>	\$0.00	\$0.00	\$0.00
3	<b>Diskless Configuration (No RAID, No Controller)</b>	\$0.00	\$0.00	\$0.00
3	<b>No Controller</b>	\$0.00	\$0.00	\$0.00

## Dell servers

Qty	Product Details	MSRP	Sell	Total
3	No Hard Drive	\$0.00	\$0.00	\$0.00
3	No Operating System, No Utility Partition	\$0.00	\$0.00	\$0.00
3	No Media Required	\$0.00	\$0.00	\$0.00
3	iDRAC9,Enterprise	\$0.00	\$0.00	\$0.00
3	iDRAC Group Manager, Disabled	\$0.00	\$0.00	\$0.00
3	iDRAC,Factory Generated Password	\$0.00	\$0.00	\$0.00
3	Riser Config 2, 3x16 LP	\$0.00	\$0.00	\$0.00
3	Broadcom 57412 2 Port 10Gb SFP+ + 5720 2 Port 1Gb Base- T, rNDC	\$0.00	\$0.00	\$0.00
3	IDSDM and Combo Card Reader	\$0.00	\$0.00	\$0.00
3	Redundant SD Cards Enabled	\$0.00	\$0.00	\$0.00
3	32GB microSDHC/SDXC Card	\$0.00	\$0.00	\$0.00
3	32GB microSDHC/SDXC Card	\$0.00	\$0.00	\$0.00
3	No Internal Optical Drive for x4 and x8 HDD Chassis	\$0.00	\$0.00	\$0.00
3	8 Standard Fans for R640	\$0.00	\$0.00	\$0.00
3	Dual, Hot-plug, Redundant Power Supply (1+1), 750W	\$0.00	\$0.00	\$0.00
3	LCD Bezel	\$0.00	\$0.00	\$0.00
3	Dell EMC Luggage Tag	\$0.00	\$0.00	\$0.00
3	No Quick Sync	\$0.00	\$0.00	\$0.00
3	Performance BIOS Settings	\$0.00	\$0.00	\$0.00
3	ReadyRails Sliding Rails With Cable Management Arm	\$0.00	\$0.00	\$0.00
3	No Systems Documentation, No OpenManage DVD Kit	\$0.00	\$0.00	\$0.00
3	US Order	\$0.00	\$0.00	\$0.00
3	Dell Hardware Limited Warranty Plus On-Site Service	\$0.00	\$0.00	\$0.00
3	ProSupport: Next Business Day On-Site Service After Problem Diagnosis, 3 Years	\$0.00	\$0.00	\$0.00
3	ProSupport: 7x24 HW/SW Technical Support and Assistance, 3 Years	\$0.00	\$0.00	\$0.00

## Dell servers

Qty	Product Details	MSRP	Sell	Total
3	Thank you choosing Dell ProSupport. For tech support, visit <a href="http://www.dell.com/support">http://www.dell.com/support</a> or call 1-800- 945-3355	\$0.00	\$0.00	\$0.00
3	On-Site Installation Declined	\$0.00	\$0.00	\$0.00
36	16GB RDIMM, 2666MT/s, Dual Rank	\$0.00	\$0.00	\$0.00
6	Dell EMC PowerEdge SFP+ SR Optic, 10GbE, 850nm	\$0.00	\$0.00	\$0.00
3	QLogic 2692 Dual Port 16Gb Fibre Channel HBA, Low Profile	\$0.00	\$0.00	\$0.00
6	NEMA 5-15P to C13 Wall Plug, 125 Volt, 15 AMP, 10 Feet (3m), Power Cord, North America	\$0.00	\$0.00	\$0.00
Subtotal:				\$25,110.00

## VMware licenses

Qty	Product Details	MSRP	Sell	Total
VMware Essentials Plus kit - Covers 3 dual CPU hosts. - vCenter license included. - 3 years of Prodction support				
1	VMware vSphere 6 Essentials Plus Kit for 3 hosts (Max 2 processors per host) SnS is required. VMware vSphere Essentials Plus includes vCenter Server E	\$4,495.00	\$4,376.58	\$4,376.58
1	Production Support/Subscription VMware vSphere 6 Essentials Plus Kit for 3 years Technical Support, 24 Hour Sev 1 Support -- 7 days a week.	\$2,967.36	\$2,967.36	\$2,967.36
Subtotal:				\$7,343.94

## Microsoft Licenses

Description	Price	Qty	Ext. Price
Microsoft Windows Datacenter license			
- Each license covers one VMware host			

## Microsoft Licenses

Description	Price	Qty	Ext. Price
9EA-01044 <b>Microsoft Windows Server 2019 Datacenter - License - 16 Core - Microsoft Qualified, Volume - Microsoft Open License - Single Language - PC</b>	\$5,848.00	3	\$17,544.00
Subtotal:			<b>\$17,544.00</b>

## Microsoft SQL

Description	Price	Qty	Ext. Price
<b>SQLSVRSTDCORE 2019 SNGL OLP VLIC 2LIC NL CORELIC QLFD</b>	\$3,334.72	2	\$6,669.44
Subtotal:			<b>\$6,669.44</b>

## Storage

Description	Price	Qty	Ext. Price
<b>Washington State - EMC</b> <b>Master Price Agreement No: MNWNC-109</b> <b>State of Washington Participating State</b> <b>Contract # 05815-004</b>			
<b>EMC Unity 380F All Flash Array</b> - Dual Active-Active Storage Processors - 10x800GB flash drives - 4.76TB usable, 9.52TB estimated effective capacity at 2:1 data reduction. - 12x16G FC ports - Data At Rest Encryption - 3 years ProSupport MC maintenance			
<b>UNITY 380F DPE 25 X 2.5 DELL FLD RCK</b>	\$5,577.31	1	\$5,577.31
<b>PROSUPPORT 4HR/MC HARDWARE SUPPORT</b>	\$6,951.96	1	\$6,951.96
<b>UNITY 380F DPE INSTALL KIT</b>	\$0.00	1	\$0.00
<b>D4F 800GB ALL FLASH 25X2.5 SSD</b>	\$1,578.10	10	\$15,781.00
<b>UNITY 2X4 PORT IO 16GB FC AF</b>	\$1,814.55	1	\$1,814.55
<b>UNITY CNA 4X16GB FC SFPS AF</b>	\$0.00	1	\$0.00
<b>UNITY AFA BASE SOFTWARE+ D@RE=IC</b>	\$0.00	1	\$0.00



## Storage

Description	Price	Qty	Ext. Price
PROSUPPORT 4HR/MC SOFTWARE SUPPORT	\$0.00	1	\$0.00
APPSYNC BSC FOR UNITY 300F/350F/380F=IC	\$0.00	1	\$0.00
PROSUPPORT 4HR/MC SOFTWARE SUPPORT	\$0.00	1	\$0.00
STORAGE M&R FOR UNITYXT = IC	\$0.00	1	\$0.00
PROSUPPORT 4HR/MC SOFTWARE SUPPORT	\$0.00	1	\$0.00
RP BASIC FOR UNITY380F/480F/680F/880F=IC	\$0.00	1	\$0.00
PROSUPPORT 4HR/MC SOFTWARE SUPPORT	\$0.00	1	\$0.00
Subtotal:			<b>\$30,124.82</b>

## 10G SFPs

Description	Price	Qty	Ext. Price
10G SFP+ transceivers for Aruba 5406R switch			
- J9150A compatible			
HPE J9150A Compatible 10GBASE-SR SFP+ 850nm 300m DOM Transceiver Module #11559	\$25.00	6	\$150.00
Subtotal:			<b>\$150.00</b>

## Cables

Description	Price	Qty	Ext. Price
LC/LC 50/125 OM4 optical cables			
- 6 for 10G Ethernet			
- 6 for 16G FC			
- 1 for spare			
- 3 meter in length			
** Customer to verify cable length **			
OM4 LC/LC Multimode Duplex 50/125micron 3M 10Gb Fiber	\$21.15	13	\$274.95
Subtotal:			<b>\$274.95</b>

## Services

Description	Price	Qty	Ext. Price
XIOLOGIX Professional Services - On site - Installation and configuration of EMC Unity SAN. - Installation of 3 Dell servers. - Installation and configuration of VMware Essentials Plus. - Assistance with data migration to new infrastructure.			
XIO-PS <b>XIOLOGIX Professional Services - On-Site</b>	\$4,000.00	1	\$4,000.00
Subtotal:			<b>\$4,000.00</b>

## Shipping

Description	Price	Qty	Ext. Price
SHIPPING <b>Shipping</b>	\$250.00	1	\$250.00
Subtotal:			<b>\$250.00</b>

(503) 691-4364  
jcook@xiologix.com  
www.xiologix.com

## Combined quote

### Prepared by:

**Xiologix**

Jeff Cook  
(503) 691-4364 ext. 272  
jcook@xiologix.com

### Prepared for:

**Kitsap Public Health District**

345 6th Street  
Suite 300  
Bremerton, WA 98337  
Nii Quist-Therson  
(360) 728-2321  
network.admin@kitsappublichealth.org

### Quote Information:

**Quote #: JC008446**

Version: 1  
Delivery Date: 11/14/2019  
Expiration Date: 12/13/2019

## Quote Summary

Description	Amount
Dell servers	\$25,110.00
VMware licenses	\$7,343.94
Microsoft Licenses	\$17,544.00
Microsoft SQL	\$6,669.44
Storage	\$30,124.82
10G SFPs	\$150.00
Cables	\$274.95
Services	\$4,000.00
Subtotal:	<b>\$91,217.15</b>
Shipping:	<b>\$250.00</b>
Estimated Tax:	<b>\$8,232.05</b>
Total:	<b>\$99,699.20</b>

## Payment Options

Description	Payments	Interval	Amount
Term Options			
NET30	1	One-Time	\$99,699.20

Taxes, shipping, handling and other fees may apply. We reserve the right to cancel orders arising from pricing or other errors.

## Xiologix

Signature:

*Jeff Cook*

Name:

Jeff Cook

Title:

Director of Enterprise Sales

Date:

11/14/2019

## Kitsap Public Health District

Signature:

Name:

Nii Quist-Therson

Date:

New or Renewed Contracts for the Period of 10/01/2019 through 10/31/2019

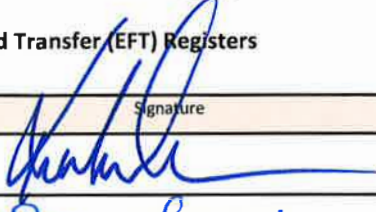

KPHD Contract ID	KPHD Program	Contract Type	Contract Length	KPHB Approved	Contract Amount	Signed Date	Start Date	End Date	Client Contract ID
Active (1 contracts)									
DSHS, Washington State									
ID: 2021	Parent/Child Health, Nancy Acosta	Interlocal/Interagency	Closed			10/03/19	10/07/19	06/30/21	1991-63245
Description: DSHS to allow KPHD limited access to the web-based JOBS Automated System (eJAS) to receive referrals from DSHS of eligible pregnant families in need of home visiting services									

**Kitsap Public Health Board Meeting**

**Date: December 3, 2019**

**CONSENT AGENDA ITEM: Warrant and Electronic Fund Transfer (EFT) Registers**

**Approvals:**

	Signature	Date
Administrator		11/27/2019
Finance Manager		11/25/2019

**Recommended Motion: Approval**

**Items:**

Type	Warrant/EFT Date	Beginning Warrant	Ending Warrant	Total Amount
Accounts Payable	10/1/2019	3787472	3787493	\$ 37,989.23
Accounts Payable	10/2/2019	DD98311	DD98330	19,901.12
Accounts Payable	10/8/2019	3788156	3788163	18,279.00
Accounts Payable	10/9/2019	DD98569	DD98577	4,991.61
Accounts Payable	10/15/2019	3788713	3788726	40,012.48
Accounts Payable	10/16/2019	DD98875	DD98896	10,088.23
Accounts Payable - Transfer	10/22/2019	R00083772	R00083772	53,621.00
Accounts Payable	10/23/2019	3789178	3789187	1,834.80
Accounts Payable	10/24/2019	DD99236	DD99258	13,787.86
Accounts Payable	10/29/2019	3789731	3789744	9,623.06
Accounts Payable	10/30/2019	DD99490	DD99496	10,367.80
<b>Accounts Payable Total</b>				<b>\$ 220,496.19</b>
Payroll PERS Payment (September)	10/11/2019	N/A	N/A	113,597.91
Payroll Taxes	10/31/2019	N/A	N/A	142,840.32
Payroll Benefits	10/31/2019	3789342	3789368	128,107.65
Payroll Benefits	10/31/2019	DD99342	DD99342	7,533.40
Payroll	10/31/2019	N/A	N/A	383,073.62
<b>Payroll Total</b>				<b>\$ 775,152.90</b>
<b>Grand Total</b>				<b>\$ 995,649.09</b>

**Kitsap Public Health Board Action:**

- ☐ Approve
- ☐ Deny
- ☐ Table / Continue

	Signature	Date
Kitsap Public Health Board Chair		

Page  
Date

10/01/1

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[illegible]



Page 5  
Date 10/01/1

<u>Department</u>	<u>Vendor Number</u>	<u>Vendor Name</u>	<u>Purchase Order</u>	<u>Voucher Number</u>	<u>Pay Itm</u>	<u>Warrant Number</u>	<u>Wrt Typ</u>	<u>Check/ Itm Date</u>	<u>Warrant Amount</u>
total									340.00
	403797	SHRED-IT USA    28883 NETWO		1556546	001	3787490	PK	10/01/19	131.21
Warrant 3787490 total									<div style="border-bottom: 1px solid black;"></div> 131.21
	423515	STAPLES ADVANTAGE (PO BOX		1555911	001	3787491	PK	10/01/19	91.10
Warrant 3787491 total									<div style="border-bottom: 1px solid black;"></div> 91.10
	229576	STRUCTURED		1555912	001	3787492	PK	10/01/19	1,263.62
Warrant 3787492 total									<div style="border-bottom: 1px solid black;"></div> 1,263.62
	424353	TOYOTA FINANCIAL SERVICES		1555922	001	3787493	PK	10/01/19	319.68
Warrant 3787493 total									<div style="border-bottom: 1px solid black;"></div> 319.68
Department 95969 total									<div style="border-bottom: 1px solid black;"></div> 37,989.23

WARRANTS BY DEPARTMENT  
A/P USE THIS REPORT FOR SORTING  
WARRANTS & GIVE TO IND DEPARTMT

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Department 95969

Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
Department 95969 00969 95969 Kitsap Public Health Di	384173	CANON FINANCIAL SERVICES,		1555280	001	98311	PT	10/02/19	1,041.15
Warrant 98311 total									1,041.15
	279396	DAVE PURCHASE PROJECT/NAS		1555282	001	98312	PT	10/02/19	378.46
Warrant 98312 total									378.46
	10476	FEDEX (PO BOX 371461 PITT		1555948	001	98313	PT	10/02/19	25.32
Warrant 98313 total									25.32
	416794	JEFFERSON COUNTY FARMERS		1555283	001	98314	PT	10/02/19	1,332.00
Warrant 98314 total									1,332.00
	200487	JEFFERSON COUNTY HEALTH/H		1555284	001	98315	PT	10/02/19	5,404.88
Warrant 98315 total									5,404.88
	387985	JOHNSON, RENEE K		1555269	001	98316	PT	10/02/19	70.76
Warrant 98316 total									70.76
	393436	KATULA, DAYNA		1555270	001	98317	PT	10/02/19	67.86
Warrant 98317 total									67.86
	418815	KELLUM, LYNDSEY B.		1556548	001	98318	PT	10/02/19	135.86
Warrant 98318 total									135.86
	11553	KITSAP COMMUNITY RESOURCE		1555285	001	98319	PT	10/02/19	513.73

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WARRANTS BY DEPARTMENT  
A/P USE THIS REPORT FOR SORTING  
WARRANTS & GIVE TO IND DEPARTMT

Page 8  
Date 10/08/1

Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
00969 95969 Kitsap Public Health D1	339396	GIUNTOLI, PAUL		1556907	001	3788156	PK	10/08/19	75.40
Warrant 3788156 total									75.40
	369036	ONE TIME PAYMENT		1556929	001	3788157	PK	10/08/19	145.00
Warrant 3788157 total									145.00
	12367	KING COUNTY FINANCE: ACCT		1556935	001	3788158	PK	10/08/19	558.00
Warrant 3788158 total									558.00
	409198	OFFICE DEPOT INC (POB 292		1556931	001	3788159	PK	10/08/19	92.51
Warrant 3788159 total									92.51
	264230	SANOFI PASTEUR, INC.		1556938	001	3788160	PK	10/08/19	1,278.15
Warrant 3788160 total									1,278.15
	423515	STAPLES ADVANTAGE (PO BOX		1556934	001	3788161	PK	10/08/19	890.15
Warrant 3788161 total									890.15
	327504	US BANK (JUNIOR DIST		1557235	001	3788162	PK	10/08/19	286.87
	327504	US BANK (JUNIOR DIST		1557235	002	3788162	PK	10/08/19	1,122.93
	327504	US BANK (JUNIOR DIST		1557236	001	3788162	PK	10/08/19	2,129.16
	327504	US BANK (JUNIOR DIST		1557237	001	3788162	PK	10/08/19	1,250.73
	327504	US BANK (JUNIOR DIST		1557243	001	3788162	PK	10/08/19	1,144.16
	327504	US BANK (JUNIOR DIST		1557245	001	3788162	PK	10/08/19	319.98
	327504	US BANK (JUNIOR DIST		1557245	002	3788162	PK	10/08/19	15.25
	327504	US BANK (JUNIOR DIST		1557246	001	3788162	PK	10/08/19	1,261.21
	327504	US BANK (JUNIOR DIST		1557247	001	3788162	PK	10/08/19	760.07

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WARRANTS BY DEPARTMENT  
A/P USE THIS REPORT FOR SORTING  
WARRANTS & GIVE TO IND DEPARTMT

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Department 95969

Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
Department 95969 00969 95969 Kitsap Public Health Di	400843	CIULLA, LAURA M.		1556889	001	98569	PT	10/09/19	313.71
Warrant 98569 total									313.71
	10476	FEDEX (PO BOX 371461 PITT		1556926	001	98570	PT	10/09/19	23.81
Warrant 98570 total									23.81
	356354	GUIDRY, JESSICA		1556919	001	98571	PT	10/09/19	74.44
Warrant 98571 total									74.44
	227674	HOLDCROFT, JODIE		1556920	001	98572	PT	10/09/19	360.76
Warrant 98572 total									360.76
	225229	HOLT, KAREN		1556921	001	98573	PT	10/09/19	26.05
Warrant 98573 total									26.05
	200487	JEFFERSON COUNTY HEALTH/H		1556927	001	98574	PT	10/09/19	3,970.25
Warrant 98574 total									3,970.25
	285101	LYTLE, ROSS		1556922	001	98575	PT	10/09/19	19.72
Warrant 98575 total									19.72
	421248	MOORE, MEGAN R		1556944	001	98576	PT	10/09/19	46.21
Warrant 98576 total									46.21
	11598	ZIMNY, JAMES A.		1556924	001	98577	PT	10/09/19	156.66

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Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
<hr/>									
Warrant 98577 total									<hr/> 156.66 <hr/>
 Department 95969 total									<hr/> 4,991.61 <hr/>



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Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
	20285	NOBLE, GREGORIA A.		1558196	001	3788722	PK	10/15/19	61.48
Warrant 3788722 total									----- 61.48
	369036	<i>PEDERSON, SUE</i> ONE TIME PAYMENT		1558088	001	3788723	PK	10/15/19	485.00
Warrant 3788723 total									----- 485.00
	206991	WASHINGTON POISON CENTER		1558094	001	3788724	PK	10/15/19	208.34
Warrant 3788724 total									----- 208.34
	244803	WEX BANK		1558471	001	3788725	PK	10/15/19	179.38
Warrant 3788725 total									----- 179.38
	369036	<i>WEX BANK</i> ONE TIME PAYMENT		1558467	001	3788726	PK	10/15/19	150.00
Warrant 3788726 total									----- 150.00
Department 95969 total									-----  40,012.48

WARRANTS BY DEPARTMENT  
A/P USE THIS REPORT FOR SORTING  
WARRANTS & GIVE TO IND DEPARTMT

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Department 95969

Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
Department 95969 00969 95969 Kitsap Public Health Di	281133	ACOSTA, NANCY		1558029	001	98875	PT	10/16/19	329.32
Warrant 98875 total									329.32
	413333	ADER, SAM A		1558353	001	98876	PT	10/16/19	203.58
Warrant 98876 total									203.58
	404723	BIERMAN, DANA		1558030	001	98877	PT	10/16/19	7.54
Warrant 98877 total									7.54
	226171	BROWN, STEVEN		1558031	001	98878	PT	10/16/19	196.04
Warrant 98878 total									196.04
	21555	ENVIRONMENTAL SYSTEMS RES		1558073	001	98879	PT	10/16/19	5,177.50
Warrant 98879 total									5,177.50
	215766	EVANS, ERIC		1558195	001	98880	PT	10/16/19	51.04
Warrant 98880 total									51.04
	341969	EVANS, KELLY		1558032	001	98881	PT	10/16/19	85.50
Warrant 98881 total									85.50
	10476	FEDEX (PO BOX 371461 PITT		1558083	001	98882	PT	10/16/19	6.77
Warrant 98882 total									6.77
	344819	FISK, APRIL		1558033	001	98883	PT	10/16/19	68.79

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# Kitsap County Treasurer's Office

## Cash Transmittal

### Transfer Receipt #R00083772

Approved: 10/22/2019

GL Date: 10/22/2019

Total Amount: \$0.00

#### Request Details

<b>Request ID</b>	84579
<b>Type</b>	Transfer
<b>Owner</b>	Becky Stack
<b>Organization</b>	Kitsap Public Health District
<b>Approved By</b>	Becky Stack
<b>Comments</b>	Kitsap Public Health District Vital Statistics Transfer

#### Funds Breakdown

Fund Name	Fund #	Account #	Subledger	T Code	Amount	Memo
General Fund	95969	3860			(\$53,621.00)	3rd QTR 2019 VITAL STATISTICS FEE TRN
Death Investigate Suspense Fund	82584	2370			\$29,041.00	Death invest. acct
Death Investigate Suspense Fund	82584	2371			\$24,580.00	Vital records

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Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
	368370	WHIT-DELTA DENTAL OF WASH		1559227	001	3789186	PK	10/23/19	102.74
Warrant 3789186 total									102.74
	277244	WSEHA		1559223	001	3789187	PK	10/23/19	50.00
Warrant 3789187 total									50.00
Department 95969 total									 1,834.80

WARRANTS BY DEPARTMENT  
A/P USE THIS REPORT FOR SORTING  
WARRANTS & GIVE TO IND DEPARTMT

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Department 95969

Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
Department 95969 00969 95969 Kitsap Public Health Di	281133	ACOSTA, NANCY		1559261	001	99236	PT	10/24/19	270.14
Warrant 99236 total									270.14
	188781	ASSOCIATION OF WASHINGTON		1559181	001	99237	PT	10/24/19	25.00
Warrant 99237 total									25.00
	216294	BANIGAN, LESLIE		1559372	001	99238	PT	10/24/19	45.24
Warrant 99238 total									45.24
	407981	BERGER, ANGIE C		1559278	001	99239	PT	10/24/19	101.96
Warrant 99239 total									101.96
	404723	BIERMAN, DANA		1559150	001	99240	PT	10/24/19	509.30
Warrant 99240 total									509.30
	279396	DAVE PURCHASE PROJECT/NAS		1559198	001	99241	PT	10/24/19	52.07
Warrant 99241 total									52.07
	10476	FEDEX (PO BOX 371461 PITT		1559199	001	99242	PT	10/24/19	23.81
Warrant 99242 total									23.81
	422623	FINE, GEORGE F.		1559152	001	99243	PT	10/24/19	278.40
Warrant 99243 total									278.40
	410696	GRIEGO, YANEISY		1559280	001	99244	PT	10/24/19	124.90



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09200

Account Ledger Inquiry

From Date/Period 10/11/19

Account. . . . . 95969.2315

Thru Date/Period 10/11/19

ACCRUED EMPLOYEE BENEFITS

Ledger Type. . . AA

Subledger. . . . \*

Skip to Doc/Type . . . . .

Y-T-D Period End : . . . . . 5,886.33-

Cumul Period End : . . . . . 115,133.22-

Additional Selections Exist

O	DT	Document	Date	Explanation/Alpha	Debit	Credit	P
0	U1	361871	10/11/19	DAILY CASH TRANSMI	20,522.73		P
-	U1	361871	10/11/19	DAILY CASH TRANSMI	93,075.18		P
					113,597.91		

Ledger Total 113,597.91

Unposted Total

Opt: 1/2=Orig Entry 5=Details F17=Top F18=Totals F21=Prt Ledg F24=More

09200

Account Ledger Inquiry

From Date/Period 10/31/19

Account. . . . . 95969.2317

Thru Date/Period 10/31/19

ACCRUED TAXES

Ledger Type. . . AA

Skip to Doc/Type . . . . .

Subledger. . . . \*

Y-T-D Period End :

Cumul Period End :

Additional Selections Exist

0	DT	Document	Date	Explanation/Alpha	Debit	Credit	P
U1		362616	10/31/19	DAILY CASH TRANSMI	142,840.32		P

142,840.32

Ledger Total  
Unposted Total

142,840.32

Opt: 1/2=Orig Entry 5=Details F17=Top F18=Totals F21=Prt Ledg F24=More

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Date - 10/25/1

Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
00969 Kitsap Public Health D1	95969								
	5628	AMERICAN FAMILY LIFE COUN		1560744	001	3789342	PK	10/31/19	2,566.92
Warrant total									2,566.92
	261383	EMPLOYMENT SECURITY DEPT		1560791	001	3789343	PK	10/31/19	2,197.16
Warrant total									2,197.16
	412028	HEALTH CARE AUTHORITY PO		1560833	001	3789344	PK	10/31/19	3,191.14
Warrant total									3,191.14
	383135	HEALTH EQUITY		1560827	001	3789345	PK	10/31/19	483.33
Warrant total									483.33
	11003	KITSAP PUBLIC HEALTH DIST		1560770	001	3789346	PK	10/31/19	9.00
Warrant total									9.00
	6831	NACO DEFERRED COMP XPH		1560762	001	3789347	PK	10/31/19	5,488.00
Warrant total									5,488.00
	394347	PEAK 1 ADMINISTRATION, LL		1560831	001	3789348	PK	10/31/19	609.00
Warrant total									609.00
	6811	PROF & TECHNICAL ENG XPH		1560753	001	3789349	PK	10/31/19	2,850.20
Warrant total									2,850.20
	418817	VOYA INSTITUTIONAL TRUST		1560837	001	3789350	PK	10/31/19	275.00
Warrant total									275.00



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WARRANTS BY DEPARTMENT  
A/P USE THIS REPORT FOR SORTING  
WARRANTS & GIVE TO IND DEPARTMT

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Date - 10/25/1

Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
total									128.63
	426139	WCIF METLIFE CRITICAL		1560844	001	3789360	PK	10/31/19	54.15
Warrant 3789360 total									54.15
	426138	WCIF METLIFE HOSPITAL		1560843	001	3789361	PK	10/31/19	52.37
Warrant 3789361 total									52.37
	5606	WCIF STANDARD ACCIDENT		1560738	001	3789362	PK	10/31/19	280.29
Warrant 3789362 total									280.29
	5601	WCIF STANDARD BASIC LIFE		1560730	001	3789363	PK	10/31/19	752.40
Warrant 3789363 total									752.40
	341372	WCIF STANDARD LIFE INSURA		1560815	001	3789364	PK	10/31/19	1,807.64
Warrant 3789364 total									1,807.64
	360635	WCIF STANDARD STD		1560818	001	3789365	PK	10/31/19	470.30
Warrant 3789365 total									470.30
	5605	WCIF STANDARD VTL		1560735	001	3789366	PK	10/31/19	1,541.35
Warrant 3789366 total									1,541.35
	368370	WHIT-DELTA DENTAL OF WASH		1560819	001	3789367	PK	10/31/19	7,154.09
Warrant 3789367 total									7,154.09
	368371	WHIT-WILLIAMETTE		1560820	001	3789368	PK	10/31/19	1,881.80

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Kitsap County  
Summary Payroll Register

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Date - 10/18/19  
Period - 10/31/19  
Payroll ID - 620

Company - Home : 00969  
Home Bus. Unit :

Kitsap Public Health District  
95969 Kitsap Public Health District

Deductions and taxes are confidential and have been redacted

Number	EMPLOYEE Name	Hours	Wages	Vendor#	Gross Pay	Deductions	Taxes	Net Pay	Check Control	I Err C	Msg
427227	ABAZI, ORNELA	165.36	4,668.08	1,416.29	4,668.08			3,761.39	9667942	N	
4563	ABNEY, BEVERLY M.	173.35	4,741.00	1,490.14	4,741.00			3,146.41	9667943	N	
278956	ACOSTA, NANCY M.	173.34	7,724.00	1,819.74	7,724.00			4,586.23	9667944	N	
413193	ADER, SAM A.	173.32	4,423.00	1,384.41	4,423.00			2,903.89	9667945	N	
407901	ADHIKARI, ANISH	173.33	6,661.00	1,302.64	6,661.00			4,553.51	9667946	N	
419470	ANDERSON, AMY C.	173.31	5,241.00	1,453.45	5,241.00			3,440.50	9667947	N	
215189	BANIGAN, LESLIE B.	173.33	6,571.00	1,290.93	6,571.00			4,624.21	9667948	N	
328436	BAZZELL, RICHARD L.	173.33	6,571.00	2,096.15	6,571.00			4,411.45	9667950	N	
419805	BELL, GUS J.	173.34	6,972.00	1,771.17	6,972.00			4,665.18	9667951	N	
407902	BERGER, ANGELINE C.	173.30	3,927.00	1,311.26	3,927.00			2,927.19	9667952	N	
404611	BIERMAN, DANA J.	156.01	5,409.00	1,223.10	5,409.00			4,050.32	9667953	N	
426250	BORJA, WINDIE R.	173.32	3,489.00	1,262.93	3,489.00			2,794.97	9667955	N	
2058	BOYSEN-KNAPP, KAREN	138.68	4,808.00	2,034.11	4,808.00			2,719.87	9667956	N	
245475	BROWER, JANET L.	173.35	7,922.00	1,839.49	7,922.00			5,448.23	9667957	N	
271677	BROWN, STEVEN J.	173.33	6,571.00	1,290.93	6,571.00			4,058.40	9667958	N	
409212	BURCHETT, BRIAN D.	173.34	4,011.00	957.98	4,011.00			2,983.53	9667959	N	
411387	CHANG, MARGO W.	173.36	3,351.00	1,009.69	3,351.00			2,664.69	9667960	N	
400655	CIULLA, LAURA M.	173.35	6,835.00	1,698.11	6,835.00			4,638.25	9667961	N	
246639	DALTON, MELANIE A.	191.83	8,519.77	1,981.61	8,519.77			6,391.81	9667962	N	
430735	DUREN, ASHLEY L.	221.35	5,398.72	2,397.85	5,398.72			3,991.70	9667963	N	
223648	EAKES, DEANNA L.	173.32	4,787.00	1,058.91	4,787.00			3,110.46	9667964	N	
4565	EVANS, ERIC V.	173.35	7,922.00	2,785.74	7,922.00			2,590.26	9667965	N	
340919	EVANS, KELLY A.	173.34	5,826.00	1,566.88	5,826.00			4,115.27	9667966	N	
288900	FANNING, LAUREN	137.50	4,125.00	24.16	4,125.00			3,788.36	9667967	N	
421693	FINE, GEORGE F.	86.67	1,879.00	1,048.45	1,879.00			1,466.25	9667968	N	
321284	FISK, APRIL K.	173.35	5,802.00	2,510.01	5,802.00			3,519.84	9667969	N	
356883	FONG, YOLANDA N.	173.34	9,449.00	2,510.01	9,449.00			6,694.21	9667970	N	
337331	GIUNTOLI, PAUL A.	173.33	6,571.00	1,663.77	6,571.00			4,165.37	9667971	N	
401905	GONZALEZ, ANNA K.	173.32	5,763.00	2,510.93	5,763.00			4,311.18	9667972	N	
1264	GRELLNER, KEITH J.	173.34	11,593.00	2,081.65	11,593.00			8,170.54	9667973	N	
421427	GRESS, NICOLE R.	173.30	3,369.00	1,806.03	3,369.00			2,523.49	9667974	N	
410072	GRIEGO, YANEISY	156.00	3,329.00	1,164.33	3,329.00			2,506.46	9667975	N	
355732	GUIDRY, JESSICA F.	173.35	7,922.00	2,785.74	7,922.00			5,605.36	9667976	N	
356336	GUZMAN, DAMARYS L.	173.31	4,494.00	1,826.02	4,494.00			3,113.53	9667977	N	
412171	HAMEL, PATRICK B.	173.35	5,927.00	1,629.25	5,927.00			3,992.30	9667978	N	
427228	HELVIK, BRITTANY M.	173.34	3,056.00	833.77	3,056.00			2,421.57	9667979	N	
4579	HOLDCROFT, GRANT A.	173.33	8,045.00	1,855.49	8,045.00			5,079.03	9667980	N	
270783	HOLDCROFT, JODIE ST	173.33	6,571.00	1,663.77	6,571.00			4,138.93	9667981	N	
1041	HOLT, JUDITH A.	173.35	7,922.00	1,555.52	7,922.00			4,487.74	9667982	N	
2726	HOLT, KAREN L.	173.35	7,922.00	2,404.20	7,922.00			5,227.68	9667983	N	
306605	HUGHES, RACHEL J.	173.33	3,900.00	1,316.38	3,900.00			2,855.04	9667984	N	
409213	HUNTER, KARI L.	173.33	6,843.00	1,463.86	6,843.00			4,757.70	9667985	N	
295036	JAMESON, BETTY S.	173.36	4,074.00	1,339.02	4,074.00			3,045.38	9667986	N	
400651	JOHANSON, KRISTA M.	173.31	3,714.00	1,724.57	3,714.00			2,826.19	9667987	N	
421429	JOHNSON, RENEE K.	173.31	5,376.00	1,233.52	5,376.00			3,897.16	9667988	N	
358933	JONES, KIMBERLY D.	173.33	6,571.00	1,290.93	6,571.00			4,493.68	9667989	N	
393427	KATULA, DAYNA R.	173.33	6,207.00	2,175.14	6,207.00			3,675.28	9667990	N	
418812	KELLUM, LYNDSEY B.	104.01	3,606.00	961.64	3,606.00			2,392.49	9667991	N	
245476	KENCH, DONALD C.	173.33	3,867.00	2,083.54	3,867.00			2,616.09	9667992	N	

Kitsap County  
Summary Payroll Register

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Period - 10/31/19  
Payroll ID - 620

Company - Home : 00969 Kitsap Public Health District  
Home Bus. Unit : 95969 Kitsap Public Health District

Deductions and taxes are confidential and have been redacted

Number	EMPLOYEE Name	Hours	Wages	Vendor#	Gross Pay	Deductions	Taxes	Net Pay	Check Control	I Err C	Msg
250913	KIESS, JOHN F.	173.34	9,449.00	2,929.66	9,449.00			6,270.62	9667993	N	
421430	KINDSCHY, BRANDON J	173.32	5,120.00	2,366.63	5,120.00			3,644.45	9667994	N	
16125	KNOOP, MELINA V.	176.58	6,755.81	1,687.81	6,755.81			4,476.72	9667995	N	
243184	KRUSE, CHARLES H.	173.33	6,661.00	2,234.19	6,661.00			4,281.94	9667996	N	
327580	KUSHNER, SIRI E.	173.33	8,571.00	2,870.14	8,571.00			6,539.45	9667997	N	
416539	LAIRD, MELISSA Y.	173.35	7,922.00	1,839.49	7,922.00			5,523.06	9667998	N	
429748	LAU, ANDREW S.	173.31	5,012.00	1,461.01	5,012.00			3,760.83	9667999	N	
285038	LYTLE, ROSS D.	173.33	6,571.00	2,031.77	6,571.00			4,256.68	9668000	N	
388104	MAZUR, KARINA MARIA	173.31	6,397.00	1,641.14	6,397.00			4,302.41	9668001	N	
421431	MCDOWELL, STACI M.	173.34	4,011.00	1,665.19	4,011.00			3,188.84	9668002	N	
387088	MCKINNON, BRYAN M.	173.31	5,376.00	1,273.06	5,376.00			4,200.71	9668004	N	
429377	MENAMARA, NICOLE E.	173.32	4,527.00	2,289.50	4,527.00			3,323.30	9668005	N	
279971	MOEN, ANNE M.	173.34	4,876.00	1,875.70	4,876.00			3,355.63	9668006	N	
406607	MOONTREE, KELA L.	173.34	4,661.00	1,415.36	4,661.00			3,376.24	9668007	N	
421227	MOORE, MEGAN R.	146.67	4,612.86	1,991.06	4,612.86			3,365.18	9668008	N	
324204	MORGAN, W. NEWTON	173.33	6,571.00	2,096.15	6,571.00			4,641.30	9668009	N	
312378	MORRIS, DAWN M.	138.67	3,830.00	851.64	3,830.00			2,790.74	9668010	N	
406005	MURRAY, KEISHA R.	138.68	3,915.00	889.60	3,915.00			3,011.96	9668011	N	
295033	NGUYEN, LOAN T.	138.65	3,440.00	1,824.55	3,440.00			2,193.43	9668012	N	
430367	NICHOLS, ELIZABETH	89.07	3,450.50	1,712.28	3,450.50			2,280.40	9668013	N	
208456	NICOLAISEN, NIELS K	173.33	6,571.00	2,222.48	6,571.00			4,647.22	9668014	N	
3128	NOBLE, GREGORIA A.	173.34	4,876.00	1,153.35	4,876.00			3,168.22	9668015	N	
22459	NORTH, EDWIN	173.33	8,571.00	2,870.14	8,571.00			2,290.18	9668016	N	
405301	NUNO, CRYSTAL M.	173.35	5,927.00	1,207.17	5,927.00			3,291.82	9668017	N	
426938	ONARHEIM, CARIN E.	173.29	3,835.00	941.09	3,835.00			2,720.42	9668018	N	
243679	OUTHWAITE, MINDI L.	121.35	4,701.00	1,185.09	4,701.00			3,212.05	9668019	N	
419118	PANDINO, LINDA E.	173.32	4,300.00	1,368.41	4,300.00			3,204.62	9668020	N	
229901	PHIPPS, BETH M.	173.34	8,024.00	1,479.92	8,024.00			5,073.56	9668021	N	
394466	PREWITT, SUSANA C.	173.31	4,000.00	956.55	4,000.00			3,029.74	9668022	N	
1214	QUAYLE, TIMOTHY P.	173.34	7,428.00	2,333.94	7,428.00			5,023.35	9668023	N	
418444	RAMUNNO, PHILIP M.	173.34	5,526.00	1,552.86	5,526.00			4,106.15	9668025	N	
324654	RHEA, SUSAN R.	173.33	3,900.00	1,316.38	3,900.00			2,802.70	9668026	N	
267073	RIDGE, BETTI L.	173.32	6,716.00	1,682.64	6,716.00			4,598.34	9668027	N	
404613	RORK, IAN M.	173.35	4,644.00	1,413.15	4,644.00			3,461.99	9668028	N	
425553	SHUHLER, YANA	173.34	3,056.00	1,255.85	3,056.00			2,189.61	9668029	N	
361388	SMITH, TERRI L.	173.33	7,344.00	1,764.31	7,344.00			5,093.81	9668030	N	
427776	SOOTER, THADDEUS L.	171.35	5,735.06	2,501.30	5,735.06			4,142.61	9668031	N	
347366	STEDMAN, KELSEY E.	174.57	6,938.08	1,338.66	6,938.08			4,546.79	9668032	N	
423168	STEWART, TOBBI S.	173.32	5,120.00	3,471.48	5,120.00			3,150.35	9668033	N	
410415	STUNTZ, JAYME M.	173.33	6,545.00	2,606.65	6,545.00			4,425.27	9668034	N	
1682	TURNER, DENISE M.	173.35	4,741.00	2,015.47	4,741.00			2,897.73	9668035	N	
401072	TURNER, SUSAN E.	173.34	15,176.00	3,325.49	15,176.00			9,227.50	9668036	N	
429750	ULACIA, NICHOLAS J.	173.32	3,820.00	1,330.98	3,820.00			2,783.77	9668037	N	
426251	WAGNER, MARY K.	121.34	2,246.00	864.33	2,246.00			1,561.77	9668038	N	
392243	WALTHER, SUSAN B.	173.34	6,223.00	2,050.90	6,223.00			4,066.00	9668039	N	
14545	WELLBORN, BRIAN D.	129.99	2,900.00	1,161.99	2,900.00			1,733.11	9668040	N	
397255	WENDT, JAN E.	173.34	6,672.00	2,235.62	6,672.00			4,914.07	9668041	N	
426939	WINTERS, CHRISTOPHE	173.36	4,894.00	1,445.67	4,894.00			3,670.71	9668042	N	
301566	YANDA, KERRIE L.	173.35	7,201.00	2,217.63	7,201.00			4,760.53	9668043	N	

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Period - 10/31/19  
Payroll ID - 620Company - Home \* \* 00969 Kitsap Public Health District  
Home Bus. Unit \* \* 95969 Kitsap Public Health District

Deductions and taxes are confidential and have been redacted

EMPLOYEE	Hours	Wages	Vendor#	Gross Pay	Deductions	Taxes	Net Pay	Check Control	I Err
Number	Name								C Msg
2908	ZIMNY, JAMES A.	174.09	6,263.39	1,590.13	6,263.39		4,147.17	9668044	N
Total.		16598.36	565,868.27	169,710.77	565,868.27	81,213.50	383,073.62		