

**Kitsap Public Health District  
Consent Agenda Agreement Summary  
March 3, 2020**

KPHD Contract Number	Their Contract Number	Contractor and Agreement Name	Type of Agreement	Term of Agreement	Amount to District	Amount to Other Agency
<b>1749 Amendment 13 (2065)</b>	CLH18248	<b>Washington State Department of Health</b> <i>Consolidated Contract</i>	Amendment	01/01/2018-12/31/2020	<b>\$5,800</b>	<b>\$0</b>
<b>Description:</b> Adds Statements of Work for NEP SSI BEACH Program and amends Statements of Work for Office of Drinking Water Group A Program and Office of Emergency Preparedness & Response program and adds additional funding of \$5,800 for a revised maximum consideration of \$5,722,477.						
<b>1869 Amendment 1 (2066)</b>	N/A	<b>Olympic Community of Health</b> <i>Change Plan</i>	Interlocal Agreement	10/01/2018-06/30/2019	<b>Dependent on milestones</b>	<b>\$0</b>
<b>Description:</b> Includes a corrected change plan of the District's collaboration with ACH and partners to achieve the Change Plan outcomes, coordinate referrals for at-risk subpopulations, train staff regarding social determinants of health, and provide care coordination services for referred clients.						
<b>2002 Amendment 1 (2059)</b>	N/A	<b>Clallam County Health &amp; Human Services</b> <i>Tobacco &amp; Vapor Product Prevention &amp; Control Program and YMPEP.</i>	Interlocal Agreement	07/01/2019-06/30/2020	<b>\$0</b>	<b>\$61,000</b>
<b>Description:</b> Washington State Department of Health has amended Scope of work and budget to incorporate FPH - Youth Tobacco Vapor Prevention funding, which can only be used for Tobacco and Vapor 21 outreach and education activities. Therefore, the funding source table is amended to include FPH - Youth Tobacco Vapor Prevention; the total contract amount remains unchanged.						
<b>2048</b>	N/A	<b>Peninsula Community Health Services</b> <i>Kitsap Connect</i>	Subcontract	01/01/2020-12/31/2020	<b>\$0</b>	<b>\$78,461</b>
<b>Description:</b> Subcontractor to provide a designated Community Health Worker to streamline integrated care for Kitsap Connect clients who are patients or potential patients of Subcontractor and to participate on the crisis response and care coordination team as content expert in co-occurring disorder behavioral health.						

2056	N/A	<b>The Salvation Army</b> <i>Kitsap Connect</i>	Contract for Services	01/01/2020-12/31/2020	\$0	\$72,530
<b>Description:</b> For the Kitsap Connect Program, the District requires Contractor to provide a trained security guard, a case manager and phone/internet connectivity to the Kitsap Connect office space.						
2067	N/A	<b>Jefferson County Public Health</b> <i>Nurse Family Partnership</i>	Interlocal Agreement	07/01/2019-06/30/2020	\$194,718.64	\$0
<b>Description:</b> The Parties share Nurse Family Partnership (NFP) staff, training, and supervision through the Department of Children, Youth, and Families (DCYF) Grant. KPHD to continue its Home Visiting Services, perform assessments and referrals, and ensure compliance with NFP model requirements, and participate in local and regional early learning coalitions and other initiatives.						

**CONTRACT NUMBER: CLH18248**

**AMENDMENT NUMBER: 13**

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:
  - NEP SSI BEACH Program - Effective March 1, 2020
- ☒ Amends Statements of Work for the following programs:
  - Office of Drinking Water Group A Program - Effective January 1, 2018
  - Office of Emergency Preparedness & Response - Effective July 1, 2019
- ☐ Deletes Statements of Work for the following programs:

2. Exhibit B-13 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-12 Allocations as follows:

- ☒ Increase of \$5,800 for a revised maximum consideration of \$5,722,477.
- ☐ 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-13 Schedule of Federal Awards, attached and incorporated by this reference, amends and replaces Exhibit C-12.

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**  
**TABLE OF CONTENTS**

<b>DOH Program Name or Title:</b> NEP SSI BEACH Program - Effective March 1, 2020 .....	3
<b>DOH Program Name or Title:</b> Office of Drinking Water Group A Program - Effective January 1, 2018 .....	12
<b>DOH Program Name or Title:</b> Office of Emergency Preparedness & Response - Effective July 1, 2019.....	17

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

**DOH Program Name or Title:** NEP SSI BEACH Program - Effective March 1, 2020

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

**Contract Number:** CLH18248

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

**Period of Performance:** March 1, 2020 through October 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:** The Beach Environmental Assessment, Communication, and Health (BEACH) Program monitors water at marine swimming beaches for bacteria and provides public notification when levels are unsafe.

**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			
PS SSI 1-5 BEACH TASK 4	66.123	333.66.12	261K1210	03/01/20	10/31/20	0	5,800	5,800
<b>TOTALS</b>						<b>0</b>	<b>5,800</b>	<b>5,800</b>

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	<u>BEACH Program Administration and Annual Meeting:</u> Time spent on administrative duties related to the BEACH Program and the 2020 Annual meeting attendance. Summarize time spent on administrative duties in annual report.		1. Annual meeting 2. Annual report	1. March 2020 2. October 31, 2020	Reimbursement for actual costs up to \$1,000.
2	<u>Bacteria Monitoring &amp; Public Notification</u> • Collect samples and field observations in accordance with BEACH Program Quality Assurance Project Plan (QAPP). Notify BEACH Program Manager in advance if samples cannot be collected. Coordinate deviations from the QAPP and/or schedule with the BEACH Program Manager. • Post and/or remove swimming advisory signs as needed. Provide public education about beach water quality. Notify BEACH Program Manager of swimming advisories as soon as possible.		1. Enter data into Department of Ecology's (ECY) BEACH Program Database. 2. Email or mail copies of laboratory analytical reports to BEACH Program Data Manager. 3. Include a list of swimming advisories in annual report.	1. By Friday each week of sample collection. 2. Upon receipt. 3. In annual report due October 31, 2020.	Reimbursement for actual costs up to \$3,600.

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
3	<u>Illness Pollution Investigations</u> • Notify BEACH Program Manager of any illness reports related to recreational swimming beaches. • Conduct illness investigations as needed.		1. Provide notification via telephone to BEACH Program Manager.  2. Summarize illness investigation in annual report.	1. Within fourteen (14) business days.  2. In annual report due October 31, 2020.	Reimbursement for actual costs up to \$200
4	<u>Bacterial Source Investigations</u> To conduct shoreline surveys or other investigative work to locate possible pollution source.		1. Submit completed BEACH Program Shoreline Survey Form to BEACH Program Manager (if applicable).  2. Summarize investigation work in annual report.	1. Within one (1) month of completing shoreline survey.  2. In annual report due October 31, 2020.	Reimbursement for actual costs up to \$1,000.

**\*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 Manual, Handbook, Policy References**

Quality Assurance Project Plan at: <https://fortress.wa.gov/ecy/publications/SummaryPages/1903119.html>

**Program Specific Requirements/Narrative**

The following provisions are the pass-thru requirements of subawards funded under this U.S. Environmental Protection Agency (EPA) grant.

**Administrative Conditions**

**1. General Terms and Conditions – Updated April 27, 2017**

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-april-27-2017-or-later>. These terms and conditions are in addition to the assurances and certifications made as part of the award and the terms, conditions or restrictions cited throughout the award, and are added to the end of this document.

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, 2017, the limit is \$622.72 per day \$77.84 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 STATES: <https://www.epa.gov/grants/state-grant-cybersecurity-condition>

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

For Other Recipients: <https://www.epa.gov/grants/cybersecurity-grant-condition-other-recipients-including-intertribal-consortia>

## **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.

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**

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 titled 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 15<sup>th</sup> of each year. Final reports are due by October 15<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 subrecipients, loan recipients, 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. In Washington State – the Office of Women and Minority Business Enterprises.
- (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 recipient 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 Recipient**

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.

### **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 Contracts 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 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.

**2. Final Performance Report**

The subrecipient shall submit a final performance report, which is due 30 calendar days after the expiration or termination of the award. The report shall be submitted to the 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 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. Information Collection Requirements**

EPA and the subrecipient agree to comply with the requirements of the Paperwork Reduction Act in completing the project. Because the scope of work includes a survey, a questionnaire or similar information-gathering activity, the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq. ), requires EPA to obtain Office of Management and Budget (OMB) clearance prior to the subrecipient's collection of information by means of identical questions posed to 10 or more persons.

The subrecipient will provide to the Contract Manager the following information: (1) description of the information to be collected; (2) explanation of the need for the information; and (3) to whom the survey is being directed.

**5. 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 PC-01J18001 to Washington State Department of Health. 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."**

**6. Annual Conferences**

The subrecipient may attend one or more appropriate conferences each year, which may be within the Puget Sound region. The specific conferences will be determined in consultation with the Contract Manager. The purpose of this requirement is to provide subrecipients with opportunities to learn about and benefit from other relevant initiatives and programs that relate to the funded work; to exchange information about their funded work with organizations that may benefit from their experience; and generally to raise awareness within the Puget Sound, Salish Sea, and large aquatic ecosystem protection and restoration communities of the funded work. Examples of potentially relevant conferences include, but are not limited to, the biennial Puget Sound-Georgia Basin Ecosystem Conference <http://depts.washington.edu/uwconf/psgb/> and local or regional meetings of Tribal, professional, scientific, or other relevant associations <http://www.wvu.edu/salishseaconference/>. Specific conferences will depend on the nature of the work proposed. Subrecipient will be allowed to use award funds to pay for travel and lodging. The subrecipient should include anticipated costs for attending conferences in their proposed budget. <https://www.eopugetsound.org/terms/354>

**7. 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.

## **8. 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/labcomp.htm> or a copy may also be requested by contacting the 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. The 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.

## **9. 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).

## **10. 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.

## **11. 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 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 Contract Manager listed on the front page of the Award Document.

## **12. 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)

## **13. Model Programmatic Subaward Reporting Requirement (GPI-16-01)**

The subrecipient must report on its subaward monitoring activities under 2 CFR 200.331(d).

Examples of items that must be reported if the pass-through entity has the information available are:

- Summaries of results of reviews of financial and programmatic reports.
- Summaries of findings from site visits and/or desk reviews to ensure effective subrecipient performance.
- Environmental results the subrecipient achieved
- Summaries of audit findings and related pass-through entity management decisions.
- Actions the pass-through entity has taken to correct deficiencies such as those specified at 2 CFR 200.331(e), 2 CFR 200.207 and the 2 CFR Part 200.338 Remedies for Noncompliance.

## **14. Lobbying and Litigation**

- i. The chief executive officer of this subrecipient agency shall ensure that no grant funds awarded under this assistance agreement are used to engage in lobbying of the Federal Government or in litigation against the U.S. unless authorized under existing law. The subrecipient shall abide by the Cost Principles available at 2 CFR 200 which generally prohibits the use of federal grant funds for litigation against the U.S. or for lobbying or other political activities. The subrecipient agrees to comply with Title 40 CFR Part 34, New Restrictions on Lobbying. The subrecipient shall include the language of this provision in award documents for all subawards exceeding \$100,000, and require that subrecipients submit certification and disclosure forms accordingly.
- ii. In accordance with the Byrd Anti-Lobbying Amendment, any recipient who makes a prohibited expenditure under Title 40 CFR Part 34 or fails to file the required certification or lobbying forms shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such expenditure.
- iii. Subcontracts awarded by the subrecipient shall contain, when applicable, the anti-lobbying provision as stipulated in the Appendix II to Part 200—Contract Provisions for Non-Federal Entity Contracts Under Federal Awards.
- iv. Pursuant to Section 18 of the Lobbying Disclosure Act, the subrecipient affirms that it is not a nonprofit organization described in Section 501(c)(4) of the Internal Revenue Code of 1986; or that it is a nonprofit organization described in Section 501(c)(4) of the Code but does not and will not engage in lobbying activities as defined in Section 3 of the Lobbying Disclosure Act. Nonprofit organizations exempt from taxation under section 501(c)(4) of the Internal Revenue Code that engage in lobbying activities are ineligible for EPA subawards.

## **15. Quality Assurance Requirements (2 CFR 1500.11)**

Subrecipient will submit a Quality Assurance Project Plan Waiver form after reviewing using the Washington State Department of Ecology's NEP Quality Assurance web page: <https://ecology.wa.gov/About-us/How-we-operate/Scientific-services/Quality-assurance>. If a QAPP is required, subrecipients will work with Ecology's NEP Quality Coordinator (NEP QC) to develop and approve the QAPP. Work related to collecting new or using existing environmental data may not begin until the QAPP waivers are completed and approved. <https://fortress.wa.gov/ecy/publications/summarypages/0403030.html>.

Acceptable Quality Assurance documentation must be submitted to the Contract Manager within 30 days of the acceptance of this agreement or another date as negotiated with the Contract Manager. 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 Contract Manager, in concert with the EPA Quality Assurance Manager, has approved the quality assurance document. 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>.

## **16. ULO Stretch Goal**

Subrecipients of EPA assistance agreements that include subawards in the approved work plan 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 to subaward recipients.

EPA encourages the reduction of these unliquidated obligations (ULOs) by applying the following programmatic term and condition to these assistance agreements with subaward projects:

The FY2016 Strategic Initiative Lead awards, the FY2016 Tribal Lead Organization award, the FY2016 Management Conference Support For Implementation Strategies award, and may apply to subsequent awards not yet identified.

Assistance agreement recipients and subrecipients are to apply these “stretch” goals throughout the life of the assistance agreement and to confer with your DOH Grant Manager whenever instances arise that make attainment of these stretch goals unlikely.

Stretch Goal: A stretch goal for utilization of funds for each new strategic initiative lead grant with subawards is established. All funds should be spent by 21/2 years in order for incremental funding to be considered at levels otherwise available for the fourth year of the grant.

Funds Awarded in FY2017 (October 1, 2016-September 30, 2017) Should all Be Drawn Down by March 2020

#### **17. Animal Subjects**

The subrecipient agrees to comply with the Animal Welfare Act of 1966 (P.L. 89-544), as amended, 7 USC 2131-2156. The subrecipient also agrees to abide by the “U.S. Government Principles for the Utilization and Care of Vertebrate Animals used in Testing, Research, and Training.” (Federal Register 50(97): 20864-20865. May 20,1985).

The nine principles can be viewed at:

<https://www.nap.edu/search/?rpp=20&ft=1&term=nine+principles+for+the+utilization+and+care+of+vertebrate+animals+used+in+testing>

For additional information about the Principles, the subrecipient should consult the Guide for Care and Use of Laboratory Animals, prepared by the Institute of Laboratory Animal Resources, National Research Council and can be accessed at: <http://www.nap.edu/readingroom/books/labrats/>.

#### **18. Copyrighted Material and Data**

In accordance with 2 CFR 200.315, EPA has the right to reproduce, publish, use and authorize others to reproduce, publish and use copyrighted works or other data developed under this assistance agreement for Federal purposes.

Examples of a Federal purpose include but are not limited to: (1) Use by EPA and other Federal employees for official Government purposes; (2) Use by Federal contractors performing specific tasks for the Government; (3) Publication in EPA documents provided the document does not disclose trade secrets (e.g. software codes) and the work is properly attributed to the subrecipient through citation or otherwise; (4) Reproduction of documents for inclusion in Federal depositories; (5) Use by State, tribal and local governments that carry out delegated Federal environmental programs as “co-regulators” or act as official partners with EPA to carry out a national environmental program within their jurisdiction and; (6) Limited use by other grantees to carry out Federal grants provided the use is consistent with the terms of EPA’s authorization to the other grantee to use the copyrighted works or other data. Under Item 6, the grantee acknowledges that EPA may authorize another grantee(s) to use the copyrighted works or other data developed under this grant as a result of: the selection of another grantee by EPA to perform a project that will involve the use of the copyrighted works or other data or; termination or expiration of this agreement.

In addition, EPA may authorize another grantee to use copyrighted works or other data developed with Agency funds provided under this grant to perform another grant when such use promotes efficient and effective use of Federal grant funds.

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

Julianne Ruffner, BEACH Program Manager, Office of Shellfish and Water Protection; PO Box 47824; Olympia WA 98504-7824; 360.407.6154; FAX 360.236.2257; [jruf461@ecy.wa.gov](mailto:jruf461@ecy.wa.gov).

#### **DOH Fiscal Contact (if different from Program Contact)**

Nichole Simmons, Office of Environmental Health and Safety; PO Box 47824; Olympia, WA 98504-7824; 360.236.3208; FAX 360.236.2257; [nichole.simmons@doh.wa.gov](mailto:nichole.simmons@doh.wa.gov)

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

**DOH Program Name or Title:** Office of Drinking Water Group A Program -  
Effective January 1, 2018

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

**Contract Number:** CLH18248

**SOW Type:** Revision      **Revision # (for this SOW)** 5

**Period of Performance:** January 1, 2018 through December 31, 2020

<b>Funding Source</b> <input checked="" type="checkbox"/> Federal Contractor <input type="checkbox"/> State <input type="checkbox"/> Other	<b>Federal Compliance (check if applicable)</b> <input type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development	<b>Type of Payment</b> <input type="checkbox"/> Reimbursement <input checked="" type="checkbox"/> Fixed Price
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**Statement of Work Purpose:** The purpose of this statement of work is to provide funding to the LHJ for conducting sanitary surveys and providing technical assistance to small community and non-community Group A water systems.

**Revision Purpose:** The purpose of this revision is to remove language in the Task/Activity/Description and the Deliverables/Outcomes sections for Task 1.

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			
Yr 20 SRF - Local Asst (15%) (FS) SS	N/A	346.26.64	24139220	01/01/18	12/31/18	0	0	0
Yr 20 SRF - Local Asst (15%) (FS) TA	N/A	346.26.66	24139220	01/01/18	12/31/18	0	0	0
Yr 20 SRF - Prog Mgmt (10%) (FS) TA	N/A	346.26.66	24137220	01/01/18	12/31/18	1,268	0	1,268
Yr 21 SRF - Local Asst (15%) (FS) SS	N/A	346.26.64	24139221	01/01/18	06/30/19	14,250	0	14,250
Yr 21 SRF - Local Asst (15%) (FS) TA	N/A	346.26.66	24139221	01/01/18	06/30/19	1,900	0	1,900
Yr 22 SRF - Local Asst (15%) (FO-SW) SS	N/A	346.26.64	24239222	01/01/19	12/31/20	21,250	0	21,250
Yr 22 SRF - Local Asst (15%) (FO-SW) TA	N/A	346.26.66	24239222	01/01/19	12/31/20	4,249	0	4,249
<b>TOTALS</b>						<b>42,917</b>	<b>0</b>	<b>42,917</b>

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Trained LHJ staff will conduct sanitary surveys of small community and non-community Group A water systems identified by the DOH Office of Drinking Water (ODW) Regional Office.  See Special Instructions for task activity.		Provide Final* Sanitary Survey Reports to ODW Regional Office. Complete Sanitary Survey Reports shall include: 1. Cover letter identifying significant deficiencies, significant findings, observations, recommendations, and	Final Sanitary Survey Reports must be received by the ODW Regional Office within <b>30 calendar days</b> of conducting the sanitary survey.	Upon ODW acceptance of the Final Sanitary Survey Report, the LHJ shall be paid <b>\$250</b> for each sanitary survey of a non-community system with three or fewer connections.  Upon ODW acceptance of the Final Sanitary Survey Report, the LHJ shall be paid <b>\$500</b> for each sanitary survey of a non-community system with four

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<i>DOH will provide a tablet and GPS unit for the LHJ to gather source data during a routine sanitary survey. DOH expects the LHJ to commit to using the tablet and GPS for a five-year period.</i>		referrals for further ODW follow-up. 2. Completed Small Water System checklist. 3. Updated Water Facilities Inventory (WFI). 4. Photos of water system with text identifying features 5. Any other supporting documents.  *Final Reports reviewed and accepted by the ODW Regional Office.  <i>The LHJ surveyor will record at least two (2) GPS data points, for each source, into the preloaded Excel template on the tablet and submit that data file with the associated sanitary survey.</i>		or more connections and each community system.  Payment is inclusive of all associated costs such as travel, lodging, per diem.  Payment is authorized upon receipt and acceptance of the Final Sanitary Survey Report within the 30 day deadline.  Late or incomplete reports may not be accepted for payment.
2	Trained LHJ staff will conduct Special Purpose Investigations (SPI) of small community and non-community Group A water systems identified by the ODW Regional Office.  See Special Instructions for task activity.		Provide completed SPI Report and any supporting documents and photos to ODW Regional Office.	Completed SPI Reports must be received by the ODW Regional Office within <b>2 working days</b> of the service request.	Upon acceptance of the completed SPI Report, the LHJ shall be paid <b>\$800</b> for each SPI.  Payment is inclusive of all associated costs such as travel, lodging, per diem.  Payment is authorized upon receipt and acceptance of completed SPI Report within the 2 working day deadline.  Late or incomplete reports may not be accepted for payment.



Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
3	<p>Trained LHJ staff will provide direct technical assistance (TA) to small community and non-community Group A water systems identified by the ODW Regional Office.</p> <p>See Special Instructions for task activity.</p>		Provide completed TA Report and any supporting documents and photos to ODW Regional Office.	Completed TA Report must be received by the ODW Regional Office within <b>30 calendar days</b> of providing technical assistance.	<p>Upon acceptance of the completed TA Report, the LHJ shall be paid for each technical assistance activity as follows:</p> <ul style="list-style-type: none"> <li>Up to 3 hours of work: <b>\$250</b></li> <li>3-6 hours of work: <b>\$500</b></li> <li>More than 6 hours of work: <b>\$750</b></li> </ul> <p>Payment is inclusive of all associated costs such as consulting fee, travel, lodging, per diem.</p> <p>Payment is authorized upon receipt and acceptance of completed TA Report within the 30-day deadline.</p> <p>Late or incomplete reports may not be accepted for payment.</p>
4	<p>LHJ staff performing the activities under tasks 1, 2 and 3 must have completed the mandatory Sanitary Survey Training.</p> <p>See Special Instructions for task activity.</p>		Prior to attending the training, submit an "Authorization for Travel (Non-Employee)" DOH Form 710-013 to the ODW Program Contact below for approval (to ensure that enough funds are available).	Annually	<p>LHJ shall be paid mileage, per diem, lodging, and registration costs as approved on the pre-authorization form in accordance with the current rates listed on the OFM Website <a href="http://www.ofm.wa.gov/resources/travel.asp">http://www.ofm.wa.gov/resources/travel.asp</a></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>

**Program Specific Requirements/Narrative**

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

Chapter 246-290 WAC is the set of rules that regulate Group A water systems. By this statement of work, ODW contracts with the LHJ to conduct sanitary surveys (and SPIs, and provide technical assistance) for small community and non-community water systems with groundwater sources. ODW retains responsibility for conducting sanitary surveys (and SPIs, and provide technical assistance) for small community and non-community water systems with surface water sources, large water systems, and systems with complex treatment.

LHJ staff assigned to perform activities under tasks 1, 2, and 3 must be trained and approved by ODW prior to performing work. See special instructions under Task 4, below.



### Special Billing Requirements

The LHJ shall submit quarterly invoices within 30 days following the end of the quarter in which work was completed, noting on the invoice the quarter and year being billed for. Payment cannot exceed a maximum accumulative fee of **\$35,500** for **Task 1**, and **\$7,417** for **Task 2, Task 3 and Task 4 combined** during the contracting period, to be paid at the rates specified in the Payment Method/Amount section above.

When invoicing for **Task 1**, submit the list of WS Name, ID #, Amount Billed, Survey Date and Letter Date that you are requesting payment.

When invoicing for **Task 2-3**, submit the list of WS Name, ID #, TA Date and description of TA work performed, and Amount Billed.

When invoicing for **Task 4**, submit receipts and the signed pre-authorization form for non-employee travel to the ODW Program Contact below and a signed A19-1A Invoice Voucher to the DOH Grants Management, billing to BARS Revenue Code 346.26.66 under Technical Assistance (TA).

### Special Instructions

#### Task 1

Trained LHJ staff will evaluate the water system for physical and operational deficiencies and prepare a Final Sanitary Survey Report which has been accepted by ODW. Detailed guidance is provided in the *Field Guide for Sanitary Surveys, Special Purpose Investigations and Technical Assistance* (Field Guide). The sanitary survey will include an evaluation of the following eight elements: source; treatment; distribution system; finished water storage; pumps, pump facilities and controls; monitoring, reporting and data verification; system management and operation; and certified operator compliance. If a system is more complex than anticipated or other significant issues arise, the LHJ may request ODW assistance.

- No more than **3** surveys of non-community systems with three or fewer connections to be completed between January 1, 2018 and December 31, 2018.
- No more than **27** surveys of non-community systems with four or more connections and all community systems to be completed between January 1, 2018 and December 31, 2018.
- No more than **1** surveys of non-community systems with three or fewer connections to be completed between January 1, 2019 and December 31, 2019.
- No more than **25** surveys of non-community systems with four or more connections and all community systems to be completed between January 1, 2019 and December 31, 2019.
- No more than **18** surveys of non-community systems with three or fewer connections to be completed between January 1, 2020 and December 31, 2020.
- No more than **8** surveys of non-community systems with four or more connections and all community systems to be completed between January 1, 2020 and December 31, 2020.

The process for assignment of surveys to the LHJ, notification of the water system, and ODW follow-up with unresponsive water systems; and other roles and responsibilities of the LHJ are described in the Field Guide.

#### Task 2

Trained LHJ staff will perform Special Purpose Investigations (SPIs) as assigned by ODW. SPIs are inspections to determine the cause of positive coliform samples or the cause of other emergency conditions. SPIs may also include sanitary surveys of newly discovered Group A water systems. Additional detail about conducting SPIs is described in the Field Guide. The ODW Regional Office must authorize in advance any SPI conducted by LHJ staff.

#### Task 3

Trained LHJ staff will conduct Technical assistance as assigned by ODW. Technical Assistance includes assisting water system personnel in completing work or verifying work has been addressed as required, requested, or advised by the ODW to meet applicable drinking water regulations. Examples of technical assistance activities are described in the Field Guide. The ODW Regional Office must authorize in advance any technical assistance provided by the LHJ to a water system.

#### Task 4

LHJ staff assigned to perform activities under tasks 1, 2, and 3 must be trained and approved by ODW prior to performing work. LHJ staff performing the activities under tasks 1, 2 and 3 must have completed, with a passing score, the ODW Online Sanitary Survey Training and the ODW Sanitary Survey Field Training. LHJ staff performing activities under tasks 1, 2, and 3 must attend the Annual ODW Sanitary Survey Workshop, and are expected to attend the Regional ODW LHJ Drinking Water Meetings.

If required trainings, workshops or meetings are not available, not scheduled, or if the LHJ staff person is unable to attend these activities prior to conducting assigned tasks, the LHJ staff person may, with ODW approval, substitute other training activities to be determined by ODW. Such substitute activities may include one-on-one training with ODW staff, co-surveys with ODW staff, or other activities as arranged and pre-approved by ODW. LHJ staff may not perform the activities under tasks 1, 2, and 3 without completing the training that has been arranged and approved by ODW.

**Program Manual, Handbook, Policy References**

<http://www.doh.wa.gov/Portals/1/Documents/Pubs/331-486.pdf>

**DOH Program Contact**

Denise Miles  
DOH Office of Drinking Water  
243 Israel Rd SE  
Tumwater, WA 98501  
[Denise.Miles@doh.wa.gov](mailto:Denise.Miles@doh.wa.gov)  
(360) 236-3028

**DOH Fiscal Contact**

Karena McGovern  
DOH Office of Drinking Water  
243 Israel Rd SE  
Tumwater, WA 98501  
[Karena.McGovern@doh.wa.gov](mailto:Karena.McGovern@doh.wa.gov)  
(360) 236-3094

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

**DOH Program Name or Title:** Office of Emergency Preparedness & Response -  
Effective July 1, 2019

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

**Contract Number:** CLH18248

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

**Period of Performance:** July 1, 2019 through June 30, 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:** The purpose of this statement of work is to establish the funding and tasks for the Public Health Emergency Preparedness and Response program for the 2019 grant period.

**Revision Purpose:** The purpose of this revision is to add tasks 25 and 26.

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			
FFY19 PHEP BP1 LHJ FUNDING	93.069	333.93.06	31102190	07/01/19	06/30/20	295,345	0	295,345
<b>TOTALS</b>						<b>295,345</b>	<b>0</b>	<b>295,345</b>

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Attend emergency preparedness events, (e.g. trainings, meetings, conference calls, and conferences) to advance LHJ regional or statewide preparedness or complete the deliverables in this statement of work.		Submit summary on the mid-year and end of year progress report.	December 31, 2019 and June 30, 2020	Reimbursement for actual costs not to exceed total funding consideration amount
2	Complete reporting templates as requested by DOH to comply with program and federal grant requirements including gap analysis, mid-year report and end-of-year report.		Submit completed templates to DOH.	Upon request	
3	Complete all performance measure reporting requirements as requested by DOH.		Submit completed performance measure data.	Upon request	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
4	<b>Training:</b> <b>4.1)</b> Provide training for appropriate staff who serve in the Emergency Operations Center (EOC) and the Emergency Support Function #8: Public Health and Medical Services (ESF#8) role on the Incident Command System, ESF#8 response plans and policies.  <b>4.2)</b> Train appropriate public health emergency response staff on Web EOC or applicable information management system utilized by the local health department		Submit mid-year and end-of-year progress reports.  Provide sign in sheets of trainings conducted, with attendee signatures and contact information. If DOH, or a DOH Contractor, is providing the training, LHJ does not need to submit sign in sheets.	December 31, 2019 and June 30, 2020  Upon completion of training, but no later than June 30, 2020	
5	<b>Washington Secure Electronic Communication, Urgent Response and Exchange System (WASECURES):</b>  <b>5.1)</b> Maintain WASECURES program as the primary emergency notification system within the LHJ for receiving alerts from DOH, and include all critical LHJ positions as registered users.  <b>5.2)</b> Participate in DOH-led WASECURES notification drills  <b>5.3)</b> Conduct a notification drill using LHJ's preferred staff notification system.  Notes: Registered users must log in quarterly at a minimum. DOH will provide on-site technical assistance to LHJs on utilizing WASECURES. LHJs may choose to utilize other notification systems <u>in addition</u> to WASECURES to alert staff during incidents.		Submit mid-year and end of year progress reports.  A list of registered users with their title and role in the emergency response plan.  Submit results of notification drills conducted or participated in.	December 31, 2019 and June 30, 2020  December 31, 2019  Within one week of the drill, but no later than June 30, 2020	
6	<b>Communications:</b>  <b>6.1)</b> Participate in at least one risk communications webinar hosted by DOH. Webinars will be offered twice; one in the first half of the budget period and one in the second half of the budget period.		Submit mid-year and end of year progress reports.	December 31, 2019 and June 30, 2020	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<p><b>6.2)</b> Participate in DOH Public Information Officer Workgroup.</p> <p><b>6.3)</b> Participate in at least one risk communications drill conducted by DOH. Drill will occur via webinar, conference call, and email. Drill will test LHJ's ability to develop and disseminate key messages via social media, email to community partners, phone trees, newsletters, and other means preferred by the LHJ.</p> <p><b>6.4)</b> Conduct a hot wash evaluating LHJ participation in the drill.</p> <p><b>6.5)</b> Participation in a real-world incident will satisfy the need to participate in a communications drill.</p>		<p>Submit messaging used to inform the public during drills, including a summary of how communication tools were used.</p> <p>Submit documentation of items identified in hot wash in mid-year and end of year reports.</p> <p>Submit documentation of participation in incident including communication methods and tools used. Submit AAR.</p>	<p>Within 90 days of drill, but no later than June 30, 2020</p> <p>December 31, 2019 and June 30, 2020</p> <p>Within 90 days of the end of the incident, but no later than June 30, 2020</p>	
7	<p><b>Non-CRI LHJs:</b> Update plans to request, receive, and dispense medical countermeasures. Plans should include the addresses of all local public Points of Dispensing (PODs) (not including pharmacies or healthcare facilities), sources of public POD staffing, local receiving and pickup sites (Hubs) identified by the LHJ, and whether the LHJ intends to pick countermeasures from DOH.</p> <p><b>Note:</b> LHJs are not required to maintain a HUB; LHJs may partner with other organizations to centralize distribution.</p>		<p>Submit mid-year and end of year progress reports.</p> <p>Submit updated plan to request, receive and dispense medical countermeasures.</p>	<p>December 31, 2019 and June 30, 2020</p> <p>June 30, 2020</p>	
8	<p>Provide immediate notification to the DOH Duty Officer at 360-888-0838 or <a href="mailto:hanalert@doh.wa.gov">hanalert@doh.wa.gov</a> for all response incidents involving utilization of emergency response plans and structures.</p>		<p>Submit mid-year and end of year progress reports including documentation that notification to DOH was provided; or statement that no incident response occurred.</p> <p>Send notification to DOH Duty Officer.</p>	<p>December 31, 2019 and June 30, 2020</p> <p>As soon as possible (performance measure target is within 60 minutes)</p>	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
9	Produce and provide situation reports documenting LHJ activity to DOH during all incidents involving an emergency response or activation by the LHJ. Situation reports may be developed by the LHJ, or may be jurisdictional situation reports that include input from the LHJ.		Submit situation reports to DOH Duty Officer by email to <a href="mailto:HANALERT@doh.wa.gov">HANALERT@doh.wa.gov</a> .  Submit mid-year and end of year progress reports to include situation reports demonstrating DOH was notified of incident response, or statement that no incident response occurred.	Upon completion  December 31, 2019 and June 30, 2020	
10	Provide Essential Elements of Information (EEIs) during incident response upon request by DOH.  <b>Note:</b> DOH will convey requests for specific data elements (EEIs) to the LHJ during an incident.		Provide essential elements of information upon request.	Upon request	
11	Regional Health Care Coalition (HCC), participate in: <ul style="list-style-type: none"> <li>- Regional HCC district meetings as requested by HCC Lead and deemed appropriate by LHJ.</li> <li>- Development of Disaster Clinical Advisory Committee (DCAC) meetings as appropriate. May include identifying local clinical participants, attending meetings via webinar and reviewing planning efforts.</li> <li>- At least one HCC drill and/or exercise to include, but not limited to: redundant communications, WATrac, Coalition Surge Test (CST), or other drills and exercises to support planning and response efforts inclusive of public health and/or Emergency Support Function 8: Public Health and Medical Services (ESF8).</li> <li>- Discussions pertaining to ESF8 and HCC roles and responsibilities, as requested by HCC Lead and deemed appropriate by LHJ.</li> <li>- Reviewing HCC plans for alignment with local ESF8 plans.</li> <li>- Coordination with HCC during responses involving healthcare organizations within your jurisdiction. If no response occurred,</li> </ul>		Submit mid-year and end of year progress reports documenting activities.	December 31, 2019 and June 30, 2020	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	document that in mid-year and end of year progress reports.				
12	<p>Participate in one or more exercises or real world incidents testing each of the following:</p> <ul style="list-style-type: none"> <li>The process for requesting and receiving resource support</li> <li>The process for gaining and maintaining situational awareness of, at a minimum: <ul style="list-style-type: none"> <li>The functionality of critical public health operations</li> <li>The functionality of critical healthcare facilities and the services they provide</li> <li>The functionality of critical infrastructure serving public health and healthcare facilities (roads, water, sewer, power, communications)</li> <li>Number of disease cases</li> <li>Number of fatalities attributed to an incident</li> <li>Development of an ESF8 situation report, or compilation of situational awareness information to be included in a County situation report</li> <li>Emergency Operations Center (EOC) or Incident Command System (ICS) activation</li> </ul> </li> </ul>		<p>Submit mid-year and end of year progress reports.</p> <p>Submit After Action Reviews (AARs) and Corrective Action Plan (CAP) for each drill/exercise/incident conducted or participated in.</p>	<p>December 31, 2019 and June 30, 2020</p> <p>Within 60 days of completion of exercise/incident, but no later than June 30, 2020</p>	
13	<p><b>Vulnerable populations:</b></p> <p><b>13.1)</b> Update and maintain the All Hazards Plan to address vulnerable populations.</p> <p><b>13.2)</b> Provide a procedure, checklist, job action sheet, or other document(s) that describe how the needs of vulnerable populations (especially those with access and functional needs) will be addressed during a response. The document(s) should also describe how the LHJ will engage directly with the affected populations during a response.</p> <p><b>13.3)</b> Document the primary groups within the LHJ boundaries identified in Centers for Disease Control and Prevention (CDC)'s Social</p>		<p>Submit mid-year and end of year progress reports.</p> <p>Submit updated sections of the All Hazards Plan.</p> <p>Submit procedure checklist, job action sheet or other documentation.</p> <p>Documentation of primary vulnerable population groups.</p>	<p>December 31, 2019 and June 30, 2020</p> <p>June 30, 2020</p> <p>June 30, 2020</p> <p>June 30, 2020</p>	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Vulnerability Index to inform public health response planning.				
14	Update and maintain logistical support plans for individuals placed into isolation or quarantine (this need not include identification of quarantine facilities). Plans must meet requirements defined in Washington Administrative Code (WAC) 246.100.045.		Submit mid-year and end of year progress reports.  Submit logistical isolation and quarantine plan.	December 31, 2019 and June 30, 2020  June 30, 2020	
15	Develop and maintain agreements with facilities within the region that could serve as an Alternate Care Facility (ACF) or a Federal Medical Station (FMS).		Submit mid-year and end of year progress reports.  List of facilities and copies of current agreements.	December 31, 2019 and June 30, 2020  June 30, 2020	
16	Develop and maintain specific vendor lists for logistical support services for Alternate Care Facilities (ACFs) or Federal Medical Station (FMS) operations including at a minimum: <ul style="list-style-type: none"> <li>• Biohazard/Waste Management</li> <li>• Feeding</li> <li>• Laundry</li> <li>• Communications</li> <li>• Sanitation</li> </ul>		Submit mid-year and end of year progress reports  Vendor lists for the support services listed.	December 31, 2019 and June 30, 2020  December 31, 2019	
17	Update and maintain public health preparedness training and exercise plan.		Submit updated training and exercise plan.	December 31, 2019	
18	Complete an evaluation of your response capabilities based on a standard evaluation tool provided by DOH.		Document evaluation participation in the end of year progress report.	June 30, 2020	
19	Produce a budget plan including a detailed 12-month spending plan demonstrating how the LHJ plans to spend the funds during this period of performance, using a budget template provided by DOH.  <b>Note:</b> 20% of LHJ's annual allocation will be withheld until this requirement is met. Failure to meet this requirement may result in DOH redirecting funds from the LHJ.		Submit budget plan using DOH-provided template.	August 1, 2019	



Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
<b>Additional activities as requested by the LHJ:</b>					
<b>20</b>	Provide consultation and grant support to Clallam and Jefferson Local Emergency Response Coordinators (LERCs) as requested. Provide consultation to DOH on behalf of Region 2 as requested.		Submit mid-year and end-of-year progress reports	December 31, 2019 and June 30, 2020	
<b>21</b>	Maintain county and regional public health emergency answering service and duty officer program.  Costs will be pro-rated and shared equally with Kitsap Public Health District Emergency Preparedness, Community Health and Environmental Health programs.		Submit mid-year and end-of-year progress reports	December 31, 2019 and June 30, 2020	
<b>22</b>	Update County Pandemic Influenza Plan based on Center for Disease Control & Prevention guidance.		Submit mid-year and end of year progress reports  Submit County Pandemic Influenza Plan.	December 31, 2019 and June 30, 2020  June 30, 2020	
<b>23</b>	Update County Emergency Support Function # 8 resource documents.		Submit mid-year and end of year progress reports  Submit updated ESF 8 resource documents.	December 31, 2019 and June 30, 2020  June 30, 2020	
<b>24</b>	Review and update, as needed, LHJ's response plans, including: <ul style="list-style-type: none"> <li>All Hazards Emergency Response Plan</li> <li>LHJ Continuity of Operations Plan</li> <li>LHJ Risk Communications Plan</li> </ul>		Submit mid-year and end of year progress reports  Submit updated plans.	December 31, 2019 and June 30, 2020  June 30, 2020	
<b>25</b>	<i>Maintain local system to provide information and warnings to community and response partners.</i>		<i>Describe activities end of year progress report.</i>	<i>June 30, 2020</i>	
<b>26</b>	<i>Compile regional data on Notifiable conditions and issues of public health concern. These data are posted and updated regularly on the Kitsap, Clallam, and Jefferson local health jurisdiction websites.</i>		<i>Describe activities in end of year progress report.</i>  <i>Provide screenshots of regional data posted on Kitsap, Clallam, and Jefferson websites.</i>	<i>June 30, 2020</i>  <i>June 30, 2020</i>	

**\*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>

**Program Specific Requirements/Narrative**

Any subcontract/s must be approved by DOH prior to executing the contract/s.

Deliverables are to be submitted to the ConCon deliverables mailbox at [concondeliverables@doh.wa.gov](mailto:concondeliverables@doh.wa.gov)

**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**

Please reference the Code of Federal Regulations:

[https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=58ffddb5363a27f26e9d12ccec462549&ty=HTML&h=L&mc=true&r=PART&n=pt2.1.200#se2.1.200\\_1439](https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=58ffddb5363a27f26e9d12ccec462549&ty=HTML&h=L&mc=true&r=PART&n=pt2.1.200#se2.1.200_1439)

**DOH Program Contact**

Tory Henderson, Contracts & Finance Specialist

Department of Health

P O Box 47960, Olympia, WA 98504-7960

360-236-4596 / [tory.henderson@doh.wa.gov](mailto:tory.henderson@doh.wa.gov)

Kitsap Public Health District

**EXHIBIT B-13**  
**ALLOCATIONS**  
Contract Term: 2018-2020

Contract Number: CLH18248  
Date: January 15, 2020

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	20157001823357	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	20157001823357	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		
<b>PS SSI 1-5 BEACH Task 4</b>	<b>01J18001</b>	<b>Amd 13</b>	<b>66.123</b>	<b>333.66.12</b>	03/01/20	10/31/20	07/01/17	06/30/23	<b>\$5,800</b>	<b>\$5,800</b>	<b>\$17,400</b>
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	
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		

Kitsap Public Health District

**EXHIBIT B-13  
ALLOCATIONS**  
Contract Term: 2018-2020

Contract Number: CLH18248  
Date: January 15, 2020

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					Start Date	End Date	Start Date	End Date			
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		
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		

Kitsap Public Health District

**EXHIBIT B-13**  
**ALLOCATIONS**  
**Contract Term: 2018-2020**

**Contract Number:** CLH18248  
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					Start Date	End Date	Start Date	End Date			
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		
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
FFY19 Ryan White Supp Direct Svcs	5X07HA000832800	Amd 12	93.917	333.93.91	09/30/19	06/30/20	09/30/19	09/29/20	\$109,140	\$109,140	\$109,140
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 12	N/A	334.04.91	07/01/19	06/30/20	07/01/19	06/30/21	(\$3,425)	\$0	\$0
Healthy Communities		Amd 10	N/A	334.04.91	07/01/19	06/30/20	07/01/19	06/30/21	\$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	

Kitsap Public Health District

**EXHIBIT B-13**  
**ALLOCATIONS**  
**Contract Term: 2018-2020**

**Contract Number:** CLH18248  
**Date:** January 15, 2020

**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			
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	06/30/17	\$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	
FPH Lead Case Mgmt-FPH		Amd 12	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/20	\$3,425	\$3,425	\$3,425
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	

Kitsap Public Health District

**EXHIBIT B-13**  
**ALLOCATIONS**  
**Contract Term: 2018-2020**

**Contract Number:** CLH18248  
**Date:** January 15, 2020

**Indirect Rate as of January 2018: 34.98% Admin & Fac.; 37.62% Community Hlth Pgms (inc. Admin) & 40.39% Environmental Hlth Pgms (inc. Admin)**  
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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			
FPH-Youth Tobacco Vapor Prevention		Amd 11	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/21	\$24,512	\$24,512	\$24,512
Youth Tobacco Vapor Products		Amd 11	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/21	(\$8,451)	\$38,403	\$121,091
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
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 12	N/A	334.04.98	04/01/20	06/30/20	04/01/20	03/31/21	(\$27,285)	\$88,861	\$804,903
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		
FFY19 RW Grant Year Local (Rebate)		Amd 12	N/A	334.04.98	07/01/19	03/31/20	04/01/19	03/31/20	(\$81,855)	\$266,582	
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		
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	



Kitsap Public Health District

**EXHIBIT B-13  
ALLOCATIONS**  
Contract Term: 2018-2020

Contract Number: CLH18248  
Date: January 15, 2020

Indirect Rate as of January 2018: 34.98% Admin & Fac.; 37.62% Community Hlth Pgms (inc. Admin) & 40.39% Environmental Hlth Pgms (inc. Admin)  
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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 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 12	N/A	346.26.64	01/01/19	12/31/20	07/01/19	06/30/21	\$8,500	\$21,250	\$21,250
YR 22 SRF - Local Asst (15%) (FO-SW) SS		Amd 10, 12	N/A	346.26.64	01/01/19	12/31/20	07/01/19	06/30/21	\$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		
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 12	N/A	346.26.66	01/01/19	12/31/20	07/01/19	06/30/21	\$3,000	\$4,249	\$4,249
YR 22 SRF - Local Asst (15%) (FO-SW) TA		Amd 10, 12	N/A	346.26.66	01/01/19	12/31/20	07/01/19	06/30/21	\$1,249		
<b>TOTAL</b>									<b>\$5,722,477</b>	<b>\$5,722,477</b>	
<b>Total consideration:</b>	<b>\$5,716,677</b>									<b>GRAND TOTAL</b>	<b>\$5,722,477</b>
	<b>\$5,800</b>										
<b>GRAND TOTAL</b>	<b>\$5,722,477</b>									<b>Total Fed</b>	<b>\$2,494,105</b>
										<b>Total State</b>	<b>\$3,228,372</b>

\*Catalog of Federal Domestic Assistance

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



## Exhibit C-13 Schedule of Federal Awards

AMENDMENT #13

Date: January 15, 2020

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	04/01/15	\$5,859,307	10/01/19	03/31/20	\$25,000	10.331	Food Insecurity Nutrition Incentive Grants	USDA-National Institute of Food and Agriculture	20157001823357	FOOD NUTRITION INCENTIVE GRANT
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	09/30/19	\$5,300,000	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	207WAWA5Q3903	2019 SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM EDUCATION (SNAP-ED)
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	10/31/20	\$17,400	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 Notification 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 Notification 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
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

**Exhibit C-13 Schedule of Federal Awards****AMENDMENT #13****Date: January 15, 2020**

**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
<b>FFY17 EPR PHEP BP1 LHJ FUNDING</b>	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
<b>FFY19 OVERDOSE DATA TO ACTION PREV</b>	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 HEALTH OVERDOSE DATA TO ACTION
<b>FFY20 VFC OPS</b>	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
<b>FFY20 VFC IQIP</b>	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
<b>FFY20 PPHF OPS</b>	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
<b>FFY17 VFC OPS</b>	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
<b>FFY17 PPHF OPS</b>	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
<b>FFY17 INCREASING IMMUNIZATION RATES</b>	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
<b>FFY17 AFIX</b>	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
<b>FFY17 317 OPS</b>	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
<b>FFY19 TOBACCO PREVENTION</b>	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
<b>FFY18 TOBACCO PREVENTION</b>	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
<b>FFY19 PHYS ACTVITY &amp; NUTRITION PROG</b>	333.93.43	07/24/19	\$1,846,000	09/30/19	09/29/20	\$60,000	93.439	State Physical Activity and Nutrition (SPAN)	Department of Health and Human Services (HHS) Centers for Disease Control and Prevention (CDC)	NU58DP006504	STATE PHYSICAL ACTIVITY AND NUTRITION-WASHINGTON (SPANWA)
<b>FFY18 PHYS ACTVITY &amp; NUTRITION PROG</b>	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)
<b>FFY17 TCPI PTN CONTRACTS</b>	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
<b>FFY18 PHBG TOBACCO PPHF</b>	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

# Exhibit C-13 Schedule of Federal Awards

AMENDMENT #13

Date: January 15, 2020

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
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 RYAN WHITE SUPP DIRECT SVCS	333.93.91	04/02/18	\$13,631,623	09/30/19	06/30/20	\$109,140	93.917	HIV Care Formula Grants	Department of Health and Human Services Health Resources and Services Administration	5X07HA000832800	RYAN WHITE CARE ACT TITLE II
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						\$2,494,105					

**AMENDMENT TO IMPLEMENTATION PARTNER SPECIFIC AGREEMENT**  
**Between**  
**OLYMPIC COMMUNITY OF HEALTH**  
**And**  
**KITSAP PUBLIC HEALTH DISTRICT**

This Amendment (“Amendment”) to the Implementation Partner Specific Agreement is entered into between the Olympic Community of Health (“OCH”) and Kitsap Public Health District (“Partner”).

**RECITALS**

**WHEREAS**, the Parties entered into the Contract effective January 1, 2017; and

**WHEREAS**, the Parties have agreed to update the contract language to clarify contract terms for 2020;

**NOW, THEREFORE, THE PARTIES AGREE AS FOLLOWS:**

**I. Amendment of Agreement Section 1. Change Plan.**

PARTNER agrees to complete the requirements under the Change Plan, attached herein as Attachment A. Voluntary outcomes are subject to amendment by the PARTNER year-to-year. The last opportunity for such amendment will be December of 2020. *(Note that the Change Plan is also referred to as the Project Plan in the Financial Executor Portal Standard Partnership Agreement, Attachment B).*

**II. Amendment of Agreement Section 3. Payment and Costs.**

- a. **Basis for Payment to Partner.** Compensation to the PARTNER for performance of this Agreement is from the State of Washington Health Care Authority’s (HCA) Delivery System Reform Incentive Payment (DSRIP) program, authorized by OCH. Payments of DSRIP funds are incentives based on performance, not payments or compensation for costs incurred. Payments are a portion of shared revenues earned by the region for the collective performance of the OCH. Regional funds earned are distributed to partners based on the Board approved funds flow model and 2020 Medicaid Transformation Payment Model, Attachment E. Factors to determine payment amounts include selected Change Plan activities, and completion of the following:
  - Qualitative reporting (Change Plan status updates, narrative questions, and Pay-for-Reporting metrics; MeHAF for Behavioral Health Change Plans)
  - Two site visits with OCH staff (at least one in-person)
  - Reporting on intermediary metrics
- b. **Payments Contingent on Partner Compliance.** Payment of DSRIP Funds to the PARTNER is contingent on PARTNER complying with the terms of this Agreement. PARTNER acknowledges in accordance with this section and this Agreement, that any such funds

received may not cover all the costs or expenses related to PARTNER's participation in the DSRIP Change Plan.

- c. **Payment Process.** OCH will approve payments to be released from the Financial Executor Portal (Portal). The PARTNER must set up and manage an account on the Portal and sign a Standard Partnership Agreement (Attachment B) as required by Public Consulting Group, the organization which administers the Portal, to receive payment. OCH agrees to approve up to two payments per project year, subject to the terms of this Agreement and the Change Plan, through the Financial Executor Portal to PARTNER. Full payments are contingent on all deliverables being met in accordance with the 2020 Medicaid Transformation Project Payment Model (Attachment E).

Failure to complete deliverables to the satisfaction of OCH may result in delayed, reduced or withheld payments.

OCH may, from time to time, authorize additional payments to partners be made outside of the biannual Portal disbursement process. Such payments may be made by check sent to the PARTNER.

- d. **Attestation of Organization Governance, Management and Financial Solvency.** Consistent with the required Change Plan Outcome, "Organization can exercise effective leadership, management, transparency and accountability of MTP activities throughout the duration of its Change Plan." by signing this Amendment, the PARTNER attests that the organization is financially solvent, and has and will maintain sufficient governance structures, financial controls, and resources necessary to undertake the work required of this Agreement and the Change Plan.
- e. **Attestation to Focus on Medicaid Beneficiaries.** Consistent with the intent of the Medicaid Transformation Project, by signing this Amendment, the PARTNER attests that the organization will focus Change Plan-related activities on the Medicaid population.

### **III. Amendment of Agreement Section 12. Partner and OCH Contract Managers.**

PARTNER's Contract Manager will have primary responsibility and final authority for the services provided under this Contract and be the principal point of contact for all business matters, performance matters, and administrative activities. OCH's Contract Manager is responsible for monitoring the PARTNER'S performance and will be the contact person for all communications regarding Contract performance and deliverables.

To PARTNER at:

Organization: Kitsap Public Health District  
Attn: Yolanda Fong  
Street Address: 345 6<sup>th</sup> Street, Suite 300  
City, State Zip: Bremerton, WA 98337  
Email: yolanda.fong@kitsappublichealth.org

To OCH at:

Organization: Olympic Community of Health  
Attn: Miranda Burger

Street Address: PO Box 641  
City, State Zip: Port Townsend, WA 98368  
Email: miranda@olympicch.org

Both parties agree to notify the other party of changes to the person(s) named in this section by written notice (email acceptable) within 30 days of such change.

**IV. Amendment of Agreement Section 22. Notice.**

Any notice required or permitted under this Agreement shall be sufficient if given in writing and sent by email or registered mail or personal delivery or overnight courier service (i.e., FedEx, UPS, etc.)

To PARTNER at:  
Organization: Kitsap Public Health District  
Attn: Yolanda Fong  
Street Address: 345 6<sup>th</sup> Street, Suite 300  
City, State Zip: Bremerton, WA 98337  
Email: Yolanda.fong@kitsappublichealth.org

To OCH at:  
Organization: Olympic Community of Health  
Attn: Margaret Moore  
Street Address: PO Box 641  
City, State Zip: Port Townsend, WA 98368  
Email: margaret@olympicch.org

Both parties agree to notify the other party of changes to the person(s) named in this section within 30 days of such change.

**V. Amendment of Agreement Section 23. Incorporation of Documents and Order of Precedence.**

Each of the items or documents listed below is by this reference incorporated into this Contract. In the event of an inconsistency, the inconsistency will be resolved in the following order of precedence:

1. Financial Executor Portal Standard Partnership Agreement, Attachment B
2. This Agreement
3. 2020 Change Plan, Attachment A
4. 2020 Medicaid Transformation Project Payment Model, Attachment E
5. Additional Attachments: Payment Schedule, Attachment C; Deliverables Calendar, Attachment D

**VI. Effective Date.** This Amendment is effective as of January 1, 2020.

**IN WITNESS WHEREOF**, the Parties have subscribed their names hereto.

DATE: \_\_\_\_\_

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

DATE: \_\_\_\_\_

\_\_\_\_\_  
OCH Executive Director

[illegible]



4. Care Infrastructure					<p>I. Low-income families</p> <p>J. Children (0-18)</p> <p>K. High utilizers of the ED</p> <p>L. High utilizers of the criminal justice system</p> <p>M. High utilizers of the 9-1-1 system</p> <p>N. Individuals experiencing homelessness</p> <p>O. Individuals experiencing food insecurity</p> <p>P. Individuals experiencing unemployment</p> <p>Q. Individuals experiencing isolation</p> <p>R. Individuals experiencing barriers to transportation</p> <p>S. Individuals with a substance use disorder</p> <p>T. Other</p>	<p>x</p> <p>x</p> <p></p> <p></p> <p></p> <p>x</p> <p>x</p> <p>x</p> <p>x</p> <p>x</p> <p></p>
		1/1/2020	12/31/2020	<p>2. Utilize screening tools and protocols to identify client physical, behavioral, and/or oral health needs and inform appropriate referrals</p> <p>3. Review data by subpopulations to identify inequities by category such as race, gender, age, zip code, other(s)</p>		<p></p> <p></p> <p>x</p>
	D. Organization provides care coordination services, social services and consumer education services for referred clients	1/1/2020	12/31/2020	<p>1. Provide effective chronic care services such as Diabetes Prevention Program (DPP), Chronic Disease Self-Management (CDSM), Whole Health Action Management (WHAM), exercise programs, and/or other</p> <p>2. Clallam NCC: Community paramedics or EMTs perform home visits and/or alternative transports (e.g., other than the ED)</p> <p>3. Kitsap NCC: In-home asthma interventions for low-income families where at least one person is diagnosed with asthma</p> <p>4. Assist those with recurrent ED utilization to identify barriers to accessing primary care, identify solutions and resolve issues</p> <p>5. Partner with public health and clinical partners to develop social marketing campaigns to promote healthy pre-conception care</p> <p>6. Provide evidence-based prenatal or early childhood interventions to promote optimal health outcomes (Early Head Start, Head Start, Early Childhood Education and Assistance Program, Parents as Teachers, Parent Child Assistance Program, Nurse Family Partnership, Maternity Support Services)</p> <p>7. Provide information or education to clients about appropriate clinical care settings</p> <p>8. Ensure clients and their caregivers have access to instructions on how to get clinical advice after hours</p> <p>9. Educate clients/school/ children/ organizations/ community on healthy eating and active living</p> <p>10. Raise public awareness about obesity through programs such as 5-2-1-0</p> <p>11. Educate clients on safe medication return and disposal programs (also called "drug take back")</p> <p>12. Raise public awareness programs about opioid misuse and abuse prevention through data and programs such as It Starts with One</p> <p>13. Needle exchange program or syringe exchange program</p> <p>14. Educate clients on safe storage of opioids</p> <p>15. Offer chronic pain groups</p> <p>16. Other</p>	List Program(s):	<p></p> <p>x</p> <p></p> <p>x</p> <p></p> <p>x</p> <p></p> <p>x</p> <p></p> <p>x</p> <p></p>
	C. All staff understand the impact of trauma and health inequities on health	1/1/2019	12/31/2019	<p>1. Offer training in health equity</p> <p>2. Offer training in LGBTQ-inclusive care,</p> <p>3. Offer training in NEAR sciences, historical trauma, and trauma-informed care</p>		<p></p> <p></p> <p></p>
	F. Information is exchanged securely, appropriately, timely and efficiently	0	20	<p>1. Implement protocol to obtain shared</p> <p>2. Sign inter-organizational agreements for access to records of referred and/or shared clients</p>		<p>x</p> <p>x</p>

		1/1/2020	12/31/2020	3. Participate in a technology platform (such as Olympic Digital HIT Commons or PreManage) that allows necessary client information to be exchanged between the referee and referral organization	x
	G. Community-based services and supports are timely and accessible			1. Offer open-access/same-day/walk-in 2. Offer after-hours access 3. Expand services, hire new workforce or expand capital to meet client demand	
	H. Workforce is trained in best practices to provide appropriate services to client population of focus	1/1/2019	12/31/2019	1. Staff is provided with resources to refer 2. Staff is trained in teach-back and/or motivational interviewing 3. Staff is trained in de-escalation	
2. Sustainability	A. Transformation is sustained beyond the Medicaid Transformation Project	1/1/2020	12/31/2021	1. Implement value-based payment 2. Offer organization financial or in-kind match of DSRIP funding 3. Report on value-based metrics that will be in MCO contracts (not actionable until 2019, when providers will know which metrics will be in the contracts)  4. Support all-payer collaboration to foster system-wide transformation	x x  x
3. Administrative	A. Organization can exercise effective leadership, management, transparency and accountability of MTP activities throughout the duration of its	11/1/2018	12/31/2021	1. Establish and maintain an effective 2. Implement reporting policies and practices to ensure complete and timely reporting of change plan activities to OCH	x x

## Master Services Agreement

On January 9, 2017, the Centers for Medicare & Medicaid Services (CMS) approved Washington State's request for a section 1115(a) Medicaid demonstration entitled Medicaid Transformation Demonstration (hereinafter "Demonstration"). Part of this Demonstration is a Delivery System Reform Incentive Payment (DSRIP) program, through which the State will make performance-based funding available to regionally-based Accountable Communities of Health (ACH) and their partnering providers. Attachment C to the Special Terms and Conditions (STCs) of the Demonstration contains a DSRIP Planning Protocol.

In order to assure consistent management of an accounting for the distribution of DSRIP funds across ACHs, the Health Care Authority (HCA) has selected a Financial Executor who is responsible for administering the funding distribution plan for the DSRIP program.

This STANDARD PARTNERSHIP AGREEMENT (SPA) sets forth the basic agreement between an ACH and a partnering provider Participant. In addition, each ACH and Participant may enter into a PROJECT-SPECIFIC AGREEMENT (PSA) that sets forth each party's responsibilities with respect to a specific DSRIP project submitted for approval to the HCA as well the funding, project milestones, performance metrics, and payment schedules for that project.

### **Article I. Basic Roles and Responsibilities**

**Section 1.01 *Roles and Responsibilities of ACH.*** The ACH will have the following roles and responsibilities, in accordance with and subject to the Demonstration, this Agreement, the PSAs, and applicable law:

- (a) Establishing and maintaining a governance and organizational structure that complies with the terms of the Demonstration and the DSRIP Planning Protocol;
- (b) Developing and submitting a Project Plan for the approval of the Health Care Authority (HCA) that meets the requirements of the DSRIP Planning Protocol;
- (c) Preparing, filing and certifying progress milestones, performance metrics, and such other reports to HCA as are required under the Project Plan and the DSRIP Planning Protocol; and
- (d) Keeping partnering providers, including Participant, informed of all DSRIP related communications received by the ACH from the State and facilitating communication among the Partners regarding DSRIP matters.

**Section 1.02 *Roles and Responsibilities of Participant.*** Partnering providers, including Participant, will have the following roles and responsibilities, in accordance with and subject to the Demonstration, this Agreement, the PSAs, and applicable law:

- (a) Collaborating with the ACH and other partnering providers in good faith to implement DSRIP and the Project Plan;

- (b) Complying with Project Plan and PSA requirements, including but not limited to timely and accurate reporting in accordance with the performance measures, project milestones, and timelines specified in the Project Plan and the PSA; and
- (c) Providing such other information as reasonably requested by the ACH.

Section 1.03 *Roles and Responsibilities of the Financial Executor.* Although the Financial Executor is not a party to this SPA, the parties acknowledge that the Financial Executor has the following roles and responsibilities, in accordance with and subject to the terms and conditions of the Demonstration:

- (a) Provide accounting and banking management support for DSRIP incentive dollars;
- (b) Distribute earned funds in a timely manner to participating providers in accordance with the state-approved funding distribution plans;
- (c) Submit scheduled reports to HCA on the actual distribution of transformation project payments, fund balances and reconciliations; and
- (d) Develop and distribute budget forms to participating providers for receipt of incentive funds.

## Article II. **Distribution of DSRIP Funds: General Principles**

Section 2.01 *Basis for Payment to Participant.* Participant will receive payment of DSRIP Funds from the Financial Executor in accordance with the payment schedule set forth in the Project Plan and PSA, only if and to the extent that the ACH has achieved the project milestones and performance measures specified in the Project Plan. Any final payment decision is in the sole discretion of HCA.

Section 2.02 *Payments Contingent on Participant Performance.* Payment of DSRIP Funds to the Participant is contingent on Participant complying with the terms of this Agreement and the PSA, including timely submission of data to the ACH to meet the ACH's reporting obligations to HCA; (ii) Participant's performance on the project milestones and performance outcomes established in the Project Plan and PSA; and (iii) such other conditions and criteria as are set forth in the Project Plan and PSA. Participant acknowledges in accordance with this section and Section 2.01, that it may not receive DSRIP funds, and that any such funds received may not cover all the costs or expenses related to Participant's participation in a DSRIP Project Plan.

Section 2.03 *Advance Payments.* In the event that the Project Plan calls for advance payment of DSRIP Funds to Participant for specified purposes ("Specified Purpose Funds"), Participant shall use those Funds only for the purposes specified, and must return any funds to the Financial Executor or the ACH not so expended within 30 days of demand by the Financial Executor or the ACH.

## Article III. **Record Retention and Auditing**

**Section 3.01 *Retention of Records.*** Each party shall retain all records (“Records”) relating to its activities related to the DSRIP program for a period of not less than six years, or as otherwise required by applicable law and regulations.

**Section 3.02 *Sufficiency of Records.*** The Records shall be sufficient to support confirmation that all data submitted by Participant to the ACH and by the ACH to HCA for any and all reports required by the ACH, HCA or CMS is accurate and complete.

**Section 3.03 *Audit.*** All Records relating to the DSRIP program are subject at all reasonable times to inspection, review, or audit by HCA and other state and federal officials so authorized by law, rule, regulation, or agreement.

#### **Article IV.     **Data Sharing and Privacy****

**Section 4.01 *Business Associate Agreement.*** The parties agree that in order to implement a Project Plan, they may need to exchange protected health information (PHI). PHI will be shared only in accordance with all federal and state laws, rules, regulations and agency guidelines applicable to the privacy and security of health information, including without limitation, the Health Insurance Portability and Accountability Act of 1996 and its related regulations (“HIPAA”), as modified or amended from time to time.

**Section 4.02 *Sharing Confidential Information.*** The parties acknowledge that, in addition to sharing PHI in accordance with the terms of the Business Associate Agreement, they may need to share other Confidential Information. “Confidential Information” means information of a Party, regardless of the form or media in which it is disclosed, which is identified in writing or other manner as confidential, restricted, or proprietary. The parties shall share Confidential Information in accordance with this Article IV.

**Section 4.03 *Obligations of Confidentiality and Restrictions on Use.*** A Party receiving Confidential Information from the other Party (the “Receiving Party”) shall not: (a) use the Confidential Information of the Party making the disclosure (the “Disclosing Party”), except as necessary to perform its obligations or exercise its rights under this SPA or to carry out the Project Plan or DSRIP Requirements; or (b) disclose or otherwise allow access to the Confidential Information of the Disclosing Party to a third party, except as permitted in this Section. The Receiving Party shall protect the Confidential Information of the Disclosing Party with at least the same level of care as it protects its own Confidential Information of similar nature, but not less than a reasonable level of care.

**Section 4.04 *Disclosure of Confidential Information to Representatives.*** The Receiving Party may disclose the Disclosing Party’s Confidential Information to the Receiving Party’s officers, directors, employees, professional advisors, and other agents and representatives to the extent such disclosure is necessary for the performance of their obligations under this Agreement; provided, however, that the Receiving Party shall cause such Confidential Information to be held in confidence by any such recipient.

**Section 4.05 *Compelled Disclosure.*** If a Receiving Party is requested by a court or state or federal regulatory body to disclose Confidential Information in any legal or administrative proceeding or determines that a disclosure is affirmatively required by applicable laws, the

Receiving Party shall promptly notify the Disclosing Party of such request or determination so that the Disclosing Party may take, at its expense, such steps as are necessary to protect the Confidential Information. If the Receiving Party is thereafter required to disclose the Confidential Information to the court or regulatory body compelling such disclosure or to which such disclosure is required to be made, only the part of such Confidential Information as is required by applicable laws shall be disclosed.

**Section 4.06 *Exceptions.*** The obligations of confidentiality and restrictions on use as set forth in this Agreement shall not apply to any Confidential Information that: (a) is in the public domain or is otherwise publicly known, without any breach hereof; (b) was previously known prior to disclosure by the Disclosing Party hereunder to the Receiving Party free of any obligation to keep it confidential; (c) was rightfully received by the Receiving Party from a third party whose disclosure would not violate a confidentiality obligation owed by such third party to the Disclosing Party and which disclosure was not in breach of the Agreement; (d) was subsequently and independently developed by the Receiving Party without reference to such Confidential Information disclosed under the Agreement; or (e) was expressly approved for release by written authorization of the Disclosing Party.

**Section 4.07 *Obligations Upon Termination.*** Upon expiration or termination of this Agreement for any reason, each Party shall promptly return, or destroy in a secure manner, any Confidential Information of the other Party and shall retain no copies thereof, except as required by law or to verify or document performance under this Agreement for audit purposes and to enforce its rights and defend itself from any claims or causes of action related to this Agreement or the other Party. Each Party shall extend the protections of this Agreement to any Confidential Information retained pursuant to this section and limit further uses and disclosures to those purposes permitted by this section.

## **Article V.     **Dispute Resolution****

**Section 5.01 *Informal Dispute Resolution.*** The parties will use their best, good faith efforts to cooperatively resolve disputes and problems that arise in connection with the Project Plan, this SPA and any applicable PSA. The parties will attempt to resolve their dispute first through an informal dispute resolution process. One party will send a notice to the other party containing a detailed description of the issue under dispute, the good faith basis for the dispute, and a proposed resolution. Within fifteen (15) calendar days of receiving the notice, the disputing parties will meet at a mutually agreeable location or will hold a conference call to attempt to resolve the dispute. Both parties will continue without delay to carry out their respective responsibilities under these Agreements while attempting to resolve any dispute.

## **Article VI.     **Representations and Warranties****

**Section 6.01** Each party represents and warrants that it is not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded in any Washington State or Federal department or agency from participating in transactions (debarred). Participant must immediately notify ACH if, during the term of this SPA, Participant becomes debarred.

Section 6.02 Each party represents and warrants that it is in compliance with, and will at all times hereafter comply with, all local, state, and federal licensing, accreditation and registration requirements and standards necessary for the performance of the Project Plan.

Section 6.03 Each party represents and warrants that it has all requisite corporate power and authority to execute and deliver this Agreement and to consummate the transactions contemplated herein, and to perform its obligations in accordance with the terms of this SPA.

## Article VII. **Miscellaneous**

Section 7.01 *Independent Contractor.* ACH and Participant understand and agree that the Parties intend to act and perform their respective obligations under this Agreement and any accompanying PSA as independent contractors and that neither is an employee, partner, or joint venture of the other.

Section 7.02 *Required Insurance.* Each Party shall, at its own cost and expense, have in effect insurance coverage of such amounts and types usually maintained by entities such as the Parties, including but not limited to comprehensive general liability insurance, workers compensation, and errors and omissions coverage.

## Article VIII. **Term and Termination**

Section 8.01 *Term.* This Agreement shall terminate on December 31, 2021, unless terminated earlier in accordance with the provisions of this Article.

Section 8.02 *Termination by Participant.* Participant may terminate the Agreement on 30 days' written notice to the ACH. Participant may also terminate this Agreement by delivering written notice to ACH at least ninety (90) days before the end of any DSRIP Year (i.e., at least 90 days before December 31st of each year). In such event, termination in accordance with this Article shall take effect at the end of the DSRIP year in which notice is provided, or earlier upon the written agreement of the Parties. Participant may terminate this Agreement immediately upon written notice to the ACH if HCA withdraws its approval for the ACH to participate in DSRIP.

Section 8.03 *Termination by ACH.* ACH may terminate this Agreement in the event that Participant breaches a material term of this SPA, any relevant PSA, or the Project Plan and fails to cure such breach within thirty (30) calendar days after receiving written notice from ACH regarding the breach (or such other longer cure period as ACH deems reasonable under the circumstances). In addition, ACH may terminate this Agreement upon twenty-four (24) hours' written notice to Participant if any license, certification or government approval of Participant material to its performance under this Agreement is suspended, terminated, revoked, or surrendered.

Section 8.04 *Termination for Exclusion.* Either Party may terminate this Agreement immediately if the other Party or any of its employees, agents or contractors are excluded from the Medicare or Medicaid program or any other federal or state health care program and, where the exclusion applies to the Party's employees, agents or contractors, the Party fails to terminate such employees, agents or contractors within five (5) business days of becoming aware of the exclusion.

Section 8.05 *Effect and Process in the Event of Termination.* In the event of termination of this Agreement for any reason: (i) the Parties shall work together to assure that there is no interruption in needed services to members of the ACH patient population and Participant's patients and (ii) Participant shall return any unexpended Specified Purpose Funds provided by ACH to Participant. Specified Purpose Funds that were expended by Participant as of the date of termination and DSRIP Funds provided to Participant as a bonus payment for past performance shall not be subject to return by Participant.

Section 8.06 *Termination for Uncured Breach.* Either Party may terminate this Agreement upon the other Party's material breach of its obligations hereunder, which breach is uncured for a period of thirty (30) calendar days after the non-breaching Party has given the breaching Party notice of that breach and requested that the breaching Party cure that breach; provided that no opportunity to cure shall be provided and termination shall be immediate in the event of (a) a breach that cannot reasonably be cured within thirty (30) calendar days, (b) repeated breaches of the same obligation or (c) a breach that would expose the non-breaching Party to civil or criminal liability or would otherwise cause a violation of applicable laws, rules, regulations or accreditation standards applicable to a non-breaching Party. Termination of this Participation Agreement by either Party shall automatically terminate Participant's participation in any Project under this agreement.



**Attachment C**  
**Payment Schedule**

For the completion of the deliverables set forth in this contract, the partner shall be paid up to the following amounts for each calendar year while completing the work as described in the Change Plan:

Year	Payment
2018 (to be remitted to KPHD immediately upon contract signing)	\$25,000
2019	\$47,552
2020	\$46,427
2021	\$45,302

Additionally, Kitsap Public Health is anticipated to receive up to the following amounts in the years after the work has been completed. The Olympic region will continue to receive funding in these years as data related to the contract is received by the HCA.

2022	\$29,451
2023	\$18,393

Finally, Kitsap Public Health may receive additional funding for income received by the Olympic region in relation to the level that the region performs above initial estimates. Funding received beyond initial estimates goes to a “bonus pool” that is then allocated to the region. These amounts cannot be estimated by OCH at this time, but will be remitted to partners in addition to anticipated payments.

Olympic Community of Health Change Plan Implementation Partner Deliverables Calendar 2019-2021

	January	February	March	April	May	June	July	August	September	October	November	December
<b>Progress to Date Report (ORCA)</b>	Action required due 1/31 (2020-)						Action required due 7/31					
<b>Intermediary Metrics Report (ORCA)</b>				Action required due 4/12 (2019-)				Action required Due 8/30				
<b>Clinical-Community Linkage Assessment (Excel)</b>	Identify partners, start work on this after Feb NCC (2019)						Continue assessments after Regional Convening (2019)					
<b>Site Visit</b>			x						x			
<b>Internal Quality Improvement meetings</b>	x	x	x	x	x	x	x	x	x	x	x	x
<b>P4Rs (ORCA?)</b>						Action required Due 6/30 (2019)						Action required Due 12/31
<b>Participate in NCC Convenings</b>	Clallam: 2/25, Kitsap 2/26, Jefferson 2/27					Regional NCC 6/25				Opioid summit (optional)		
<b>Change Plan Updates (ORCA)</b>											CP unlocked 11/1, action required due 11/27	
<b>Contract Amendments</b>	Amend contract (2019) released 1/23	Amend contract (2019) due 2/8									Amendment template distributed 11/1 (2019-)	Action required due 12/16 (2019-)
<b>Payments</b>						6/21/2019 schedule; 6/28/2019 payment (except Hospitals)						x (All partners)

## 2020 Olympic Community of Health Implementation Partner Payment Model

### Principles

The OCH Implementation Partner 2020 Payment Model will:

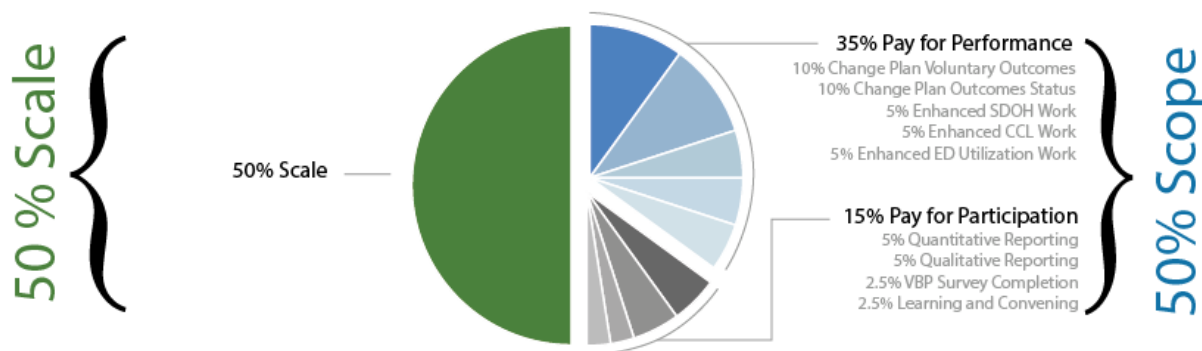
- Facilitate and support partner success toward the broad MTP vision and goals
- Encompass the full body of work requested of partners
- Ensure flexibility to adapt to unforeseen requests and opportunities
- Uphold and align with the established funds flow methodology
- Employ a simplistic approach
- Acknowledge and incent work that results in transformation

### Scale/Scope Split

On March 12, 2018, the Board approved the following: “Each subsequent year, an increasingly larger proportion of incentives will be earned based on performance.”

Additional detail determined by Funds Flow, May 29, 2018:

Year	Proportion of Payment Based on Scale	Proportion of Payment Based on Scope
2019	60%	40%
2020	50%	50%
2021	50%	50%
2022	40%	60%
2023	30%	70%



NOTE: Percentages are absolute, 50% scale, 50% scope, and 100% total.

## Scale=50%

50% of 2020 payments will be based on the following scale criteria as self-reported by partner type:

- Primary Care = 2019 Medicaid lives
- Behavioral Health = 2019 Medicaid encounters
- CBOSS = Number of OCH core metrics impacted (based on 2020 change plan)
- Hospital = Scale calculation does not apply to payment calculation, although data are collected

## Scope=50%

<i>Pay for Participation - 15% absolute - elements apply to all change plan types. Pay for participation aims to incent partners for participation elements.</i>		
Scope element (with absolute percent of payment)	Description	Frequency
Quantitative reporting (5%)	Reporting on required OCH intermediary metrics.  <i>Incentives for reporting on optional metrics is included in 2020 operations budget, not this payment model.</i>	Twice per year  <i>Report on optional metrics only once</i>
Qualitative reporting (5%)	Complete all qualitative reporting elements (change status, narrative questions, HCA P4R metrics including MeHAF assessment for BH) that apply to change plan type.	Twice per year
VBP survey completion (2.5%)	Complete HCA value-based payment survey, which is part of the HCA P4R requirement. CBOSS partners not eligible to participate will automatically receive credit for this element.	VBP survey is once per year
Learning and convening (2.5%)	Participation at convenings, summits, trainings, OCH committees, and other OCH-hosted events. Governance related committees and workgroups do not apply (Board of Directors, Executive Committee, Finance Committee, Funds Flow). Committee participation such as P MEC and 3CCORP do apply.	Attend a minimum of 4 learnings/ convenings per year (counted by number of events per change plan, not number of people)

*Note: Site visits are not part of the payment model in 2020 and are a part of contract monitoring.*

\*\*\*

<i>Pay for Performance – 35% absolute – elements apply to all change plan types. Pay for performance aims to incent partners for doing transformational work.</i>		
Scope element (with absolute percent of payment)	Description	Frequency
Change plan voluntary outcomes (10%)	Selected voluntary outcomes in 2020 change plan. Calculated as a percentage of selected voluntary outcomes of the total available voluntary outcomes.	Once per year, based on 2020 change plan

Change plan outcomes status (10%)	Self-reported status on selected outcomes (not started, planning, testing, limited implementation, fully implemented, scaling and sustaining). 50.0% or more of <u>all</u> selected change plan outcomes status' must be at "limited implementation", "fully implemented", or "scaling and sustaining" to receive credit.	Once per year (second reporting of the year), to be completed with qualitative reporting
Enhanced Social Determinants of Health work (5%)	Participation in a regional SDOH assessment (component of 2020 site visit agenda)	Once per year
Enhanced community-clinical linkage work (5%)	Demonstration of implementation of new work to advance community-clinical linkage work selected in change plan (second half of 2020, staff to provide guidance based on above SDOH assessment).	Once per year
Enhanced emergency department utilization work (5%)	Participate in strategy session(s) to determine collaborative action toward ED utilization P4P metric.	Once per year

Acronyms:

*BH – Behavioral Health, CBOSS – Community Based Organizations and Social Services, CCL – Community Clinical Linkages, ED – Emergency Department, HCA – Health Care Authority, OCH – Olympic Community of Health, P4R – Pay for Reporting, SDOH – Social Determinants of Health, VBP – Value Based Payment*

**AMENDMENT TO AGREEMENT 2002**

This Amendment (“Amendment”) to Clallam County Health and Human Services Contract (the “Contract”) for Professional Services is entered into between the Kitsap Public Health District (“District”) and Clallam County Health and Human Services (Clallam County) District and Clallam County are hereinafter collectively referred to as the “Parties.” The Parties mutually agree as follows:

**RECITALS**

**WHEREAS**, the Parties entered into the Contract effective July 1, 2019; and

**WHEREAS**, Clallam County is a subrecipient of KPHD under the Washington State Department of Health funded Tobacco & Vapor Product Prevention & Control Program; and

**WHEREAS**, Washington State Department of Health has amended Scope of work and budget to incorporate FPH – Youth Tobacco Vapor Prevention funding, which can only be used for Tobacco and Vapor 21 outreach and education activities.

**NOW, THEREFORE, THE PARTIES AGREE AS FOLLOWS:**

- I. Amendment of Contract Attachment A-Tobacco Scope of Work and Budget.** The funding Source table is amended as follows to include FPH – Youth Tobacco Vapor Prevention; the total amount remains unchanged:

<b>Chart of Accounts Program Name or Title</b>	<b>CFDA#</b>	<b>BARS Code</b>	<b>7/1/19-6/30/20</b>
Youth Tobacco & Vapor Products	NA	334.04.93	\$ 8,903
<b>FPH – Youth Tobacco Vapor Prevention</b>	<b>NA</b>	<b>334.04.93</b>	<b>9,853</b>
<b>TOTAL to Clallam</b>			<b>\$ 18,756</b>

- II. Other Provisions Unchanged.** The other provisions of the Contract remain unchanged.

**IV. Effective Date.** This Amendment is effective July 1, 2019.

**V. Authorization.** Each party signing below warrants to the other party that they have the full power and authority to execute this Amendment on behalf of the party for whom they sign.

**IN WITNESS WHEREOF**, the Parties have subscribed their names hereto.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2020.

**KITSAP PUBLIC  
HEALTH DISTRICT**

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Keith Grellner  
Administrator

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2020.

**CLALLAM COUNTY  
BOARD OF COMMISSIONERS**

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Mark Ozias  
Chair

**PROFESSIONAL SERVICES AGREEMENT**  
**Between**  
**KITSAP PUBLIC HEALTH DISTRICT**  
**And**  
**PENINSULA COMMUNITY HEALTH SERVICES**

This Professional Services Subcontract (“Agreement”) is made and entered into between 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 “District,” and Peninsula Community Health Services, hereinafter referred to as “Subcontractor.” The Parties mutually agree as follows:

1. **Purpose:** The District requires Subcontractor to provide a designated Community Health Worker and behavioral health services to streamline integrated care for Kitsap Connect clients who are patients or potential patients of Subcontractor.
2. **Period of Performance:** This Agreement shall begin January 1, 2020 and be completed no later than December 31, 2020, unless terminated sooner or extended as provided for herein.
3. **Services:** The District requires Subcontractor to provide coordination of integrated care within the Subcontractor’s patient management systems for Kitsap Connect clients who are patients of Subcontractor (or potential patients) and to participate on the crisis response and care coordination team as content expert in co-occurring disorder behavioral health. As part of a multi-disciplinary team, Subcontractor staff shall provide services to up to 50 highly vulnerable residents of Bremerton and Central Kitsap who are experiencing (or are at risk of) mental health and chemical dependency issues.

Subcontractor agrees to provide the following staffing support for this agreement:

- 0.4 Full-Time Equivalent (FTE) Licensed Mental Health Counselor
- 0.4 FTE Substance Use Disorder Professional
- 1.0 FTE Community Health Worker

Subcontractor agrees to provide its own labor and materials. Subcontractor staff may be housed with the Kitsap Connect team at Salvation Army. Unless otherwise provided for in this Agreement, no material or labor shall be furnished by the District. Subcontractor’s duties to be performed under this Agreement are specified in **ATTACHMENT A: Scope of Work**, hereto attached and incorporated hereinafter. Subcontractor shall perform the work specified in the Agreement according to standard industry practice.

4. **Qualifications/Eligibility:** Subcontractor shall have the qualifications necessary to successfully complete the objectives of this Agreement.
5. **Compensation:** The District agrees to pay Subcontractor based on monthly invoices itemizing hours worked and services performed; total compensation to Subcontractor shall not exceed \$78,461 during the Agreement as specified in the budget, hereto attached and incorporated as



**ATTACHMENT B.** Subcontractor agrees to provide \$47,736 match toward the cost of this program and to provide supervision of their employees.

6. **Notices:** Notices pursuant to this Agreement shall be sent to:
- |  |  |
|--|--|
| <b><u>If to the DISTRICT:</u></b><br>Kitsap Public Health District<br>ATTN: Yolanda Fong<br>345 6 <sup>th</sup> Street, Suite 300<br>Bremerton, WA 98337<br>(360) 728-2275 | <b><u>If to the SUBCONTRACTOR:</u></b><br>Peninsula Community Health Services<br>Attn: Jennifer Kreidler-Moss<br>P.O. Box 960<br>Bremerton, WA 98337<br>Ph: (360) 475-6707 |
|--|--|
7. **Billings:** Billings to the District shall occur monthly and will be paid within 30 days of receipt. Final invoice is due to the District no later than January 10, 2021. Billings shall be sent to:
- Kitsap Public Health District  
Accounts Payable  
345 6<sup>th</sup> Street, Suite 300  
Bremerton, WA 98337  
(360) 728-2215
8. **Independent Contractor:** Subcontractor and its employees or agents performing under this Agreement are not employees or agents of the District.
9. **Rights in Data:** Data that is delivered under this Agreement is the District's property and shall be transferred fully to the District with all rights to the license to publish, translate, reproduce, modify, deliver, dispose of, and to authorize others to do so.
10. **Indemnification:** Subcontractor shall defend, indemnify and hold the District, 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 of the Subcontractor in performance of this Agreement, except for injuries and damages caused by the sole negligence of the District. Solely for the purposes of this provision, Subcontractor 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 shall survive the expiration or termination of this Agreement.
11. **Insurance:** Subcontractor shall procure and maintain for the duration of this 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 the Subcontractor, its agents, representatives, or employees. The District shall be named as an additional insured under the Subcontractor's Commercial General Liability insurance policy with respect to the work performed for the District under this Agreement.

**No Limitation.** Subcontractor's maintenance of insurance as required by this Agreement shall not be construed to limit the liability of the Subcontractor to the coverage provided by such insurance, or otherwise limit the District's recourse to any remedy available at law or in equity.

#### A. Minimum Scope of Insurance

Subcontractor 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 Subcontractors and personal injury and advertising injury. The District shall be named as an insured under the Subcontractor's Commercial General Liability insurance policy with respect to the work performed for the District.
3. Workers' Compensation coverage as required by the Industrial Insurance laws of the state of Washington.
4. Professional Liability insurance appropriate to the Subcontractor's profession. Subcontractor shall provide the District with proof of liability insurance or professional errors and omissions coverage appropriate to the Subcontractor's profession.

#### B. Minimum Amounts of Insurance

Subcontractor 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. Subcontractor's insurance coverage shall be primary insurance as respect the District. Any insurance, self-insurance, or insurance pool coverage maintained by the District shall be excess of the Subcontractor's insurance and shall not contribute with it.

2. Subcontractor'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 the District.

#### 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

Subcontractor shall furnish the District with original certificates and a copy of the amendatory endorsements, including but not necessarily limited to the additional insured endorsement, evidencing the insurance requirements of the Subcontractor before commencement of the work.

12. **Safeguarding of Information:** The use or disclosure by any party of any information concerning a client obtained in providing service under this Agreement shall be subject to Chapter 42.56 RCW and Chapter 70.02 RCW, as well as any other applicable federal and state statutes and regulations. Personal information collected, used or acquired in connection with this Agreement shall be used solely for the purposes of this Agreement. Subcontractor agrees not to release, divulge, publish, transfer, sell or otherwise make known to unauthorized persons personal information without the express written consent of the agency or as provided by law. Subcontractor agrees to implement physical, electronic, and managerial safeguards to prevent unauthorized access to personal information. Any unauthorized access or use of confidential information must be reported to the District Privacy Officer at (360) 728-2262. The notification must be made in the most expedient time possible (usually within 24 hours of discovery) and without unreasonable delay, consistent with the legitimate needs of law enforcement, or any measures necessary to determine the scope of the breach and restore the reasonable integrity of the data system. Subcontractor shall certify the return or destruction of all personal information upon expiration of the Agreement.
13. **Statutory and Regulatory Compliance:** Subcontractor shall comply with all applicable federal, state, and local laws, regulations, guidelines, and standards in the performance of this Agreement.
14. **Compliance with State and Federal Confidentiality Laws:** Subcontractor shall maintain confidentiality of all information provided or acquired in performance of this Agreement as required by Health Insurance Portability and Accountability Act (HIPAA), other regulations pursuant to its provisions, and any pertinent privacy laws, except upon the prior express written consent of the District, or as required by law enforcement or order entered by a court of competent jurisdiction. Subcontractor shall promptly notify the District of any judicial proceeding seeking disclosure of such information. Subcontractor shall sign a Business Associate Agreement, hereto attached and hereinafter incorporated as **ATTACHMENT C**.
15. **Non-Discrimination:** Subcontractor shall not discriminate against any employee or applicant for employment because of race, color, creed, religion, gender, sexual orientation, ancestry, national

origin, marital status, age, membership in the military or status as a veteran or Vietnam era or disabled veteran, or the presence of any sensory, mental or physical disability.

16. **Records Inspection and Retention:** The Parties shall each maintain books, records, documents, and other evidence which sufficiently and properly reflect all direct and indirect costs expended by either party in the performance of the services described herein. These records shall be subject to the inspection, review or audit by personnel of both parties, other personnel duly authorized by either party, the Office of the State Auditor, and federal officials so authorized by law. All books, records, documents, and other material relevant to this Agreement shall be retained for six (6) years after expiration and the Office of the State Auditor, federal auditors, and any persons duly authorized by the Parties shall have full access and the right to examine any of these materials during this period.

If any litigation, claim or audit is started before the expiration of the six-year period, the records shall be retained until all litigation, claims, or audit finding involving the records have been resolved.

Records and other documents, in any medium, furnished by one party to this Agreement to the other party, will remain the property of the furnishing party, unless otherwise agreed. The receiving party will not disclose or make available this material to any third parties without first giving notice to the furnishing party and giving that party a reasonable opportunity to respond. Each party will utilize reasonable security procedures and protections to assure that records and documents provided by the other party are not erroneously disclosed to third parties.

This Agreement and all public records associated with this Agreement shall be available for inspection and copying by the public where required by the Public Records Act, Chapter 42.56 RCW (the "Act").

17. **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 jurisdiction in Kitsap County, Washington.
18. **Amendment:** This Agreement may be modified only by a written amendment executed by authorized representatives of both parties.
19. **Dispute Resolution:** In the event that a dispute arises under the Agreement that the parties are unable to resolve, they shall allow the dispute to be decided by a Dispute Panel in the following manner: A Mediator shall be mutually appointed by the Parties and each party to this Agreement shall appoint an additional member to the Dispute Panel. The Dispute Panel shall review the facts, contract 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.
20. **Severability:** If any provision of this Agreement or any provision of any document incorporated by reference shall be held invalid, such invalidity shall not affect the other provisions of this Agreement which can be given effect without the invalid provision, if such remainder conforms to the

requirements of applicable law and the fundamental purpose of this Agreement, and, to this end, the provisions of this Agreement are declared to be severable.

21. **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.
22. **Personnel Removal:** Subcontractor agrees to remove immediately any of its subcontractors, employees, agents, or representatives from assignment to perform services under the Agreement upon receipt of a written request to do so from the District's contract representative or designee.
23. **Termination:** This Agreement may be terminated by either party upon giving at least thirty (30) days advance written notice 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.
24. **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.
25. **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.

**KITSAP PUBLIC HEALTH DISTRICT \_**

**PENINSULA COMMUNITY HEALTH  
SERVICES**

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

By: \_\_\_\_\_  
Jennifer Kreidler-Moss, CEO

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

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

**ATTACHMENT A  
SUBCONTRACTOR (PCHS) SCOPE OF WORK**

1. Conduct outreach and engagement activities via telephone and face to face meetings in order to identify key barriers to stability and resource needs. Home visits and street outreach activities may occasionally be conducted as a last resort but will only occur when such visits can be made in pairs (e.g., a single PCHS staff member may be asked to accompany a Kitsap Connect staff member from a separate agency for safety purposes).
2. Meet and assist clients as needed at social service/community agencies (e.g., DSHS, Social Security, Department of Licensing, etc.).
3. Schedule appointments for clients related to medical and behavioral health services. Attend appointments with clients as needed or when requested by Kitsap Connect public health nurse or Program Coordinator, as available.
4. Assist clients to apply for and arrange transportation (i.e., ACCESS, Paratransit, etc.) to/from medical, social, and behavioral health appointments. Coordinate client transport via PCHS transport van to PCHS appointments or other medical/behavioral health appointments with supervisor approval when no other public transportation is available.
5. Attend court with clients and help coordinate needed follow-up such as community service with supervisor approval.
6. Conduct behavioral health screenings with clients. Assist clients as needed to schedule and follow-through on needed behavioral health assessments and treatments outside PCHS, including helping to arrange transportation, give reminder calls, and coordinate care across behavioral health agencies.
7. Send monthly behavioral health compliance reports as requested and permitted to DSHS, courts, etc. to report client compliance with court-ordered treatment and/or DSHS benefits such as ABD/HEN
8. Provide expert advice regarding care plan and development which promotes chemical dependency recovery and effective treatment for mental illness.
9. Provide short-term counseling, support and referral to other services as appropriate.
10. Assess referrals from law enforcement, EMS, primary care, behavioral health, social service, emergency department and inpatient discharge.
11. Meet high-risk patients when possible during hospital discharge to help ensure optimal success in linkages to needed services.
12. Perform ongoing collaboration with Kitsap Connect project team and external partners.
13. Track client data in selected electronic record system.

14. Assist the project team in tracking and collecting and compiling client statistics and in the completion of program reports.
15. Render effective and efficient clinical services using best practice standards.
16. Follow Agency Code of Ethics regarding safeguarding the confidentiality of client information.
17. Complete all necessary clinical and administrative record keeping.

**ATTACHMENT B**  
**BUDGET**

<b>Kitsap Connect Budget – PCHS Subcontract</b>			
		<b>2020 Subcontract Budget</b>	<b>2020 PCHS Match</b>
Salaries & Benefits (Community Health Worker, Mental Health Professional, Chemical Dependency Professional)		\$70,299	\$40,000
Admin (Indirect limited to 5%)		\$6,112	\$ 7,736
Supplies/ Expenses		\$2,050	
<b>Total</b>		<b>\$78,461</b>	<b>\$47,736</b>

## **ATTACHMENT C**

### **HIPAA BUSINESS ASSOCIATE AGREEMENT**

This Agreement (“Agreement”) is entered into by and between the Kitsap Public Health District (“Covered Entity”) and Peninsula Community Health Services (“Business Associate”).

#### **Section I: Purpose**

Performance of the Underlying Agreement may require Business Associate to use or disclose protected health information that is subject to provisions of the Health Insurance Portability and Accountability Act of 1996, set forth in 45 C.F.R. Parts 160 and 164 (commonly known as the “HIPAA Rules”). The purpose of this Agreement is to set forth the obligations of the Parties with regard to the way in which protected health information is created, used, disclosed, maintained, provided or received on behalf of Covered Entity by the Business Associate.

#### **Section II. Definitions**

The following terms used in this Agreement shall have the same meaning as those terms in the HIPAA Rules: Breach, Data Aggregation, Designated Record Set, Disclosure, Health Care Operations, Individual, Minimum Necessary, Notice of Privacy Practices, Protected Health Information, Required by Law, Secretary, Security Incident, Subcontractor, Unsecured Health Information, and Use.

##### Specific Definitions:

1. Business Associate. “Business Associate” shall generally have the same meaning as the term “business associate” at 45 CFR 160.103, and in reference to this Agreement shall mean Peninsula Community Health Services.
2. Covered Entity. “Covered Entity” shall generally have the same meaning as the term “covered entity” in 45 CFR 160.103, and in reference to the party in this Agreement shall mean the Kitsap Public Health District.
3. HIPAA Rules. “HIPAA Rules” shall mean the Privacy, Security, Breach Notification, and Enforcement Rules at 45 CFR Part 160 and 164.

#### **Section III. Obligations and Activities of Business Associate**

Business Associate agrees to:

1. Not use or disclose protected health information other than as permitted or required by the Agreement or as required by law.
2. Use appropriate safeguards, and comply with Subpart C of 45 CFR, Part 164 with respect to protected electronic health information and to prevent use or disclosure of protected health information other than as provided for by this Agreement.



3. Report to Covered Entity any use or disclosure of protected health information not provided for by this Agreement of which it becomes aware, including breaches of unsecured protected health information as required by 45 CFR 164.410, and any security incident of which it becomes aware.

Business Associate agrees to promptly notify covered entity following the discovery of a Breach of unsecured PHI. A Breach is considered “discovered” as of the first day on which the Breach is known, or reasonably should have been known, to Business Associate or any employee, officer or agent of Business Associate, other than the individual committing the Breach. Any notice of a Security Incident or Breach of Unsecured PHI shall include the identification of each Individual whose PHI has been or is reasonably believed by Business Associate to have been, accessed, acquired, or disclosed during such Security Incident or Breach as well as any other relevant information regarding the Security Incident or Breach.

4. In accordance with 45 CFR 164.502(e)(1)(ii) and 164.308(b)(2), if applicable, ensure that any subcontractors that create, receive, maintain, or transmit protected health information on behalf of the Business Associate agree to the same restrictions, conditions, and requirements that apply to the Business Associate with respect to such information.
5. Business Associate agrees to mitigate, to the extent possible, any harmful resulting from use or disclosure of PHI by Business Associate or its agents or subcontractors, in violation of the requirements of this Agreement.
6. Maintain and make available protected health information in a designated record set to the Covered Entity as necessary to satisfy Covered Entity’s obligations under 45 CFR 164.524.

If an Individual makes a request for access to the protected health information directly to Business Associate, business associate shall notify covered entity within three (3) business days of such request and shall cooperate with the Covered Entity to send the response to the Individual.

7. Make any amendment(s) to protected health information in a designated record set as directed or agreed to by the Covered Entity pursuant to 45 CFR 164.526, or take other measures as necessary to satisfy Covered Entity’s obligations under 45 CFR 164.526.

If an Individual makes a request for amendment to the protected health information directly to Business Associate, Business Associate shall notify Covered Entity within three (3) business days of such request and shall cooperate with the Covered Entity to send the response to the Individual.

8. Maintain and make available the information required to provide to provide an accounting of disclosures to the Covered Entity as necessary to satisfy Covered Entity’s obligations under 45 CFR 164.528.

If an Individual makes a request for accounting of disclosures directly to Business Associate, Business Associate shall notify Covered Entity within three (3) business days of such request and shall cooperate with the Covered Entity to send the response to the Individual.

9. To the extent the Business Associate is to carry out one or more of Covered Entity's obligations(s) under Subpart E of 45 CFR Part 164, comply with the requirements of Subpart E that apply to the Covered Entity in the performance of such obligation(s); and
10. Make its internal practices, books, and records available to the Secretary for purposes of determining compliance with the HIPAA Rules.

#### **Section IV. Permitted Uses and Disclosures by Business Associate**

1. Business Associate may only use or disclose protected health information as necessary to perform the services as outlined in the underlying Agreement.
2. Business Associate is not authorized to use protected health information to de-identify the information in accordance with 45 CFR 164.514(a)-(c).
3. Business Associate may use or disclose protected health information as required by law.
4. Business Associate agrees to make uses and disclosures and requests for protected health information consistent with Covered Entity's minimum necessary policies and procedures.

Business Associate may not use or disclose protected health information in a manner that would violate Subpart E of 45 CFR Part 164 if done by Covered Entity except for the specific used and disclosures set forth below:

- a) Business Associate may disclose protected health information for the proper management and administration of Business Associate or to carry out the legal responsibilities of the Business Associate, provided the disclosures are required by law, or Business Associate obtains reasonable assurances from the person to whom the information is disclosed that the information will remain confidential and used or further disclosed only as required by law or for the purposes for which it was disclosed to the person, and the person notifies Business Associate of any instances of which it is aware in which the confidentiality of the information has been breached.
- b) Business Associate may provide data aggregation services relating to the health care operations of the Covered Entity.

#### **Section V. Termination**

1. Term. The Agreement shall terminate on December 31, 2020 or on the date Covered Entity terminates for cause, whichever is sooner.

2. Termination for Cause. Business Associate authorizes termination of the Agreement if Covered Entity determines Business Associate has violated a material term of the Agreement and has not cured the breach or ended the violation within the time specified by Covered Entity.
3. Obligations of Business Associate Upon Termination. Upon termination of this Agreement for any reason, Business Associate shall return or destroy all protected health information received from Covered Entity or created or received by Business Associate on behalf of Covered entity. This provision shall apply to protected health information that is in the possession of subcontractors or agents of Business Associate. Business Associate shall retain no copies of the protected health information.

In the event that Business Associate determines that returning or destroying the protected health information is infeasible, Business Associate shall provide to Covered Entity notification of the conditions that make return or destruction infeasible. Upon mutual agreement of the Parties that return or destruction of protected health information is infeasible, Business Associate shall extend the protections of this Agreement to such protected health information and limit further uses and disclosures of such protected health information to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains such protected health information.

5. The obligations of Business Associate under this section shall survive the termination of this Agreement.

## **Section VI. Miscellaneous**

1. A reference in this agreement to a section in the HIPAA Rules means the section as in effect or amended.
2. The Parties agree to take such action as is necessary to amend this Agreement from time to time as is necessary for compliance with the HIPAA Rules and any other applicable law.
3. Any ambiguity in this Agreement shall be resolved to permit compliance with the HIPAA Rules.

**PROFESSIONAL SERVICES AGREEMENT**  
**Between**  
**KITSAP PUBLIC HEALTH DISTRICT**  
**And**  
**THE SALVATION ARMY**

This Professional Services Agreement (“Agreement”) is made and entered into between 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 “District,” and the Salvation Army, a California corporation, through its Bremerton corps, hereinafter referred to as “Contractor.” The Parties mutually agree as follows:

1. **Period of Performance:** The period of performance of this Agreement shall begin January 1, 2020 and be completed no later than December 31, 2020, unless terminated sooner or extended as provided for herein.
2. **Services:** District requires Contractor to provide the following services in support of and related to the Kitsap Connect grant project:
  - a. A trained security guard in support of the crisis response team performing work related to Kitsap Connect grant project. The presence of security personnel is sought in order to preserve a peaceful work environment for staff employed by the grant as well as to mitigate hazards posed by at-risk clients. A guard shall be on site during core business hours of 8:00 AM to 2:00 PM. Contractor’s vendor agreement specifying the employment and duties of the security guard to the District and is hereto attached as **ATTACHMENT A**.
  - b. A case manager to provide general social services to Kitsap Connect clients, including but not limited to case management, service authorization, and referrals to assistance for adults to develop and pursue an effective a mutually agreed upon case plan. The case manager will report administratively to Contractor and will accept assignments by, and have programmatic reporting responsibilities to, the Kitsap Connect Program Coordinator.
  - c. Phone and internet connectivity and service to the Kitsap Connect office space.
  - d. In-kind office space for the Kitsap Connect Program staff.
3. **Qualifications/Eligibility:** Contractor’s Kitsap Connect staff 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).
4. **Compensation:** District agrees to contribute a total compensation not to exceed \$72,530 during the Agreement for the services delineated above; see **ATTACHMENT B** for contract budget. Compensation will be based on invoices submitted by Contractor itemizing hours worked with a detailed description of services performed. Funding for the trained security guard is contingent upon availability of funds from the City of Bremerton. The interlocal agreement between the District and the City of Bremerton detailing the intent to distribute the funds is attached as **ATTACHMENT C**.

5. **Notices:** Notices pursuant to this Agreement shall be sent to:

**If to the District:**

Kitsap Public Health District  
ATTN: Keith Grellner  
345 6<sup>th</sup> Street, Suite 300  
Bremerton, WA 98337  
(360) 728-2224

**If to the Contractor:**

Salvation Army  
ATTN: Dana M. Walters, Captain  
P.O. Box 886 – 832 6<sup>th</sup> Street  
Bremerton, WA 98337  
(360) 373-5550

6. **Billings:** Billings to the District shall be submitted no more frequently than every 30 days. Final invoice is due to the District no later than January 10, 2021. Billings shall be sent to:

Kitsap Public Health District  
Accounts Payable  
345 6<sup>th</sup> Street, Suite 300  
Bremerton, WA 98337  
(360) 728-2215

7. **Independent Contractor:** Contractor and its employees or agents performing under this Agreement shall not be considered to be employees or agents of the District for any purpose.
8. **Indemnification:** Contractor shall defend, indemnify and hold the District, 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 of the Contractor in performance of this Agreement, except for injuries and damages caused by the sole negligence of the District. Solely for the purposes of this provision, the 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.
9. **Insurance:** The 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 the 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 the District'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. **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. The District shall be named as an insured under the Contractor's Commercial General Liability insurance policy with respect to the work performed for the District.

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

B. Minimum Amounts of Insurance

Contractor shall maintain the following insurance limits:

1. Commercial General Liability insurance shall be written with limits no less than \$1,000,000 each occurrence, \$2,000,000 general aggregate.
2. 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 in respect to the District. Any insurance, self-insurance, or insurance pool coverage maintained by the District shall be excess of the 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 the District.

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 the District with original certificates and a copy of the amendatory endorsements, including but not necessarily limited to the additional insured endorsement, evidencing the insurance requirements of the Contractor before commencement of the work.

10. **Safeguarding of Information:** The use or disclosure by any party of any information concerning a client obtained in providing service under this Agreement shall be subject to Chapter 42.56 RCW and Chapter 70.02 RCW, as well as any other applicable federal and state statutes and regulations. Contractor agrees not to release, divulge, publish, transfer, sell or otherwise make known to unauthorized persons personal information except as provided by law. The security guard will sign a statement of confidentiality and will safeguard any sensitive information encountered while performing the work of this Agreement. The confidentiality statement shall be attached as **ATTACHMENT D.**

11. **Statutory and Regulatory Compliance:** Contractor shall comply with all applicable federal, state, and local laws, regulations, guidelines, and standards in the performance of this Agreement.
12. **Compliance with State and Federal Confidentiality Laws:** Contractor 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, and any regulations enacted pursuant to its provisions and sign a Business Associate Agreement which is incorporated into this Agreement as **Attachment E**.
13. **Non-Discrimination:** Contractor shall not unlawfully 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.
14. **No Waiver:** A failure by either party to exercise its rights under this Agreement shall not preclude that party from subsequent exercise of such rights and shall not constitute a waiver of any other rights under this Agreement unless stated to be such in writing, signed by an authorized representative of the party and attached to the original Agreement.
15. **Dispute Resolution:** In the event that a dispute 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, contract 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.
16. **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.
17. **Severability:** If a court of competent jurisdiction holds any part, term, or provision of this Agreement to be illegal, or invalid in whole or in part, the validity of the remaining provisions shall not be affected, and the parties' rights and obligations shall be construed and enforced as if the Agreement did not contain the particular provision held to be invalid.
18. **Amendment:** This Agreement may be modified only by a written amendment executed by authorized representatives of both parties.
19. **Termination:** This Agreement may be terminated by either party upon giving at least thirty (30) days advance written notice 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.
  - A. **For Funding:** In the event that funding for this project is withdrawn, reduced or limited in any way after the effective date of this Agreement, KPHD may summarily terminate this Agreement notwithstanding any other termination provision of this Agreement. Termination under this

paragraph shall be effective upon the date specified in the written notice of termination sent by KPHD to the Contractor. After the effective date, no charges incurred under this Agreement are allowable.

**B. For Cause:** If 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 affected 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.

**C. 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.

In the event of termination, Contractor shall settle all outstanding liabilities and all claims arising out of such termination of orders, with the approval or ratification of the District to the extent the District may require, which approval or ratification shall be final for all the purposes of this clause.

20. **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, and Severability.
21. **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.

**KITSAP PUBLIC HEALTH DISTRICT**

**THE SALVATION ARMY**

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

By: \_\_\_\_\_  
Lt. Col. Bill Dickinson

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

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

Funding Source
Program: CH Non-Federal Contract/Grant: 1/10 <sup>TH</sup> OF 1% Sales Tax, City of Bremerton contract



ATTACHMENT A  
CONTRACTOR VENDOR AGREEMENT FOR SECURITY GUARD



Temporary Agreement of Service

02/12/2019

STEPHEN GROUP INTERNATIONAL has been requested to furnish uniformed security agents, which services client regards as critical to its business and or event operations, on the following terms and conditions:

**Client:** The Salvation Army Northwest Divisional Headquarters / 111 Queen Anne Avenue North Seattle, Washington 98109 / Carol McNair Human Resources Executive / office (206) 587 0503 / cell (206) 795 7551 / [carol.mcnaire@usw.salvationarmy.org](mailto:carol.mcnaire@usw.salvationarmy.org)

**Location of Service to be provided:** THE SALVATION ARMY – BREMERTON - 832 6th St, Bremerton, WA 98337

**Date/Time:** Friday FEB 1 2019 – Saturday FEBRUARY 1 2020 (8:30 am – 1:30 pm (M/T/Th/F) 9:00 – 6:00 pm (W)

**Classification of Agent** \_\_\_\_\_ **Hours requested** \_\_\_\_\_ **Regular hourly rate** \_\_\_\_\_

Uniformed security agents on site Total Hrs = 29 per week \$25.00 per hour per security agent

**Initial role requested of Stephen Group International security agent by Client:**

**Client request:**

Secure Area of Operation –Providing Fire watch and Access control to Location named above, to authorize personnel deemed by client during said hours. Establish presence and deterrence of illegal activity through all legal means granted by Washington State Laws Regulating Private Security Guards Chapter 18.170 RCW/ Washington Administrative Code for Private Security Guards WAC 308 – 18/ Washington State Criminal Code Title 9A. Observe and Report unauthorized activity determined by Client to Client and or Client representative, Stephen Group International management staff and local law enforcement agencies if determined necessary by statute or Client request.

Client will pay Stephen Group International overtime rates equal to one and one – half (1.5) times above for any over time, supervision and training time requested or required by Client, arising from abnormally severe weather conditions, natural disasters or acts of God, or resulting from the special needs of clients operation. Client will pay additional late fee of 20% of total invoice if full payment is not received within 15 days of completion of service.

Stephen Group International is not an insurer of the Clients risks and exposure. Stephen Group International makes no guarantee that the no loss will occur or that the services provided will prevent events or occurrences that the services is designed to help detect or avert. Stephen Group International will be not be held liable for negligence on the part of Independent contractors to Client or a third party.

These terms and conditions are limited to the terms and conditions located on this document

AGREED: (Client Name): The Salvation Army / Bremerton Corps, Bremerton WA.

Client Signature and Date: Jonathan P. Harvey / 3/7/19

Stephen Group International representative Signature and Date: JACOB A. STEPHEN 02/12/2019

### Addendum

This Addendum supplements the contract between Stephen Group International and The Salvation Army for security services provided in Bremerton, Washington.

1. The following sentence of the contract shall be deleted "Stephen Group International will not be liable for negligence on the part of independent contractors to Client or a third party."

2. The Parties agree to the following mutual indemnification language:

"Each Party (the "Indemnifying Party") shall indemnify, hold harmless, and, at the request of the other Party, defend the other Party (the "Indemnified Party") from and against any and all claims, losses, liabilities, penalties, costs, and expenses, including reasonable attorneys' fees, established by judgment, alternative-resolution award, or determination of any administrative or regulatory body asserting authority over either Party or the subject matter of this Agreement, arising from (a) any material breach of any provision of this Agreement or (b) the negligence or willful misconduct in the performance of obligations hereunder by the Indemnifying Party or any employee, agent, or other representative of the Indemnifying Party."

3. Each Party agrees, represents, and warrants to the other that it will abide by any and all laws, regulations, or other legal requirements applicable to it performing this Agreement. Each Party will notify the other within five days if it becomes subject to an investigation regarding its compliance with any laws, regulations, or other legal requirements applicable to its performance of services under this Agreement.

4. Stephen Group International shall obtain and maintain throughout the term of this Agreement policies of insurance as required by law and described more particularly below:

- a. Commercial General Liability Insurance; said policy shall be written with limits no less than \$1,000,000 per occurrence and \$2,000,000 general aggregate and said policy shall endorse TSA as additional insured.
- b. Business Automobile Liability Insurance; said policy shall be written with a combined single limit no less than \$1,000,000, and said policy endorse TSA as additional insured.
- c. Worker's Compensation Insurance shall be written with limits in conformity with the laws of the state in which services are performed.

THE SALVATION ARMY  
NORTHWEST DIVISION  
INTERIM FINANCE COUNCIL

MAR 07 2019

Approved \_\_\_\_\_ Not Approved \_\_\_\_\_  
Reviewed \_\_\_\_\_ Recommend \_\_\_\_\_  
Signed \_\_\_\_\_

## **ATTACHMENT B**

### **CONTRACT BUDGET**

Budget Item	Budget Amount	Contractor In-Kind
Trained Security Guard	\$30,000	\$ 0
Case Manager (Salary & Benefits)	\$38,830	\$25,000*
Phone and Internet Service, office supplies and equipment	\$3,700	\$ 0
Office Space	\$ 0	NA
Total Budget	\$ 72,530	\$ 25,000

\*Through fund from Medina Grant Agreement for Kitsap Connect

ATTACHMENT C

**AMENDMENT NO. 3 TO SERVICES REIMBURSEMENT AGREEMENT  
BETWEEN CITY OF BREMERTON AND KITSAP PUBLIC HEALTH DISTRICT**

THIS AMENDMENT NO. 3 to the Services Reimbursement Agreement ("Agreement") entered March 6, 2017, between the City of Bremerton and Kitsap Public Health District, referred to collectively as the "Parties," for reimbursement of expenses for security services, is based upon the following recital of facts:

WHEREAS, the current Agreement expires December 31, 2019; and

WHEREAS, the Parties desire to extend the current term and reimbursement provisions of the Agreement; and

WHEREAS, the Agreement requires modification to be made by written instrument signed by both Parties;

**NOW THEREFORE**, the Parties hereby agree:

1. Section II of the Agreement, "Term," is hereby amended to extend the expiration date of the Agreement to December 31, 2020.


2. Section III of the Agreement, "Reimbursement," is hereby amended to increase the reimbursement to an amount not to exceed a total amount of One-hundred Twenty thousand dollars and 00/100 (\$120,000.00), including the \$90,000 already paid to reimburse for services in 2019, 2018, and in 2017.

3. All other terms of the Agreement as amended shall remain in full force and effect.

**IN WITNESS THEREOF**, the Parties hereto have executed this Amendment No. 3 as of the date and year last written below.

**KITSAP PUBLIC HEALTH DISTRICT**

**CITY OF BREMERTON**

By:   
Its: KEITH GREUTER  
ADMINISTRATOR

By:   
Its: Greg Wheeler  
Mayor

DATE: 2/7/2020

DATE: 2/14/2020

APPROVED AS TO FORM:

ATTEST:

  
ROGER A. LUBOVICH, City Attorney

  
ANGELA HOOVER, City Clerk

## **ATTACHMENT D**

### **STATEMENT OF CONFIDENTIALITY**

As a contractor of the Salvation Army, I understand and agree to follow these principles of confidentiality:

To conduct myself in a manner that assures client confidentiality and ensures compliance with regard to “protected health information” (PHI) and “electronic protected health information” (EPHI).

Not to handle, seek, or inquire about PHI or EPHI.

To hold in confidence all identifying information about any potential, current, or former client utilizing the Kitsap Connect Program I may encounter.

---

Employee/Intern/Volunteer/Contractor Signature

---

Date

---

Supervisor/Program Manager Signature

---

Date

## **ATTACHMENT E HIPAA BUSINESS ASSOCIATE AGREEMENT**

This Agreement (“Agreement”) is entered into by and between the Kitsap Public Health District (“Covered Entity”) and Salvation Army (“Business Associate”).

### **Section I: Purpose**

Performance of the Underlying Agreement may require Business Associate to use or disclose protected health information that is subject to provisions of the Health Insurance Portability and Accountability Act of 1996, set forth in 45 C.F.R. Parts 160 and 164 (commonly known as the “HIPAA Rules”). The purpose of this Agreement is to set forth the obligations of the Parties with regard to the way in which protected health information is created, used, disclosed, maintained, provided or received on behalf of Covered Entity by the Business Associate.

### **Section II. Definitions**

The following terms used in this Agreement shall have the same meaning as those terms in the HIPAA Rules: Breach, Data Aggregation, Designated Record Set, Disclosure, Health Care Operations, Individual, Minimum Necessary, Notice of Privacy Practices, Protected Health Information, Required by Law, Secretary, Security Incident, Subcontractor, Unsecured Health Information, and Use.

#### Specific Definitions:

1. Business Associate. “Business Associate” shall generally have the same meaning as the term “business associate” at 45 CFR 160.103, and in reference to this Agreement shall mean Salvation Army.
2. Covered Entity. “Covered Entity” shall generally have the same meaning as the term “covered entity” in 45 CFR 160.103, and in reference to the party in this Agreement shall mean the Kitsap Public Health District.
3. HIPAA Rules. “HIPAA Rules” shall mean the Privacy, Security, Breach Notification, and Enforcement Rules at 45 CFR Part 160 and 164.

### **Section III. Obligations and Activities of Business Associate**

Business Associate agrees to:

1. Not use or disclose protected health information other than as permitted or required by the Agreement or as required by law.
2. Use appropriate safeguards, and comply with Subpart C of 45 CFR, Part 164 with respect to protected electronic health information and to prevent use or disclosure of protected health information other than as provided for by this Agreement.

3. Report to Covered Entity any use or disclosure of protected health information not provided for by this Agreement of which it becomes aware, including breaches of unsecured protected health information as required by 45 CFR 164.410, and any security incident of which it becomes aware.

Business Associate agrees to promptly notify covered entity following the discovery of a Breach of unsecured PHI. A Breach is considered “discovered” as of the first day on which the Breach is known, or reasonably should have been known, to Business Associate or any employee, officer or agent of Business Associate, other than the individual committing the Breach. Any notice of a Security Incident or Breach of Unsecured PHI shall include the identification of each Individual whose PHI has been, or is reasonably believed by Business Associate to have been, accessed, acquired, or disclosed during such Security Incident or Breach as well as any other relevant information regarding the Security Incident or Breach.

4. In accordance with 45 CFR 164.502(e)(1)(ii) and 164.308(b)(2), if applicable, ensure that any subcontractors that create, receive, maintain, or transmit protected health information on behalf of the Business Associate agree to the same restrictions, conditions, and requirements that apply to the Business Associate with respect to such information.
5. Business Associate agrees to mitigate, to the extent possible, any harmful resulting from use or disclosure of PHI by Business Associate or its agents or subcontractors, in violation of the requirements of this Agreement.
6. Maintain and make available protected health information in a designated record set to the Covered Entity as necessary to satisfy Covered Entity’s obligations under 45 CFR 164.524.

If an Individual makes a request for access to the protected health information directly to Business Associate, business associate shall notify covered entity within three (3) business days of such request and shall cooperate with the Covered Entity to send the response to the Individual.

7. Make any amendment(s) to protected health information in a designated record set as directed or agreed to by the Covered Entity pursuant to 45 CFR 164.526, or take other measures as necessary to satisfy Covered Entity’s obligations under 45 CFR 164.526.

If an Individual makes a request for amendment to the protected health information directly to Business Associate, Business Associate shall notify Covered Entity within three (3) business days of such request and shall cooperate with the Covered Entity to send the response to the Individual.

8. Maintain and make available the information required to provide to provide an accounting of disclosures to the Covered Entity as necessary to satisfy Covered Entity’s obligations under 45 CFR 164.528.

If an Individual makes a request for accounting of disclosures directly to Business Associate, Business Associate shall notify Covered Entity within three (3) business days of such request and shall cooperate with the Covered Entity to send the response to the Individual.

9. To the extent the Business Associate is to carry out one or more of Covered Entity's obligations(s) under Subpart E of 45 CFR Part 164, comply with the requirements of Subpart E that apply to the Covered Entity in the performance of such obligation(s); and
10. Make its internal practices, books, and records available to the Secretary for purposes of determining compliance with the HIPAA Rules.

#### **Section IV. Permitted Uses and Disclosures by Business Associate**

1. Business Associate may only use or disclose protected health information as necessary to perform the services as outlined in the underlying agreement.
2. Business Associate is not authorized to use protected health information to de-identify the information in accordance with 45 CFR 164.514(a)-(c).
3. Business Associate may use or disclose protected health information as required by law.
4. Business Associate agrees to make uses and disclosures and requests for protected health information consistent with Covered Entity's minimum necessary policies and procedures.

Business Associate may not use or disclose protected health information in a manner that would violate Subpart E of 45 CFR Part 164 if done by Covered Entity except for the specific used and disclosures set forth below:

- a) Business Associate may disclose protected health information for the proper management and administration of Business Associate or to carry out the legal responsibilities of the Business Associate, provided the disclosures are required by law, or Business Associate obtains reasonable assurances from the person to whom the information is disclosed that the information will remain confidential and used or further disclosed only as required by law or for the purposes for which it was disclosed to the person, and the person notifies Business Associate of any instances of which it is aware in which the confidentiality of the information has been breached.
- b) Business Associate may provide data aggregation services relating to the health care operations of the Covered Entity.

#### **Section V. Termination**

1. Term. The Agreement shall terminate on December 31, 2020 or on the date Covered Entity terminates for cause, whichever is sooner.



2. Termination for Cause. Business Associate authorizes termination of the Agreement if Covered Entity determines Business Associate has violated a material term of the Agreement and has not cured the breach or ended the violation within the time specified by Covered Entity.
3. Obligations of Business Associate Upon Termination. Upon termination of this Agreement for any reason Business Associate shall return or destroy all protected health information received from Covered Entity, or created or received by Business Associate on behalf of Covered entity. This provision shall apply to protected health information that is in the possession of subcontractors or agents of Business Associate. Business Associate shall retain no copies of the protected health information.

In the event that Business Associate determines that returning or destroying the protected health information is infeasible, Business Associate shall provide to Covered Entity notification of the conditions that make return or destruction infeasible. Upon mutual agreement of the Parties that return or destruction of protected health information is infeasible, Business Associate shall extend the protections of this Agreement to such protected health information and limit further uses and disclosures of such protected health information to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains such protected health information.

4. The obligations of Business Associate under this section shall survive the termination of this Agreement.

## **Section VI. Miscellaneous**

1. A reference in this agreement to a section in the HIPAA Rules means the section as in effect or amended.
2. The Parties agree to take such action as is necessary to amend this Agreement from time to time as is necessary for compliance with the HIPAA Rules and any other applicable law.
3. Any ambiguity in this Agreement shall be resolved to permit compliance with the HIPAA Rules.

**CONTRACT AGREEMENT**  
**For Professional Services**  
**Between**  
**Jefferson County**  
**And**  
**Kitsap Public Health District**

THIS AGREEMENT for Professional Services is entered into between Jefferson County Public Health (JCPH), herein referred to as the "COUNTY" and Kitsap Public Health District (KPHD), herein referred to as the "CONTRACTOR".

**Section 1. PURPOSE:**

This Agreement is made and entered into in order to share Nurse Family Partnership (NFP) staff, training and supervision through the Department of Child Youth and Families (DCYF) Grant.

**Section 2. TERMS:**

This Agreement shall commence on July 1, 2019, and continue through June 30, 2020 unless terminated as provided herein. The agreement may be extended beyond June 30, 2020, upon mutual written consent of COUNTY and CONTRACTOR.

**Section 3. SCOPE OF AGREEMENT:**

Kitsap Public Health District (KPHD) will function as a Subcontractor to Jefferson County Public Health (JCPH) and provide Nurse Family Partnership services in Kitsap County as outlined herein in Exhibit A.

**Section 4. Contract Representatives:**

COUNTY and CONTRACTOR will each have a contract representative who will have responsibility to administer the Contract for that party. A party may change its representative upon providing written notice to the other party. The parties' representatives are as follows:

COUNTY Contract Representative

Vicki Kirkpatrick, Director  
Jefferson County Public Health  
615 Sheridan St.  
Port Townsend, WA 98368  
(360) 385-9400

CONTRACTOR Contract Representative

Yolanda Fong, Director of Community Health  
Kitsap Public Health District  
345 6<sup>TH</sup> Street, Suite 300  
Bremerton, WA 98337  
(360) 728-2275

**Section 5. COMPENSATION:**

CONTRACTOR will be reimbursed for all work performed under the terms of this Agreement. The total amount payable under this Agreement by COUNTY to CONTRACTOR, for this Agreement period shall not exceed \$194,718.64. A maximum of \$194,718.64 for the completion of the Scope of Work detailed in Exhibit A without express written amendment signed by both parties to this Agreement.

Performance payments shall not exceed \$9,593.43, and may be awarded for meeting milestones

set by the DCYF. CONTRACTOR may receive performance payments upon completion of milestones and authorization from DCYF. Payments will be released biannually based on milestones met.

- A. COUNTY agrees to pay CONTRACTOR \$194,718.64 for services for the NFP staff and training during the Agreement. Compensation will be based on invoices submitted by CONTRACTOR itemizing a detailed description of services performed per the agreed upon scope of work and budget. CONTRACTOR shall submit invoices to JCPH, 615 Sheridan St., Port Townsend, WA 98368; Attn: Finance Department, for payment of work actually completed to date.
- B. Invoices must be submitted by the 3rd Monday of the month for the previous month's expenses. COUNTY will review such invoices, and upon approval thereof, payment will be made to CONTRACTOR in the amount approved. Failure to submit timely invoices may result in a denial of reimbursement.
- C. Performance Payment Awards are based on completed milestones and will be issued upon authorization from DCYF. Once authorized, the COUNTY will pay CONTRACTOR the authorized amount.
- D. CONTRACTOR shall maintain backup documentation for all invoiced expenses and provide copies to COUNTY upon written request. Any indirect charges require the submittal of an indirect cost methodology and rate using 2 CFR, Part 225.
- E. COUNTY will make final payment of any balance due to CONTRACTOR promptly upon determining that i) CONTRACTOR has completed its obligations under this Agreement and ii) COUNTY can and does accept the work performed by CONTRACTOR.
- F. CONTRACTOR records and accounts pertaining to this Agreement are to be retained and available for inspection by representatives of COUNTY and state for a period of six (6) years after final payments. Copies shall be made available upon request.

#### **Section 6. INDEMNIFICATION:**

The parties shall indemnify, defend and hold harmless the officers, agents and employees of the other, from and against any and all claims, lawsuits, demands for money damages, losses or liability, or any portion thereof, including attorney's fees and costs, arising from any injury to person or persons (including the death or injury of the CONTRACTOR or damage to personal property) unless said death, injury, or damage was caused by the sole negligence or omissions of the other in the performance of services funded by this Agreement.

#### **Section 7. INSURANCE:**

CONTRACTOR shall obtain and keep in force during the terms of this Agreement, or as otherwise required:

- A. Commercial Automobile Liability Insurance providing bodily injury and property damage liability coverage for all owned and non-owned vehicles assigned to or used in the performance of the work for a combined single limit of not less than \$500,000 each occurrence. CONTRACTOR shall provide proof of insurance listed or referenced to the COUNTY c/o Contracts Manager at Jefferson County Public Health, 615 Sheridan St. Port Townsend, WA 98368 prior to commencing employment.

- B. Professional Liability Insurance providing \$2,000,000 per incident; \$4,000,000 Aggregate or, if such insurance is not available, general commercial insurance having the same coverage limits shall be obtained or provided by CONTRACTOR. It shall name Jefferson County Public Health as an additional insured, or, if such insurance is not available, general commercial insurance having the same coverage limits shall be obtained or provided by COUNTY.
- C. All employees or subcontractors of the CONTRACTOR who are required to be professionally licensed or certified by the State in the performance of services under this Agreement shall maintain individual professional liability insurance in the amount of not less than one million dollars (\$1,000,000). In no case shall such professional liability to third parties be limited in any way.
- D. CONTRACTOR shall participate in the Worker's Compensation and Employer's Liability Insurance Program as may be required by the State of Washington.
- E. It is agreed by the parties that insurers shall have no right of recovery or subrogation against the COUNTY (including its employees and other agents and agencies), it being the intention of the parties that the insurance policies listed above shall protect both parties and be primary coverage for any and all losses covered by the above- listed insurance policies. The parties further agree that any and all deductibles made part of the above-listed insurance policies shall be assumed by, paid for and at the risk of CONTRACTOR.
- F. Any insurance coverage for third party liability claims provided to COUNTY by a "Risk Pool" created pursuant to Ch. 48.62 RCW shall be non-contributory with respect to any policy of insurance the CONTRACTOR must provide to comply with this Agreement.
- G. If the proof of insurance or certificate indicating COUNTY is an "additional insured" to a policy obtained by CONTRACTOR refers to an endorsement (by number or name), but does not provide the full text of that endorsement, then it shall be the obligation of CONTRACTOR to obtain the full text of that endorsement and forward that full text to COUNTY.
- H. COUNTY may, upon CONTRACTOR'S failure to comply with all provisions of this Agreement relating to insurance, withhold payment or compensation that would otherwise be due to CONTRACTOR.

**Section 8. CONFIDENTIALITY:**

CONTRACTOR, its employees, subcontractors and their employees will maintain the confidentiality of all information provided by COUNTY or acquired in performance of the Agreement as required by HIPAA and other privacy laws. This Agreement, once executed by the parties, is and remains a Public Record subject to the provision of Ch. 42.56 RCW, the Public Records Act.

**Section 9. INDEPENDENCE:**

CONTRACTOR and COUNTY agree that CONTRACTOR is an independent CONTRACTOR with respect to the services provided pursuant to this Agreement. Nothing in this Agreement shall be considered to create the relationship of employer and employee between the parties hereto. CONTRACTOR shall not be entitled to any benefits afforded to COUNTY employees by virtue of the services provided under this Agreement. COUNTY shall not be responsible for withholding or otherwise deducting federal income tax or social security or for contributing to the state industrial

insurance program, otherwise assuming the duties of an employer with respect to employee.

**Section 10. REPORTING:**

CONTRACTOR will provide a monthly service, enrollment summary, and performance data report to COUNTY. CONTRACTOR will ensure screenings and assessments are entered into the NFP system. Timely, accurate data entry into the NFP system will provide data necessary for Performance Milestones evaluations by DOH and DEL pursuant to the JCPH Data Sharing Agreement with DOH attached hereto. CONTRACTOR will submit reports and enter data for performance payments monthly. Reports must be submitted by the 3<sup>rd</sup> Monday of the month for the previous month's work. The monthly report shall be submitted to Jefferson County Public Health in care of Vicki Kirkpatrick, Director, 615 Sheridan, Port Townsend, WA 98368. COUNTY will review such reports, and upon approval thereof, payment will be made to CONTRACTOR in the amount approved. Failure to submit timely reports may result in a denial of reimbursement.

CONTRACTOR will be notified by COUNTY if additional reports are needed for the purpose of providing requested information to DCYF.

**Section 11. ASSIGNMENTS AND SUBCONTRACTING:**

CONTRACTOR shall not sublet or assign any of the services covered by this Agreement without the express written consent of COUNTY.

**Section 12. TERMINATION:**

COUNTY reserves the right to terminate this Agreement, in whole or in part with a 30 day notice, in the event that expected or actual funding from any funding source is withdrawn, reduced or limited in any way after the effective date of this Agreement. In the event of termination under this clause, COUNTY shall be liable only for payment for services rendered prior to the effective date of termination.

This Agreement may also be terminated as provided below:

1. With a 30-day notice by the Board of County Commissioners for any reason, or
2. With a 30-day notice by the Board of County Commissioners for non-performance of the specific job duties in **Exhibit A**.
3. With a 30-day notice by the Contractor by voluntary resignation.

**Section 13. MODIFICATION:**

This Agreement may be modified at any time by written agreement signed by authorized representatives of both parties.

**Section 14. INTEGRATED AGREEMENT:**

This Agreement together with attachments or addenda represents the entire and integrated agreement between COUNTY and CONTRACTOR and supersedes all prior negotiations, representations, or agreements written or oral between the parties. This Agreement may be amended only by written instrument signed by both COUNTY and CONTRACTOR.



**Scope of Work – Exhibit A**

COUNTY will provide CONTRACTOR with a copy of the contract from DCYF. This Exhibit is to be used in conjunction with the contract between JCPH and DCYF.

1. Contractor will ensure adherence to NFP program model standards and adhere to home visiting model throughout the contract period.
2. Contractor will maintain approved, qualified staffing, and ensure home visitor staff adhere to training requirements established by NFP program and Home Visiting Service Account (HVSA). Personnel documentation including required training and background checks will also be maintained.
3. Contractor agrees to maintain an active caseload in accordance with NFP model requirements.
4. Contractor agrees to provide the number of home visits to families based on NFP program model requirements. If there are no model requirements, County will provide definition developed from Thrive Washington.
5. Perform individual assessments, screenings, and referrals and ensure compliance with the NFP model requirements and HVSA aligned measures.
6. Participate in local and regional early learning coalitions and other initiatives to support and build connections with local early childhood partners, early intervention, Early Supports for Infants and Toddlers, child welfare, economic support services, and the Community Wellness and Prevention Initiative.
7. Collect data for all families, adults and children enrolled in home visiting services, following model requirements. Data will be entered in NFP data system accurately and timely. Data will be secured and available only to those with a business need for the data. Contractor will comply with HIPAA laws and regulations.
8. Agree to provide data and to obtain consent pursuant to the Jefferson County Public Health data sharing agreement with DOH to share identifiable demographic information, enrollment, service utilization, program performance and staffing data, a copy of which is attached hereto.
9. Efforts to obtain parental consent from enrolled families for voluntary services and data sharing.
10. Participate with HVSA, DCYF and DCYF-specified evaluations.

New or Renewed Contracts for the Period of 01/01/2020 through 01/31/2020



KPHD Contract ID	KPHD Program	Contract Type	Contract Length	KPHB Approved	Contract Amount	Signed Date	Start Date	End Date	Client Contract ID
Active (4 contracts)									
Kitsap County									
ID: 2049	Assessment and Epidemiology, Siri Kushner	Contract for Services	Closed	01/07/20	\$48,146.00	01/27/20	01/01/20	12/31/20	KC-061-20
Description: 1/10 1% agreement: KPHD to provide monitoring and evaluation services for 2020 Mental Health, Chemical Dependency and Therapeutic Court Tax Programs.									
ID: 2045	Community Health, Keith Grellner	Agreement	Closed	12/17/19	\$380,108.00	01/27/20	01/01/20	12/31/20	
Description: 2020 Kitsap Connect collective impact project contract - Has 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 for high-frequency users of mental and medical health care and social services, EMS, ER, and LE resources in Bremerton and Central Kitsap..									
ID: 2053	PIC, John Kiess	Interlocal/Interagency	Closed	01/07/20	\$1,230,000.00	01/27/20	01/01/20	12/31/20	KC-529-19
Description: Clean Water Kitsap 2020. Agreement provides a mechanism for impementation of programs within the Clean Water Kitsap (CWK) partnership.									
.....									
United Business Machines									
ID: 2057	Information Technology, Judy Holt	Equipment Lease/Maintenance	Closed			01/29/20	02/01/20	01/31/22	
Description: Printer/copier maintenance agreement. \$0 monthly rate + \$0.02/ metered image.									
.....									



**Kitsap Public Health Board Meeting**  
**Date: March 03, 2020**

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

**Approvals:**

	Signature	Date
Administrator		2/24/2020
Finance Manager		02/24/2020

**Recommended Motion:** Approval

**Items:**

Type	Warrant/EFT Date	Beginning Warrant	Ending Warrant	Total Amount
Accounts Payable	1/6/2020	3794362	3794366	\$ 26,261.14
Accounts Payable	1/7/2020	DD102189	DD102197	2,513.86
Accounts Payable	1/13/2020	3794910	3794919	30,392.66
Accounts Payable	1/14/2020	DD102479	DD102496	12,417.89
Accounts Payable	1/21/2020	3795605	3795614	9,265.80
Accounts Payable - Vital Stats transfer	1/21/2020	R00087408	R00087408	71,316.00
Accounts Payable	1/22/2020	3795273	3795273	174.23
Accounts Payable	1/22/2020	DD102933	DD102950	44,306.81
Accounts Payable	1/23/2020	3795721	3795721	869.82
Accounts Payable	1/27/2020	3795878	3795890	48,988.15
Accounts Payable	1/28/2020	DD103147	DD103158	15,144.05
<b>Accounts Payable Total</b>				<b>\$ 261,650.41</b>
Payroll PERS Payment (December)	1/14/2020	N/A	N/A	112,332.81
Payroll Taxes	1/31/2020	N/A	N/A	144,288.40
Payroll Benefits	1/31/2020	3795970	3795995	112,543.17
Payroll Benefits	1/31/2020	DD103170	DD103170	9,688.43
Payroll	1/31/2020	N/A	N/A	388,499.12
<b>Payroll Total</b>				<b>\$ 767,351.93</b>
<b>Grand Total</b>				<b>\$ 1,029,002.34</b>

**Kitsap Public Health Board Action:**

- ☐ Approve
- ☐ Deny
- ☐ Table / Continue

	Signature	Date
Kitsap Public Health Board Chair		

Page  
Date

- 01/06/2

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

Page 7  
Date 01/06/20

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	325550	BAZZELL, RICHARD		1571279	001	102189	PT	01/07/20	824.18
Warrant 102189									
total									824.18
	215766	EVANS, ERIC		1571280	001	102190	PT	01/07/20	73.08
Warrant 102190									
total									73.08
	410696	GRIEGO, YANEISY		1571282	001	102191	PT	01/07/20	25.75
Warrant 102191									
total									25.75
	225229	HOLT, KAREN		1571285	001	102192	PT	01/07/20	26.80
Warrant 102192									
total									26.80
	416794	JEFFERSON COUNTY FARMERS		1571312	001	102193	PT	01/07/20	904.00
Warrant 102193									
total									904.00
	427148	ONARHEIM, CARIN E.		1571306	001	102194	PT	01/07/20	95.15
Warrant 102194									
total									95.15
	416795	PORT ANGELES FARMERS MARK		1571314	001	102195	PT	01/07/20	512.00
Warrant 102195									
total									512.00
	10993	TURNER, DENISE		1571307	001	102196	PT	01/07/20	30.45
Warrant 102196									
total									30.45
	11598	ZIMNY, JAMES A.		1571311	001	102197	PT	01/07/20	22.45



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

Page  
Date

- E  
- 01/13/2

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 Di	401081	CITIESDIGITAL		1572308	001	3794910	PK	01/13/20	7,477.40
Warrant 3794910 total									7,477.40
	426734	CITY OF KIRKLAND		1572310	001	3794911	PK	01/13/20	6,575.00
Warrant 3794911 total									6,575.00
	21425	ENDURIS WASHINGTON		1572233	001	3794912	PK	01/13/20	250.00
Warrant 3794912 total									250.00
	339396	GIUNTOLI, PAUL		1572073	001	3794913	PK	01/13/20	17.40
Warrant 3794913 total									17.40
	10699	KITSAP COUNTY INFORMATION		1572138	001	3794914	PK	01/13/20	1,366.23
Warrant 3794914 total									1,366.23
	8833	NACCHO		1572404	001	3794915	PK	01/13/20	1,120.00
Warrant 3794915 total									1,120.00
	423515	STAPLES ADVANTAGE (PO BOX		1572145	001	3794916	PK	01/13/20	96.70
Warrant 3794916 total									96.70
	227279	TREBRON COMPANY INC		1572312	001	3794917	PK	01/13/20	6,558.53
Warrant 3794917 total									6,558.53
	327504	US BANK (JUNIOR DIST	ONL	1572151	001	3794918	PK	01/13/20	1,267.90
	327504	US BANK (JUNIOR DIST	ONL	1572152	001	3794918	PK	01/13/20	1,126.37
	327504	US BANK (JUNIOR DIST	ONL	1572159	001	3794918	PK	01/13/20	395.21

Page  
Date

01/13/2

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

Page  
Date

- 21  
- 01/13/20

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	413333	ADER, SAM A		1572058	001	102479	PT	01/14/20	116.58
Warrant 102479 total									116.58
	294940	ANDERSON, AMY C		1572055	001	102480	PT	01/14/20	7.31
Warrant 102480 total									7.31
	419857	BELL, GUS J		1572062	001	102481	PT	01/14/20	122.50
Warrant 102481 total									122.50
	407981	BERGER, ANGIE C		1572275	001	102482	PT	01/14/20	82.84
Warrant 102482 total									82.84
	226171	BROWN, STEVEN		1572070	001	102483	PT	01/14/20	252.88
Warrant 102483 total									252.88
	409418	BURCHETT, BRIAN D		1572071	001	102484	PT	01/14/20	63.86
Warrant 102484 total									63.86
	412198	HAMEL PATRICK B		1572077	001	102485	PT	01/14/20	130.02
Warrant 102485 total									130.02
	359597	JONES, KIMBERLY D.		1572079	001	102486	PT	01/14/20	584.64
Warrant 102486 total									584.64
	17216	KNOOP, MELINA		1572080	001	102487	PT	01/14/20	30.16

- 22  
- 01/13/20

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Page  
Date

- 23  
- 01/13/20

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Page - 6  
Date - 01/21/2

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Page 7  
Date 01/21/2

<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>
	387936	WINCO FOODS LLC		1573323	001	3795614	PK	01/21/20	<u>2,000.00</u>
Warrant total	3795614								2,000.00
Department total	95969								<u>9,265.80</u>



# Kitsap County Treasurer's Office

## Cash Transmittal

### Transfer Receipt #R00087408

Approved: 1/21/2020

GL Date: 1/21/2020

Total Amount: \$0.00

#### Request Details

<b>Request ID</b>	88411
<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			(\$71,316.00)	2nd QTR 2019 VITAL STATISTICS FEE TRN
Death Investigate Suspense Fund	82584	2370			\$51,036.00	Death invest. acct
Death Investigate Suspense Fund	82584	2371			\$20,280.00	Vital records

Page  
Date

01/21/2

<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>
00969 Kitsap Public Health D1	95969 430758	DUREN, ASHLEY		1572510	001	3795273	PK	01/22/20	174.23
<b>Warrant 3795273 total</b>									174.23
<b>Department 95969 total</b>									174.23

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

Page - 26  
Date - 01/21/20

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		1572502	001	102933	PT	01/22/20	25.98
Warrant 102933 total									25.98
	325550	BAZZELL, RICHARD		1572507	001	102934	PT	01/22/20	371.20
Warrant 102934 total									371.20
	22635	CATHOLIC HOUSING SERVICES		1573047	001	102935	PT	01/22/20	375.00
Warrant 102935 total									375.00
	279396	DAVE PURCHASE PROJECT/NAS		1572584	001	102936	PT	01/22/20	26.39
Warrant 102936 total									26.39
	422623	FINE, GEORGE F.		1573533	001	102937	PT	01/22/20	173.63
Warrant 102937 total									173.63
	10940	GRELLNER, KEITH		1572511	001	102938	PT	01/22/20	22.49
Warrant 102938 total									22.49
	200487	JEFFERSON COUNTY HEALTH/H		1572519	001	102939	PT	01/22/20	3,970.25
Warrant 102939 total									3,970.25
	200487	JEFFERSON COUNTY HEALTH/H		1572520	001	102940	PT	01/22/20	3,686.22
Warrant 102940 total									3,686.22
	285101	LYTLE, ROSS		1572543	001	102941	PT	01/22/20	53.36

Page - 27  
Date - 01/21/20

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

Page - 28  
Date - 01/21/20

Department 95969

Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
total									22.62

427147	WINTERS, CHRISTOPHER M.		1572516	001		102950	PT	01/22/20	420.50
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Warrant 102950  
total

420.50

Department 95969  
total

44,306.81



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

Page 1  
Date 01/23/2

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	423172	EMERALD CITY GRAPHICS		1574980	001	3795721	PK	01/23/20	468.70
	423172	EMERALD CITY GRAPHICS		1574981	001	3795721	PK	01/23/20	401.12
Warrant 3795721 total									869.82
Department 95969 total									869.82

2 Checks  
Re-issued

Page  
Date

1  
01/27/2

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

Page  
Date

1  
01/27/2

Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
	425365	MASTERS, SPENCER R.		1574432	001	3795878	PK	01/27/20	522.00
Warrant 3795878 total									522.00
	231611	MICROSOFT SERVICES PO BOX		1574811	001	3795879	PK	01/27/20	8.72
Warrant 3795879 total									8.72
	414197	NEW WEST TECHNOLOGIES		1574434	001	3795880	PK	01/27/20	572.25
Warrant 3795880 total									572.25
	393428	QUEST DIAGNOSTICS		1574535	001	3795881	PK	01/27/20	180.72
Warrant 3795881 total									180.72
	425127	SIENA HOLDINGS LLC		1574436	001	3795882	PK	01/27/20	704.00
Warrant 3795882 total									704.00
	425118	THOMAS CONSULTANTS, INC.		1574812	001	3795883	PK	01/27/20	4,977.43
Warrant 3795883 total									4,977.43
	424353	TOYOTA FINANCIAL SERVICES		1574445	001	3795884	PK	01/27/20	319.68
Warrant 3795884 total									319.68
	268891	VERIZON WIRELESS - PO BOX		1574462	001	3795885	PK	01/27/20	2,160.93
	268891	VERIZON WIRELESS - PO BOX		1574467	001	3795885	PK	01/27/20	2,580.41
Warrant 3795885 total									4,741.34
	376565	WA HEALTH CARE AUTHORITY		1575045	001	3795886	PK	01/27/20	1,595.58

Page  
Date

1  
01/27/2

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

Page - 15  
Date - 01/27/20

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,		1574477	001	103147	PT	01/28/20	1,041.15
Warrant 103147 total									1,041.15
	215766	EVANS, ERIC		1574382	001	103148	PT	01/28/20	26.10
Warrant 103148 total									26.10
	10476	FEDEX (PO BOX 371461 PITT		1574809	001	103149	PT	01/28/20	26.56
Warrant 103149 total									26.56
	252336	KIESS, JOHN F		1574383	001	103150	PT	01/28/20	34.50
Warrant 103150 total									34.50
	422629	KINDSCHY, BRANDON J.		1574386	001	103151	PT	01/28/20	24.36
Warrant 103151 total									24.36
	430757	NICHOLS, ELIZABETH K		1574387	001	103152	PT	01/28/20	60.32
Warrant 103152 total									60.32
	265867	PENINSULA COMMUNITY HEALT		1574544	001	103153	PT	01/28/20	10,414.75
Warrant 103153 total									10,414.75
	10979	QUAYLE, TIM		1574397	001	103154	PT	01/28/20	90.85
Warrant 103154 total									90.85
	397857	SPECTRA LABORATORIES - KI		1574439	001	103155	PT	01/28/20	3,175.00

Page - 16  
Date - 01/27/20

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09200

Account Ledger Inquiry

From Date/Period 01/01/20

Thru Date/Period 01/14/20

Ledger Type. . . AA

Subledger. . . . \*

Account. . . . . 95969.2315  
**ACCRUED EMPLOYEE BENEFITS**

Skip to Doc/Type . . . . .

Y-T-D Period End : . . . . . 3,231.45-

Cumul Period End : . . . . . 115,564.26-

**Additional Selections Exist**

O	DT	Document	Date	Explanation/Alpha	Debit	Credit	P
	U1	369708	01/14/20	DAILY CASH TRANSMI	91,677.42		P
	U1	369708	01/14/20	DAILY CASH TRANSMI	20,655.39		P
					112,332.81		
Ledger Total					112,332.81		
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 01/01/20

Thru Date/Period 02/29/20

Ledger Type. . . AA

Subledger. . . . \*

Account. . . . . 95969.2317

**ACCRUED TAXES**

Skip to Doc/Type . . . . .

Y-T-D Period End :

Cumul Period End :

**Additional Selections Exist**

0	DT	Document	Date	Explanation/Alpha	Debit	Credit	P
U1		370394	01/31/20	DAILY CASH TRANSMI	144,288.40		P

144,288.40

Ledger Total

144,288.40

Unposted Total

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



Page 1  
Date 01/27/2

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Page - 1  
Date - 01/27/2

Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
Warrant 3795979 total	376566	WA HEALTH CARE AUTHORITY-		1576027	001	3795979	PK	01/31/20	3,808.71
									3,808.71
Warrant 3795980 total	376567	WA HEALTH CARE AUTHORITY-		1576028	001	3795980	PK	01/31/20	10,710.59
									10,710.59
Warrant 3795981 total	6779	WA STATE LABOR & IND INS		1575953	001	3795981	PK	01/31/20	3,172.81
									3,172.81
Warrant 3795982 total	6837	WA STATE TREASURER		1575974	001	3795982	PK	01/31/20	8,732.96
									8,732.96
Warrant 3795983 total	383133	WASHINGTON STATE TREASURE		1576030	001	3795983	PK	01/31/20	3,156.22
									3,156.22
Warrant 3795984 total	426141	WASHINGTON STATE TREASURE		1576050	001	3795984	PK	01/31/20	5,305.58
									5,305.58
Warrant 3795985 total	426137	WCIF FIRST CHOICE HEALTH		1576046	001	3795985	PK	01/31/20	167.20
									167.20
Warrant 3795986 total	426140	WCIF METLIFE ACCIDENT		1576049	001	3795986	PK	01/31/20	212.80
									212.80
Warrant 3795987	426139	WCIF METLIFE CRITICAL		1576048	001	3795987	PK	01/31/20	188.25

Page  
Date

1  
01/27/2

[illegible]

Page  
Date

5  
01/27/20

[illegible]

Kitsap County  
Summary Payroll Register

Page - 41  
Date - 1/27/20  
Period - 01/31/20  
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
427227	ABAZI, ORNELA	173.36	5,017.00	1,474.40	5,017.00			4,024.55	9788816	N	
4563	ABNEY, BEVERLY M.	173.30	4,856.00	1,518.80	4,856.00			3,222.47	9788817	N	
278956	ACOSTA, NANCY M.	172.16	7,865.76	1,851.02	7,865.76			4,706.95	9788818	N	
413193	ADER, SAM A.	173.36	4,535.00	1,411.68	4,535.00			3,000.25	9788819	N	
407901	ADHIKARI, ANISH	173.35	6,830.00	1,322.00	6,830.00			4,677.65	9788820	N	
419470	ANDERSON, AMY C.	173.35	5,372.00	1,172.64	5,372.00			3,553.16	9788821	N	
215189	BANIGAN, LESLIE B.	173.31	6,735.00	1,309.63	6,735.00			4,745.72	9788822	N	
328436	BAZZELL, RICHARD L.	173.31	6,735.00	1,309.63	6,735.00			4,656.01	9788824	N	
419805	BELL, GUS J.	173.31	6,839.00	1,767.24	6,839.00			4,614.43	9788825	N	
407902	BERGER, ANGELINE C.	173.31	4,227.00	1,337.28	4,227.00			3,151.16	9788826	N	
404611	BIERMAN, DANA J.	155.99	5,726.51	1,263.77	5,726.51			4,302.92	9788827	N	
426250	BORJA, WINDIE R.	173.35	3,571.00	1,286.27	3,571.00			2,746.13	9788829	N	
2058	BOYSEN-KNAPP, KAREN	138.67	5,407.00	2,139.85	5,407.00			3,134.70	9788830	N	
245475	BROWER, JANET L.	88.00	4,122.80	546.38	4,122.80			3,078.77	9788831	N	
271677	BROWN, STEVEN J.	173.31	6,735.00	1,309.63	6,735.00			4,169.76	9788832	N	
409212	BURCHETT, BRIAN D.	173.32	4,113.00	968.51	4,113.00			3,058.86	9788833	N	
411387	CHANG, MARGO W.	173.35	3,434.00	880.17	3,434.00			2,695.85	9788834	N	
400655	CIULLA, LAURA M.	173.32	7,002.00	1,544.37	7,002.00			4,797.96	9788835	N	
246639	DALTON, MELANIE A.	184.53	7,818.54	36.76	7,818.54			6,615.97	9788836	N	
430735	DUREN, ASHLEY L.	173.32	4,333.00	1,435.20	4,333.00			3,272.61	9788837	N	
223648	EAKES, DEANNA L.	173.33	5,407.00	1,136.86	5,407.00			3,578.51	9788838	N	
4565	EVANS, ERIC V.	173.34	8,785.00	2,933.09	8,785.00			2,754.27	9788839	N	
340919	EVANS, KELLY A.	173.31	5,948.00	1,595.51	5,948.00			4,227.24	9788840	N	
421693	FINE, GEORGE F.	86.68	1,926.00	1,059.66	1,926.00			1,503.14	9788842	N	
321284	FISK, APRIL K.	173.33	6,245.00	2,602.64	6,245.00			3,756.90	9788843	N	
356883	FONG, YOLANDA N.	173.32	9,835.00	2,582.49	9,835.00			6,964.84	9788844	N	
337331	GIUNTOLI, PAUL A.	173.31	6,735.00	1,697.90	6,735.00			3,970.94	9788845	N	
401905	GONZALEZ, ANNA K.	173.36	6,208.00	2,603.82	6,208.00			4,667.71	9788846	N	
1264	GRELLNER, KEITH J.	173.32	11,883.00	2,119.13	11,883.00			8,369.74	9788847	N	
421427	GRESS, NICOLE R.	173.33	3,451.00	1,841.53	3,451.00			2,618.77	9788848	N	
410072	GRIEGO, YANEISY	155.99	3,410.00	1,186.07	3,410.00			2,607.85	9788849	N	
355732	GUIDRY, JESSICA F.	173.32	8,120.00	2,846.57	8,120.00			5,677.61	9788850	N	
356336	GUZMAN, DAMARYS L.	173.35	4,294.00	1,821.55	4,294.00			2,848.30	9788851	N	
412171	HAMEL, PATRICK B.	173.31	6,078.00	1,662.23	6,078.00			4,062.07	9788852	N	
427228	HELVIK, BRITTANY M.	173.31	3,130.00	840.63	3,130.00			2,479.19	9788853	N	
4579	HOLDCROFT, GRANT A.	173.32	8,120.00	1,878.09	8,120.00			4,593.03	9788854	N	
270783	HOLDCROFT, JODIE ST	173.31	6,735.00	1,697.90	6,735.00			3,597.46	9788855	N	
1041	HOLT, JUDITH A.	173.32	8,120.00	1,579.95	8,120.00			4,658.69	9788856	N	
2726	HOLT, KAREN L.	173.32	8,120.00	2,454.96	8,120.00			5,285.44	9788857	N	
306605	HUGHES, RACHEL J.	173.32	3,995.00	1,341.43	3,995.00			2,918.40	9788858	N	
409213	HUNTER, KARI L.	173.31	7,014.00	1,485.68	7,014.00			4,875.07	9788859	N	
295036	JAMESON, BETTY S.	173.34	4,174.00	1,410.38	4,174.00			3,138.44	9788860	N	
400651	JOHANSON, KRISTA M.	173.32	3,995.00	1,782.65	3,995.00			2,983.15	9788861	N	
421429	JOHNSON, RENEE K.	173.31	5,513.00	1,250.34	5,513.00			3,993.29	9788862	N	
358933	JONES, KIMBERLY D.	173.31	6,735.00	1,309.63	6,735.00			4,620.91	9788863	N	
393427	KATULA, DAYNA R.	173.35	6,362.00	2,220.24	6,362.00			3,730.25	9788864	N	
418812	KELLUM, LYNDSY B.	104.00	3,695.00	747.78	3,695.00			2,750.69	9788865	N	
245476	KENCH, DONALD C.	173.33	3,964.00	2,065.38	3,964.00			2,709.08	9788866	N	
250913	KIESS, JOHN F.	173.32	10,185.00	3,059.61	10,185.00			6,967.26	9788867	N	

Kitsap County  
Summary Payroll Register

Page - 42  
Date - 1/27/20  
Period - 01/31/20  
Payroll ID - 620

Company - Home . . 00969  
Home Bus. Unit . . .

95969 Kitsap Public Health District  
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
421430	KINDSCHY, BRANDON	J173.32	5,250.00	2,473.19	5,250.00			3,680.21	9788868	N
16125	KNOOP, MELINA V.	173.31	6,735.00	1,697.90	6,735.00			4,471.07	9788869	N
243184	KRUSE, CHARLES H.	173.35	6,830.00	2,281.14	6,830.00			4,401.10	9788870	N
327580	KUSHNER, SIRI E.	173.34	8,785.00	2,405.83	8,785.00			6,772.71	9788871	N
416539	LAIRD, MELISSA Y.	173.32	8,120.00	1,878.09	8,120.00			5,670.76	9788872	N
429748	LAU, ANDREW S.	173.35	5,138.00	1,506.79	5,138.00			3,851.08	9788873	N
285038	LYTLE, ROSS D.	173.31	6,735.00	2,073.76	6,735.00			4,371.67	9788874	N
388104	MAZUR, KARINA MARIA	173.35	6,882.00	1,717.03	6,882.00			4,619.93	9788875	N
421431	MCDOWELL, STACI M.	8.00	189.84	25.60	189.84			161.24	9788876	N
387088	MCKINNON, BRYAN M.	173.31	5,513.00	1,290.40	5,513.00			4,335.77	9788878	N
429377	MCNAMARA, NICOLE E.	158.40	4,240.25	980.37	4,240.25			3,410.17	9788879	N
279971	MOEN, ANNE M.	173.35	5,372.00	1,961.80	5,372.00			3,687.75	9788880	N
406607	MOONTREE, KAEA L.	173.30	4,778.00	1,443.30	4,778.00			3,477.42	9788881	N
324204	MORGAN, W. NEWTON	156.00	6,062.00	1,928.17	6,062.00			4,151.95	9788883	N
312378	MORRIS, DAWN M.	138.68	3,926.00	861.77	3,926.00			2,857.90	9788884	N
406005	MURRAY, KEISHA R.	138.65	4,014.00	590.50	4,014.00			3,086.37	9788885	N
295033	NGUYEN, LOAN T.	138.69	3,524.00	1,894.88	3,524.00			2,224.85	9788886	N
430367	NICHOLS, ELIZABETH	141.31	5,608.66	1,233.94	5,608.66			3,403.49	9788887	N
208456	NICOLAISEN, NIELS K	173.31	6,735.00	2,268.77	6,735.00			4,778.89	9788888	N
3128	NOBLE, GREGORIA A.	173.31	5,000.00	1,168.04	5,000.00			3,259.78	9788889	N
22459	NORTH, EDWIN	173.34	8,785.00	2,445.89	8,785.00			6,431.61	9788890	N
405301	NUNO, CRYSTAL M.	173.31	6,078.00	1,224.16	6,078.00			3,415.63	9788891	N
426938	ONARHEIM, CARIN E.	173.32	3,931.00	944.84	3,931.00			2,833.15	9788892	N
243679	OUTHWAITE, MINDI L.	121.34	5,027.00	1,210.80	5,027.00			3,460.55	9788893	N
419118	PANDINO, LINDA E.	173.36	4,405.00	1,394.77	4,405.00			3,289.41	9788894	N
229901	PHIPPS, BETH M.	173.31	8,067.00	1,482.93	8,067.00			5,034.13	9788895	N
394466	PREWITT, SUSANA C.	173.30	4,095.00	966.17	4,095.00			3,100.30	9788896	N
1214	QUAYLE, TIMOTHY P.	173.34	6,930.00	2,294.15	6,930.00			4,671.33	9788897	N
419860	QUIST-THERSON, NII	173.33	7,531.00	3,487.40	7,531.00			5,355.87	9788898	N
418444	RAMUNNO, PHILIP M.	173.35	5,665.00	1,558.70	5,665.00			4,238.28	9788899	N
324654	RHEA, SUSAN R.	173.32	3,995.00	1,341.43	3,995.00			2,887.59	9788900	N
267073	RIDGE, BETTI L.	173.31	6,884.00	1,717.29	6,884.00			4,680.46	9788901	N
404613	RORK, IAN M.	173.35	4,762.00	1,441.21	4,762.00			3,556.15	9788902	N
425553	SHUHLER, YANA	173.36	3,287.00	1,299.12	3,287.00			2,360.48	9788903	N
361388	SMITH, TERRI L.	173.33	7,831.00	1,840.50	7,831.00			5,430.10	9788904	N
427776	SOOTER, THADDEUS L.	173.31	5,948.00	2,563.99	5,948.00			4,317.84	9788905	N
347366	STEDMAN, KELSEY E.	173.33	7,044.00	1,433.97	7,044.00			4,621.54	9788906	N
423168	STEWART, TOBBI S.	173.32	5,250.00	536.23	5,250.00			4,106.61	9788907	N
1682	TURNER, DENISE M.	173.30	4,856.00	2,030.31	4,856.00			2,953.79	9788909	N
401072	TURNER, SUSAN E.	173.33	15,555.00	3,422.25	15,555.00			8,530.34	9788910	N
429750	ULACIA, NICHOLAS J.	173.32	3,917.00	1,331.29	3,917.00			2,872.86	9788911	N
426251	WAGNER, MARY K.	121.35	2,416.00	871.11	2,416.00			1,710.66	9788912	N
392243	WALTHER, SUSAN B.	173.33	6,382.00	2,093.20	6,382.00			4,196.24	9788913	N
14545	WELLBORN, BRIAN D.	130.00	2,973.00	1,135.65	2,973.00			1,797.64	9788914	N
397255	WENDT, JAN E.	173.31	6,839.00	2,308.64	6,839.00			5,031.28	9788915	N
431493	WINCHESTER, LAYKEN	142.32	3,205.83	848.50	3,205.83			2,473.97	9788916	N
426939	WINTERS, CHRISTOPHE	173.36	5,017.00	1,474.40	5,017.00			3,749.93	9788917	N
301566	YANDA, KERRIE L.	173.32	7,380.00	1,887.24	7,380.00			4,981.31	9788918	N
2908	ZIMNY, JAMES A.	173.33	6,382.00	1,617.65	6,382.00			4,601.84	9788919	N

063013

Kitsap County  
Summary Payroll RegisterPage = 43  
Date = 1/27/20  
Period = 01/31/20  
Payroll ID = 620Company - Home . . 00969 Kitsap Public Health District  
Home Bus. Unit . . 95969 Kitsap Public Health District

EMPLOYEE										
Number	Name	Hours	Wages	Vendor#	Gross Pay	Deductions	Taxes	Net Pay	Check Control	I Err C Msg
Total.		16173.53	569,332.19	158,583.99	569,332.19	79,211.87	101,621.20	388,499.12		