Kitsap Public Health District Consent Agenda April 6, 2021

KPHD Contract Number	Their Contract Number	Contractor and Agreement Name	Type of Agreement	Term of Agreement	Amount to District	Amount to Other Agency
1749 Amendment 20 (2153)	CLH18248	Washington State Department of Health <i>Consolidated Contract</i>	Amendment	01/01/2018- 12/31/2021	\$4,770,770	\$0
Response COVID-1	9, HIV Client Set	work for the following programs: COVID-19 Coor rvices HOPWA, Infectious Disease Client Service er; and increases funding by \$4,770,770 for a revis	s (IDCS) RŴ C.	ARES, Marijuan	a Prevention &	
2116 Amendment 2 (2150)	КС-546-20-В	Kitsap County CARES Relief Funding	Interlocal Agreement	03/01/2020- 06/30/2021	\$0	\$1,200,000
		,000 in funding to Kitsap County that the District unding for a total compensation of \$2,050,000.	does not expect t	to expend on it's	own operations	by the
2131 Amendment 1 (2151)	КС-474-20-А	Kitsap County Nurse Family Partnership	Interlocal Agreement	01/01/2021- 06/30/2021	\$38,217	\$0
Description: Amen compensation of \$5	•	nilies will be served from seven (7) to twenty (20)	families and add	ls \$38,217 in add	litional funding	for a total
2155	NA	Olympic Community of Health <i>COVID-19 Recovery Funding</i>	Grant	03/31/2021- 12/31/2021	\$75,000	\$0
Description: Olym	pic Community o	f Health has awarded KPHD \$75,000 to support C	OVID-19 recove	ery in the Olymp	ic region.	

KITSAP PUBLIC HEALTH DISTRICT 2018 – 2021 CONSOLIDATED CONTRACT

CONTRACT NUMBER: CLH18248

AMENDMENT NUMBER: 20

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

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

- 1. Exhibit A Statements of Work, attached and incorporated by this reference, are amended as follows:
 - Adds Statements of Work for the following programs:
 - Amends Statements of Work for the following programs:
 - COVID-19 Coordinated Response Effective July 1, 2020
 - Division of Emergency Preparedness & Response COVID-19 Effective January 20, 2020
 - HIV Client Services HOPWA Effective July 1, 2020
 - Infectious Disease Client Services (IDCS) RW CARES Effective January 20, 2020
 - Marijuana Prevention & Education Program Effective July 1, 2019
 - Office of Drinking Water Group A Program Effective January 1, 2018
 - Deletes Statements of Work for the following programs:
- 2. Exhibit B-20 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-19 Allocations as follows:

Increase of <u>\$4,770,770</u> for a revised maximum consideration of <u>\$20,055,953</u>.

- 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-20 Schedule of Federal Awards, attached and incorporated by this reference, amends and replaces Exhibit C-19.

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

2018-2021 CONSOLIDATED CONTRACT EXHIBIT A STATEMENTS OF WORK TABLE OF CONTENTS

DOH Program Name or Title:	COVID-19 Coordinated Response - Effective July 1, 2020	3
	Division of Emergency Preparedness & Response-COVID-19 - Effective January 20, 2020	
	HIV Client Services-HOPWA - Effective July 1, 2020	
ę	Infectious Disease Client Services (IDCS) RW CARES - Effective January 20, 2020	
DOH Program Name or Title:	Marijuana Prevention & Education Program - Effective July 1, 2019	33
ę	Office of Drinking Water Group A Program - Effective January 1, 2018	

Exhibit A Statement of Work Contract Term: 2018-2021

Funding Source

State Other

Federal Subrecipient

Federal *Contractor

DOH Program Name or Title: <u>COVID-19 Coordinated Response -</u> Effective July 1, 2020 Local Health Jurisdiction Name: Kitsap Public Health District

Federal Compliance

(check if applicable)

FFATA (Transparency Act)

Research & Development

Contract Number: CLH18248

Type of Payment

Fixed Price

Reimbursement

SOW Type: <u>Revision</u> **Revision** # (for this SOW) 2

Period of Performance: July 1, 2020 through December 31, 2021

Statement of Work Purpose: The purpose of this statement of work is to provide supplemental funding for the LHJ to ensure adequate culturally and linguistically responsive testing, investigation and contact tracing resources to limit the spread of COVID-19

NOTE: Pending execution of a new consolidated contract term or an extension to the 2018-2021 consolidated contracts which currently end December 31, 2021, DOH plans to continue the task activities and funding as noted in the task(s) below in a new or revised statement of work effective January 1, 2022.

Revision Purpose: The purpose of this revision is to extend the period of performance from June 30, 2021 to December 31, 2021; add funding and extend end date for Task 3 FFY21 COVID19 VACCINE SERVICES-CARES through December 31, 2021; add FFY20 ELC EDE LHJ ALLOCATION and FFY19 ELC COVID ED LHJ ALLOCATION funding and revise language for Tasks 1 and 2; add Task 4 and funding information for MASS VACCINATION FEMA 100% and add Program Specific Requirements and DOH program and fiscal contact information.

Chart of Accounts Program Name or Title	CFDA #	BARS	Master	Funding Period (Current	Change	Total				
			Revenue	Revenue	Index	(LHJ Use Only)		iex (LHJ Use (Consideration	Increase (+)	Consideration
		Code	Code	Start Date	End Date		Increase (1)					
BITV-COVID ED LHJ ALLOCATION-CARES	21.019	333.21.01	1897129V	07/01/20	12/30/21	1,461,780	0	1,461,780				
FEMA-75 COVID LHJ ALLOCATION	97.036	333.97.03	1897129W	07/01/20	12/30/20	0	0	0				
FFY21 COVID19 VACCINE SERVICES-CARES	93.268	333.96.26	74310209	07/01/20	12/31/21	42,016	1,022,214	1,064,230				
FFY20 ELC EDE LHJ ALLOCATION	93.323	333.93.32	1897120D	01/15/21	12/31/21	0	2,560,581	2,560,581				
FFY19 ELC COVID ED LHJ ALLOCATION	93.323	333.93.32	1897129G	01/01/21	12/31/21	0	1,145,035	1,145,035				
*MASS VACCINATION FEMA 100%	97.036	333.97.03	934V0200	01/21/21	04/20/21	0	0	0				
TOTALS						1,503,796	4,727,830	6,231,626				

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	e in public health emergency preparedness and response activitie		y include surveillance, epide	miology, laboratory capacit	ty, infection control,
mitigation	, communications and or other preparedness and response activ	ities for COVID-19.			
Examples	of key activities include:				
• Ii	ncident management for the response				
• T	esting				
• (Case Investigation/Contact Tracing				
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					$\frac{1}{2}$
Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
• (• S	Sustainable isolation and quarantine Care coordination Surge management Data reporting				
	funding provided by DOH for COVID response (federal Crisis C ds can be accessed. The total state funding consideration is for th				e fully utilized before
	he purpose of this agreement is to supplement existing funds for y capacity, infection control, mitigation, communications, comm				
DCHS CO	OVID-19 Response - Tasks 1 and 2				
1	Establish a budget plan and narrative to be submitted to the Department of Health (DOH) Contract Manager. DOH will send the "Budget narrative Template", "Budget Guidance" and any other applicable documents that may be identified. DOH does recognize the public health response goes beyond December 2020 2021 and authorizes local health jurisdictions the ability to maximize funding streams available to them by using short term funding first to have longer term funding available to continue to support the local health jurisdiction response activities beyond December 2020 2021 as applicable.		Submit the budget plan and narrative using the template provided.	Within 30 days of receiving any new award for DCHS COVID-19 Response tasks.	Reimbursement of actual costs incurred, not to exceed \$5,167,396 total. \$1,461,780 BITV- COVID ED LHJ ALLOCATION- CARES Funding (MI 1897129V)
2	 LHJ Active monitoring activities. In partnership with WA DOH <i>and neighboring Tribes</i>, the LHJ must ensure adequate culturally and linguistically responsive testing, investigation and contact tracing resources to limit the spread disease. LHJs must conduct the following activities in accordance with the guidance to be provided by DOH. 		Data collected and reported into DOH systems daily.	Enter performance metrics daily into DOH identified systems	\$2,560,581 FFY20 ELC EDE LHJ ALLOCATION Funding (MI 1897120D) \$1,145,035 FFY19 ELC COVID ED
	 a. Allocate enough funding to ensure the following Contact Tracing and Case Investigation Support: <i>Hire a minimum of 1.0 data entry FTE to assure</i> <i>system requirements for task 2.1.a.</i> i. Contact tracing Strive to maintain the capacity to surge a minimum of five (5) contact tracers for every 100,000 people in the jurisdiction, as needed, based on disease rates. DOH 		Enter all contact tracing data in CREST following guidance from-DOH.	Quarterly performance reporting updates	LHJ ALLOCATION Funding (MI 1897129G)

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	 centralized investigations will count towards this minimum. 2. Have staff that reflect the demographic makeup of the jurisdiction and who can provide culturally and linguistically competent and responsive services. In addition, or alternatively, enter into an 				
	agreement(s) with <i>Tribal</i> , community- based and/or culturally-specific organizations to provide such services. DOH centralized investigations will count towards this minimum.				
	 Ensure all contact tracing staff are trained in accordance with DOH investigative guidelines and data entry protocols. 				
	4. Coordinate with Tribal partners in conducting contact tracing for Tribal members.				
	 Follow up with 90% of contacts within two (2) days of positive lab reporting. This can be modified and adapted based on caseloads and current case investigation and contact tracing prioritization recommendations. 				
	 6. Ensure contact tracing and case investigations activities meet DOH case and Contact Tracing Metrics. (Metrics to be determined collaboratively by DOH, LHJs and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics. Strive to achieve DOH Case and Contact Tracing Metrics. (<u>https://www.doh.wa.gov/Portals/I/Documents</u> /1600/coronavirus/data-tables/COVID19- CaseInvestigationContractTracingReport.pdf) 7. Perform daily monitoring for symptoms 				
	 during quarantine period of contacts ii. Case investigation Strive to maintain the capacity to surge a minimum of five (5) case investigators and contact tracers for every 100,000 people in 		Enter all case investigation data in		

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	the jurisdiction, as needed, based on		WDRS-following		
	disease rates. DOH centralized		guidance from-DOH.		
	investigation will count toward this				
	minimum.				
	2. Enter all case investigation and outbreak				
	data in WDRS following DOH guidance.				
	a. Strive to enter all case investigation				
	and outbreak data into <i>CREST</i> as directed by DOH.				
	b. Ensure all staff designated to utilize				
	WDRS have access and are trained in				
	the system.				
	c. Include if new positive cases are tied				
	to a known existing positive case or				
	indicate community spread.				
	d. Conduct case investigation and				
	monitor outbreaks.				
	e. Coordinate with Tribal partners in				
	conducting case investigations for				
	tribal members.				
	Strive to achieve DOH Case and Contact Tracing Metrics.				
	(https://www.doh.wa.gov/Portals/1/Documents/				
	1600/coronavirus/data-tables/COVID19-				
	CaseInvestigationContractTracingReport.pdf)				
	3. Ensure contact tracing and case				
	investigation activities meet DOH Case				
	and Contact Tracing Metrics. (Metrics to				
	be determined collaboratively by DOH,				
	LHJs, and Tribes.) Work with DOH to				
	develop a corrective action plan if unable				
	to meet metrics.				
	b. Testing		Maintain a arment list f		
	i. Work with partners <i>and Tribes</i> to ensure		Maintain a current list of		
	testing is available to every person within the jurisdiction meeting current DOH criteria for		entities providing COVID-19 testing and at		
	testing and other local testing needs.		what volume. Provide		
	ii. Work with partners <i>and Tribes</i> to ensure		reports to DOH Contract		
	testing is provided in a culturally and		manager on testing		
	linguistically responsive manner with an		locations and volume as		
	emphasis on making testing available to		requested.		
	disproportionately impacted communities and				

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	 as a part of the jurisdiction's contact tracing strategy. iii. Maintain a current list of entities providing COVID-19 testing and at what volume. Provide reports to DOH on testing locations and volume as requested. 				
	 c. Surveillance FTE support at a minimum of .5 FTE Epidemiologist to support daily reporting needs below. i. Ensure all COVID positive lab test results from LHJ are entered in to WDRS by 1) entering data directly in to WDRS, 2) sending test results to DOH to enter, or 3) working with DOH and entities conducting tests to implement an electronic method for test result submission. ii. Maintain records of all COVID negative lab test resources permit or send test results to DOH. iii. Collaborate with Tribes to ensure Tribal entities with appropriate public health authority have read/write access to WDRS and CREST to ensure that all COVID lab results from their jurisdictions are entered in WDRS or shared with the LHJ or DOH for entry. 				
	d. Tribal Support. Ensure alignment of contact tracing and support for patients and family by coordinating with local tribes if a patient identified as American Indian/Alaska Native and/or a member of a WA tribe, <i>if patient providers permission to notify tribes</i> .		Quarterly performance updates related to culturally and linguistic competency and responsiveness, tribal support, infection		
	 e. Support Infection Prevention and control for highrisk populations Migrant and seasonal farmworker support. Partner with farmers, agriculture sector and farmworker service organizations to develop and execute plans for testing, quarantine and isolation, and social service needs for migrant and seasonal farmworkers. Congregate care facilities: In collaboration with the state licensing agency (DSHS), 		prevention and control for high-risk populations, community education and regional active monitoring activities. Performance update should include status of all projects listed.		

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	support infection prevention assessments, testing. Infection control and isolation and				
	quarantine protocols in congregate care				
	facilities.				
	iii. High risk businesses or community-based				
	operations. In collaboration with state				
	licensing agencies and Labor and Industries,				
	partner with food processing and manufacturing businesses to ensure adequate				
	practices to prevent COVID-19 exposure,				
	conduct testing and respond to outbreaks.				
	iv. Healthcare: Support infection prevention and				
	control assessments, testing, cohorting, and				
	isolation procedures. Provide educational				
	resources to a variety of healthcare setting types (e.g., nursing homes, hospitals, dental,				
	dialysis).				
	v. Non-healthcare settings that house vulnerable				
	populations: In collaboration with state				
	corrections agency (DOC) and other state				
	partners, support testing, infection control,				
	isolation and quarantine and social services and wraparound supports for individuals living				
	or temporarily residing in congregate living				
	settings, including detention centers, prisons,				
	jails, transition housing, homeless shelters,				
	and other vulnerable populations.				
	vi. Schools: In collaboration with OSPI and local				
	health jurisdictions, support infection prevention and control and outbreak response				
	in K-12 and university school settings.				
	f. Ensure adequate resources are directed towards				
	h28 housing facilities within communities, fishing				
	industries and long-term care facilities to prevent				
	and control disease transmission. Funds can be used to hire support staff, provide incentives or				
	used to hire support staff, provide incentives or facility-based funding for onsite infection				
	prevention efforts, etc.				
	g. Community education. Work with <i>Tribes and</i>				
	partners to provide culturally and linguistically				

responsive community outreach and education related to COVID-19. h. Establish sustainable isolation and quarantine				Amount
h Establish sustainable isolation and quarantine				
 measures. i. Have at least one (1) location identified and confirmed through contract/formal agreement that can support isolation and quarantine adequate to the population for your jurisdiction with the ability to expand; alternatively, establish with an adjacent jurisdiction a formal agreement to provide the isolation and quarantine capacity adequate to the population for your jurisdiction with the ability to expand. ii. Conduct at least one (1) exercise per year with the identified isolation and quarantine site to include a minimum of: confirmation of wrap around services (food service/delivery, laundry service, water/septic, garbage, ambulance service, cleaning/sanitation), facility intake and discharge procedures, transport procedures, and staffing. iii. Planning must incorporate transfer or receipt of isolation and quarantine patients to from adjacent jurisdictions or state facilities in the event of localized increased need. iv. Planning must incorporate triggers and coordination to request state isolation and quarantine support either through mobile teams or the state facility to include site identification 		Quarterly performance updates to include name, address and capacity of identified location that can support isolation and quarantine, date of exercise to be conducted and confirmation of appropriate planning and coordination as required.		
Ŭ	30, 2022 in new contract	term effective January 1, 20.	22. Any unspent funds may	v be carried forward.
Identify activity/activities to support COVID vaccine response in your community, using the examples below as a guideline. Example 1: Develop and implement communication strategies with health care providers, community, and/or other partners to help build vaccine confidence broadly and among groups anticipated to receive early vaccination, as well as dispel vaccine misinformation. Document and		Summary of the engagement strategies to be used with health care providers and other partners, and the locally identified population to be reached.	January 31, 2021 Annually	Reimbursement of actual costs incurred, not to exceed: \$42,016 \$1,064,230 FFY21 COVID19 VACCINE SERVICES-CARES
	 adequate to the population for your jurisdiction with the ability to expand; alternatively, establish with an adjacent jurisdiction a formal agreement to provide the isolation and quarantine capacity adequate to the population for your jurisdiction with the ability to expand. ii. Conduct at least one (1) exercise per year with the identified isolation and quarantine site to include a minimum of: confirmation of wrap around services (food service/delivery, laundry service, water/septic, garbage, ambulance service, cleaning/sanitation), facility intake and discharge procedures, transport procedures, and staffing. iii. Planning must incorporate transfer or receipt of isolation and quarantine patients to from adjacent jurisdictions or state facilities in the event of localized increased need. iv. Planning must incorporate triggers and coordination to request state isolation and quarantine support either through mobile teams or the state facility to include site identification and access Vaccine Services - Task 3 – will be extended through June . Example 1: Develop and implement communication strategies with health care providers, community, and/or other partners to help build vaccine confidence broadly and among groups anticipated to receive early vaccination, as well as dispel vaccine misinformation. Document and provide a plan that shows the communication strategies used 	 adequate to the population for your jurisdiction with the ability to expand; alternatively, establish with an adjacent jurisdiction a formal agreement to provide the isolation and quarantine capacity adequate to the population for your jurisdiction with the ability to expand. ii. Conduct at least one (1) exercise per year with the identified isolation and quarantine site to include a minimum of: confirmation of wrap around services (food service/delivery, laundry service, water/septic, garbage, ambulance service, cleaning/sanitation), facility intake and discharge procedures, transport procedures, and staffing. iii. Planning must incorporate transfer or receipt of isolation and quarantine patients to from adjacent jurisdictions or state facilities in the event of localized increased need. iv. Planning must incorporate triggers and coordination to request state isolation and quarantine support either through mobile teams or the state facility to include site identification and access Vaccine Services - Task 3 – will be extended through June 30, 2022 in new contract Identify activity/activities to support COVID vaccine response in your community, using the examples below as a guideline. Example 1: Develop and implement communication strategies with health care providers, community, and/or other partners to help build vaccine confidence broadly and among groups anticipated to receive early vaccination, as well as dispel vaccine misinformation. Document and 	 adequate to the population for your jurisdiction with the ability to expand; alternatively, establish with an adjacent jurisdiction a formal agreement to provide the isolation and quarantine capacity adequate to the population for your jurisdiction with the ability to expand. ii. Conduct at least one (1) exercise per year with the identified isolation and quarantine site to include a minimum of: confirmation of wrap around services (food service/delivery, laundry service, vater/septic, garbage, ambulance service, cleaning/sanitation), facility intake and discharge procedures, transport procedures, and staffing. iii. Planning must incorporate transfer or receipt of isolation and quarantine patients to from adjacent jurisdictions or state facilities in the event of localized increased need. iv. Planning must incorporate triggers and coordination to request state isolation and quarantine addiction and quarantine and coordination and access Vaccine Services - Task 3 – will be extended through June 30, 2022 in new contract term effective January 1, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20	adequate to the population for your jurisdiction with the ability to expand; alternatively, establish with an adjacent jurisdiction a formal agreement to provide the isolation and quarantine capacity adequate to the population for your jurisdiction with the ability to expand. ii. Conduct at least one (1) exercise per year with the identification isolation and quarantine site to include a minimum off; confirmation of wrap around services (food service/delivery, laundry service, vater/septic, garbage, ambulance service, cleaning/sanitation), facility intake and discharge procedures, transfort procedures, and staffing.quarantine isolation and quarantine isolation and quarantine durantine patients to form adjacent jurisdictions or state facilities in the event of localized increased need.quarantine isolation and quarantine support either through mobile teams or the state facility to include site identification and accesssummary of the ergeneent and the extended through June 30, 2022 in new contract term effective January 1, 2022. Any unspent funds may lidentify activity/activities to support COVID vaccine response in your community, using the examples below as a guideline.Summary of the ergeneent strategies to be used with health care providers, community, and/or other patients to formal among groups anticipated to receive entry vaccination, as well as dispel vaccine minformation. Document and provides a plan that shows the communication strategies usedSummary of the ergeneent strategies to be used with health care providers, community, and/or other patients to help build vaccine confidence broadly and among groups anticipated to receive entry vaccination, as well as dispel vaccine miniformation. Document and provides a plan that shows the communication strategies usedSummary of the ergeneent strategies t

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	with health care providers and other partners and the locally identified population anticipated to reach.				Funding (MI 74310209)
	Example 2: Engage in other vaccination planning activities such as partnership development, provider education, vaccination point of dispensing (POD) planning, tabletop exercises, engagement with communities, leaders, non-traditional provider, or vulnerable populations to develop strategies to ensure equitable access to vaccination services				
3.B	Implement the communication strategies or other activities, working with health care providers and other partners to reach the locally identified population, support providers in vaccination plans, and support equitable access to vaccination services.		Mid-term written report describing activity/activities and progress made to-date and strategies used (template to be provided)	March 31, 2021 Annually	
3.C	Catalog activities and conduct an evaluation of the strategies used		Final written report, showing the strategies used and the final progress of the reach (template to be provided)	June 30, 2021 -Annually	
Regional	Incident Management Team (IMT) Mass Vaccination Clinics	- Task 4			
	 *<u>NOTE</u>: Task 4 activities for Mass Vaccination Clinics in this statement of work are NOT CONSIDERED SUBRECIPIENT but are as a CONTRACTOR of DOH. DOH reimbursement provided for local mass vaccination clinic (see definition below) planning, implementation and operations in coordination between Unified Command and the Regional IMT to administer the vaccine as efficiently, quickly, equitably, and safely in all regions of Washington State. State Supported, Regionally Coordinated, Locally Implemented. Definition: Mass vaccination clinics defined as those outside of the usual healthcare delivery method such as pop- up clinics, mobile clinics, non- clinical facility (fairgrounds, arenas, etc.). 				*Reimbursement of eligible costs. MASS VACCINATION FEMA 100% Funding (MI 934V0200) (See Program Specific Requirements for Mass Vaccination Task 4 below)
	Leaders Intent about this work from DOH is included as an attachment.				

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<i>Guidance on vaccination protocols must be followed as provided by DOH and CDC.</i>				
<i>4.A</i>	Local health jurisdiction (LHJ) will coordinate planning and implementation of mass vaccination clinics/sites provided within the county(s) with a regional incident management team/organization as approved by DOH. Request for regional IMT should be submitted through the normal process through WebEOC. Local health jurisdiction is the coordinating agency for the mass vaccination plan within the county. Regional IMT will be under the delegation authority of DOH and they are to provide support and coordination for all efforts around vaccine planning, resource support and general guidance and information sharing in order to regionally coordinate efforts. Local jurisdictions will maintain all decisional authority around vaccination planning and execution within their jurisdiction/district. Provide any information as requested by the regional IMT.		Submit to DOH a mass vaccination plan including: type of site, site locations, throughput, considerations made to ensure equity to historically marginalized populations, and to the extent possible a regional map of sites/locations.	Within 30 days of contract amendment execution.	
<i>4.B</i>	 Funding for eligible Mass Vaccination activities are reimbursed on actual costs as outlined in the DOH guidance to provide the services and to carry out the mission. Funding will be dependent on full participation in the LHJ and IMT processes and all documentation will be required to be provided to fully close out funding requests by the end of the mission period of performance. Allowable costs include expenses such as facility rentals, staff to conduct planning, management, support and operation of the site, medical personnel for vaccinations, site security personnel, wrap around services for staff (meals, travel, lodging), equipment (which must be preapproved by IMT/DOH if it exceeds \$5,000 each), supplies for vaccinations and site operation. LHJs should provide narratives to help assist IMT and DOH finance know what expenditures were necessary to carry out the mission. 		Submit estimated budget for the mass vaccination plan. Monthly Cost Summary Spreadsheet to the IMT/IMO by the fifth of the following month.	Within 30 days of contract amendment execution. Monthly	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
4.C	<i>Vaccination data – will be maintained according to current state and federal requirements.</i>		Submission of vaccine use into WA IIS database within 24hrs of use.	Daily	
	Vaccine Registration Systems – If a local jurisdiction or region does not have a registration system(s) the include internet based, phone option and other methods to ensure equitable registration, the state PrepMod system and tools will be available for use.		Jurisdiction/Regions will ensure a fair and equitable process for registration of eligible Washingtonians across all available modalities.		
4.D	Regularly report on vaccinations sites and operational activities (number of vaccinations, personnel to operate the site, challenges, successes to share for learning across the public health system).		Provide monthly situation report to IMT/IMO on status of implementation of mass vaccination plan, or more frequently if that is the LHJ procedure. Sites operating for the time period, vaccines administered by site for the time period, estimated costs for the time period, any challenges/successes of note, including assistance requested.	Monthly	

<u>*For Information Only:</u>

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 <u>USASpending.gov</u> by DOH as required by P.L. 109-282.

Program Specific Requirements/Narrative

DCHS COVID-19 Response - Tasks 1 and 2

Restrictions on Funds: Indirects are NOT allowable for CARES funding from September 2, 2020 forward – LHJ can charge administrative activities as direct costs but not incur indirects from September 2, 2020 through December 30, 2020 for activities funded with CARES funds (COVID LOCAL CARES - COVID LHJ OFM ALLOCATION-CARES, BITV-COVID ED LHJ ALLOCATION-CARES, FEMA-75 COVID LHJ ALLOCATION)

o Since the federal guidance was not updated until September 2, 2020, DOH understands that indirects could be charged from March-August, 2020.

Payment: Upon approval of deliverables and receipt of an invoice voucher, DOH will reimburse for actual allowable costs incurred. Billings for services on a monthly fraction of the budget will not be accepted or approved.

Submission of Invoice Vouchers: The LHJ shall submit correct monthly A19-1A invoice vouchers for amounts billable under this statement of work to DOH by the 25th of the following month or on a frequency no less often than quarterly.

<u>Mass Vaccination – Task 4</u> <u>Program Manual, Handbook, Policy References</u> Emergency Response Plan (or equivalent) Medical Countermeasure/Mass Vaccination Plan

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

Non-mass vaccination efforts are not allowable through this funding stream. Duplication of billing (sending request for reimbursement) to entities outside of this agreement is prohibited. Indirect rates are not applicable to these funds.

Special References (RCWs, WACs, etc.) County Health Emergency Documentation if applicable

Monitoring Visits (frequency, type):

Occasional visits from DOH or IMT/IMO personnel for the purpose of monitoring and surveillance of mass vaccination activities may be expected.

Definitions

Mass vaccination clinic are those outside of the usual healthcare delivery methods such as pop-up clinics, mobile clinics, non-clinical facility clinics (i.e., fairgrounds, arenas, etc.).

Special Billing Requirements:

Monthly invoices must be submitted timely to the regional IMT/Organization for review/approval prior to submission to DOH for reimbursement. Contract (MI) Code: 934V0200 General Mass Vaccination BARS Revenue Code: 333.97.03 Mass Vaccination Reimbursement

Special Instructions:

The LHJ is considered a CONTRACTOR of DOH not a subrecipient for this portion of the statement of work. An allocation of funds is not provided as these FEMA funds are only available as reimbursement of costs associated with implementation of the mass vaccination plan.

Detailed documentation must be maintained as directed by the regional IMT/Organization and DOH to substantiate costs associated with these activities for submission to FEMA upon request by DOH.

Eligible costs from the timeframe of January 21, 2021 through April 20, 2021 include facility rentals, medical and support staff for planning, management, support, and operations; as well as wrap-around services for staff (i.e., meals, travel, lodging). Regular and overtime pay associated with this project is allowable for all staff working under this project and must be billed as a direct charge; timesheets are required documentation and must be available upon request by DOH. Indirect rates are not applicable to these funds. Eligible equipment includes facility infection control measures, personal protective equipment (PPE), storage equipment, coolers, freezers, temperature monitoring devices, portable vaccine units for transportation, supplies such as emergency medical supplies (for emergency medical care needs that may arise in the administration of the vaccine), containers for medical waste, as well as proper storage as needed for canisters of liquid nitrogen or dry ice. Eligible equipment purchase costs should not exceed \$5,000 per piece. Equipment over \$5,000 a piece must be preapproved by the IMT and should be leased rather than purchased. Any diversion from the list of pre-approved expenses will require a narrative on the purchase rationale and will be subject to IMT approval prior to reimbursement. Timesheets are required documentation for all activities related to this project. Staff time-in / time-out must be recorded, as well as a brief description of their activities. A general description of activities is acceptable for those working at the vaccine site; more detailed/specific description is required for those not working at the vaccine site.

DOH Program Contact Kasey Walker Alyssa Lavin, LHJ Contract Manager DOH, PHOCIS 1610 NE 150th St, Shoreline, WA 98155 kasey.walker@doh.wa.gov alyssa.lavin@doh.wa.gov / 360-236-3273

DOH BITV-COVID ED LHJ Allocation-CARES Fiscal Contact (Tasks 1 and 2)

Sheri Spezze DOH, Office of Program Financial Management PO Box 47840, Olympia, WA 98504-7841 Ph: 360-236-4447 / Fax: 360-664-2216 / sheri.spezze@doh.wa.gov

DOH ELC Allocation Fiscal Contact (Tasks 1 and 2)

Christie Durkin DOH, Office of Program Financial Management PO Box 47840, Olympia, WA 98504-7841 Ph: 360-236-4235 / christie.durkin@doh.wa.gov

DOH COVID19 Vaccine Services Program Contacts (Task 3)

Tawney Harper, MPA Deputy Director | Operations Manager Office of Immunization and Child Profile Department of Health PO Box 47843, Olympia WA 98504-7843 tawney.harper@doh.wa.gov / 360-236-3525

DOH General Mass Vaccination Program and Fiscal Contact (Task 4)

Patrick Plumb COVID FEMA Project Management Analyst Washington State Department of Health Office of Financial Services 111 Israel Road SE, Tumwater, WA 98501 patrick.plumb@doh.wa.gov / (360) 236-4291 Janice Baumgardt Financial Operations Manager Washington State Department of Health Office of Financial Services 111 Israel Road SE, Tumwater, WA 98501 janice.baumgardt@doh.wa.gov / (360) 236-4505

Misty Ellis, Project Manager

CDC Public Health Advisor

Department of Health

Office of Immunization and Child Profile

PO Box 47843, Olympia WA 98504-7843

misty.ellis@doh.wa.gov / 360-236-3675

Exhibit A, Statements of Work Revised as of January 15, 2021

Sonja Morris, Program Manager Enhanced Influenza and COVID-19 Response Office of Immunization and Child Profile Department of Health PO Box 47843, Olympia, WA 98504-7843 <u>sonja.morris@doh.wa.gov /</u> 360-236-3545

Exhibit A Statement of Work Contract Term: 2018-2021

 DOH Program Name or Title:
 Division of Emergency Preparedness & Response-COVID-19 - Effective January 20, 2020
 Local Health Jurisdiction Name: Kitsap Public Health District

Contract Number: CLH18248

SOW Type: <u>Revision</u> **Revision # (for this SOW)** 2

Period of Performance: January 20, 2020 through December 31, 2021

Funding Source	Federal Compliance	Type of Payment
Federal Subrecipient	(check if applicable)	Reimbursement
State Other	FFATA (Transparency Act) Research & Development	One-Time Distribution

Statement of Work Purpose: The purpose of this statement of work is to establish funding and tasks for LHJs to prevent, prepare for, and respond to the COVID-19 disease outbreak.

Revision Purpose: The purpose of this revision is to extend the period of performance from June 30, 2021 to December 31, 2021, extend the funding period for federal COVID-19 funds, and add report deliverables and due dates. The funding period end date for the state Disaster Response funds remains June 30, 2021.

NOTE: Pending execution of a new contract or an extension to the 2018-2021 consolidated contracts which currently end December 31, 2021, program plans to extend the period of performance and funding in this statement of work through March 15, 2022. Deliverable due dates after December 31, 2021 are referenced for informational purposes only and will be updated in a new or revised statement of work effective January 1, 2022.

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue	Master Index	Funding (LHJ Use		Current Consideration	Change None	Total Consideration
		Code	Code	Start Date	End Date		ivinc	
FFY20 CDC COVID-19 Crisis Resp LHJ-Tribe	93.354	333.93.35	31104102	01/20/20	12/31/21	340,263	0	340,263
FY20/21 COVID-19 Disaster Response	N/A	334.04.92	934A0101	01/20/20	06/30/21	309,737	0	309,737
TOTALS						650,000	0	650,000

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Federal Funds		Activity report(s) on template	June 30, 2020	Reimbursement for actual
	Participate in public health emergency preparedness		to be provided DOH.	December 31, 2020	costs not to exceed total
	and response activities for COVID-19. This may			March 15, 2021	funding consideration
	include surveillance, epidemiology, laboratory			June 30, 2021	amount
	capacity, infection control, mitigation,			December 31, 2021	
	communications, and or other preparedness and			March 15, 2022	Note: Per Federal
	response activities for COVID-19.				funding requirements,
				Frequency and due	prior approval from
	Activities must address one or more of the following			dates of reports may	DOH is required for
	six domains:			change based on	reimbursement of
				federal requirements.	expenses incurred on or

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	 Incident management for early crisis response Jurisdictional recovery Information management Countermeasures and mitigation Surge management Biosurveillance DOH will provide additional guidance and technical assistance. Note: The total federal funding consideration is for the period of January 20, 2020 through March 15, 2021 2022. Any unspent funds, tasks and deliverables with due dates after December 31, 2021 will be included in a new statement of work under the new consolidated contract term beginning January 1, 2022.			DOH will notify LHJ of any changes via email. A final activity report is required prior to DOH releasing the final amount of funding.	after January 20, 2020 through March 4, 2020. After approval is received from DOH, LHJ must submit a separate invoice for reimbursement of these expenses.
2	State Funds Participate in public health emergency preparedness and response activities for COVID-19. This may include surveillance, epidemiology, laboratory capacity, infection control, mitigation, communications, and or other preparedness and response activities for COVID-19. Activities must address one or more of the following six domains: Incident management for early crisis response Jurisdictional recovery Information management Countermeasures and mitigation Surge management Biosurveillance DOH will provide additional guidance and technical assistance. Note: The total state funding consideration is for the period of January 20, 2020 through June 30, 2021.		Activity report(s) on template to be provided DOH.	July 15, 2020 October 15, 2020 January 15, 2021 April 15, 2021 June 30, 2021	LHJ has already received these funds as a one-time distribution.

***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

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 <u>USASpending.gov</u> by DOH as required by P.L. 109-282.

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

Please reference the Code of Federal Regulations:

 $https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1\&SID=58ffddb5363a27f26e9d12cccc462549\&ty=HTML\&h=L\&mc=true\&r=PART\&n=pt2.1.200\ 1439$

Allowable Activities - See list of allowable activities below, Appendix 2 from COVID-19 Crisis Response Cooperative Agreement – Components A and B Supplemental Funding, Interim Guidance, March 15, 2020.

Costs that are NOT allowable

- Facility purchases May be if prior approval received from the feds and state. Send those requests to <u>Amy.Ferris@doh.wa.gov</u>
- Research
- Clinical care except as provided for individuals while under state or federal quarantine and isolation orders that are not eligible for payment by another source.
- Publicity and propaganda (lobbying):
 - Other than for normal and recognized executive-legislative relationships, no funds may be used for:
 - publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body
 - the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body
 - See Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC recipients: https://www.cdc.gov/grants/documents/Anti-Lobbying Restrictions for CDC Grantees July 2012.pdf
- Funds cannot be used to supplant existing federal funds awarded by other federal sources
- Funds cannot be used to match funding on other federal awards.

DOH Program Contact

Tory Henderson, Contracts & Finance Specialist Department of Health P O Box 47960, Olympia, WA 98504-7960 *Office:* 360-236-4596 *Mobile:* 360-789-7262 / tory.henderson@doh.wa.gov

Appendix 2. Allowable Activities

Domain	Activity Category	Allowable Activities
Incident Management for Early Crisis Response	Emergency Operations and Coordination	 Examples of allowable activities: Conduct jurisdictional COVID-19 risk assessment. Identify and prioritize risk-reduction strategies and risk-mitigation efforts in coordination with community partners and stakeholders. Implement public health actions designed to mitigate risks in accordance with CDC guidance. Implement public health response plans based on CDC COVID-19 Preparedness and Response Planning Guidance for State, Local, Territorial, and Tribal Public Health Agencies. Provide technical assistance to local and tribal health departments on development of COVID-19 response plans and respond to requests for public health assistance. Activate the jurisdiction's emergency operations center (EOC) at a level appropriate to meet the needs of the response. Staff the EOC with the numbers and skills necessary to support the response, assure worker safety, and continually monitor absenteeism. Use established systems to ensure continuity of operations (COOP) and implement COOP plans as needed. Establish call centers or other communication capacity for information sharing, public information, and directing residents to available resources. Activate emergency hiring authorities and expedited contracting processes. Assess the jurisdiction's public health and healthcare system training needs. Provide materials and facilitate training designed to improve the jurisdiction's public health and healthcare system response. Implement procedures to notify relevant personnel and participate in CDC national calls and Clinician Outreach and Communication Activity (COCA) calls. Ensure plans and jurisdictional response actions incorporate the latest CDC guidance and direction.

Domain	Activity Category	Allowable Activities
	Responder Safety and Health	 Examples of allowable activities: Assure the health and safety of the jurisdiction's workforce, including but not limited to implementation of staff resiliency programs, occupational health/safety programs, and responder mental health support. Determine gaps and implement corrective actions. Implement personal protective equipment (PPE)- sparing strategies for public health/healthcare system workforce in accordance with federal guidelines. Develop an occupational safety and health strike team to ensure workers are protected, implement corrective actions, and gather lessons learned. Establish a team of communicators who can interpret CDC guidance and assist with implementation of worker safety and health strategies. Create tools to assist and anticipate supply chain shortages, track PPE inventory. Develop PPE strategies consistent with CDC guidance for hospitals, outpatient clinics, long-term care facilities, and other health facilities; work with suppliers and coalitions to develop statewide plans for caching or redistributing/sharing. This strategy should be integrated with health care coalitions' system plans for purchasing, caching, and distributing PPE and accessing the Strategic National Stockpile. Purchase required PPE (if available).

Domain	Activity Category	Allowable Activities
	Identification of vulnerable populations	 Examples of allowable activities: Implement mitigation strategies for populations at risk for morbidity, mortality, and other adverse outcomes. Update response and recovery plans to include populations at risk. Enlist other governmental and nongovernmental programs that can be leveraged to provide social services and ensure that patients with COVID-19 virus (or at risk of exposure) receive proper information to connect them with available social services. Leverage social services and behavioral health within the community, including the Administration for Children and Families (ACF) and Health Resources and Services Administration (HRSA). Conduct rapid assessment (e.g., focus groups) of concerns and needs of the community related to COVID-19 prevention. Identify gaps and implement strategies that encourage risk-reduction behaviors.
Jurisdictional Recovery	Jurisdictional Recovery	Examples of allowable activities: • Recovery efforts to restore to pre-event functioning. • Conduct a hot wash/after-action review and develop an improvement plan.

Domain	Activity Category	Allowable Activities
Information Management	Information Sharing	 Examples of allowable activities: Ensure information sharing among public health staff, healthcare personnel, airport entry screening personnel, emergency medical services (EMS) providers, and the public. Develop, coordinate, and disseminate information, alerts, warnings, and notifications regarding risks and self-protective measures to the public, particularly with at-risk and vulnerable populations and incident management responders. Develop new systems or utilize existing systems to rapidly report public health data. Develop community messages that are accurate, timely, and reach at-risk populations
	Emergency Public Information and Warning and Risk Communication	 Examples of allowable activities: Ensure redundant platforms are in place for pushing out messages to the public and the healthcare sector regarding risks to the public, risk of transmission, and protective measures. Work with health communicators and educators on risk communications efforts designed to prevent the spread of COVID-19 virus. Update scripts for jurisdictional call centers with specific COVID-19 messaging (alerts, warnings, and notifications). Evaluate COVID-19 messaging and other communication materials and, based on feedback from target audiences, revise messages and materials as needed. Conduct rapid assessment (e.g., focus groups) of existing messaging and communications activities (e.g., web-based, social media) related to COVID-19 prevention. Monitor local news stories and social media postings to determine if information is accurate, identify messaging gaps, and adjust communications as needed. Contract with local vendors for translation (as necessary), printing, signage, and audiovisual/public service announcement development and dissemination. Identify gaps and develop culturally appropriate risk messages for at-risk populations including messages that tocus on risk-reduction behaviors. Develop a COVID-19-specific media relations strategy, including identification of key

Domain	Activity Category	Allowable Activities
		 Coordinate communication messages, products, and programs with key partners and stakeholders to harmonize response messaging. Clearly communicate steps that health care providers should take if they suspect a patient has COVID-19 virus infection (e.g., diagnostic testing, clinical guidance).
Countermeasures and	Nonpharmaceutical	Examples of allowable activities:
Mitigation	Interventions	 Develop plans and triggers for the implementation of community interventions, including: Activating emergency operations plans for schools, higher education, and mass gatherings; Ensuring that community, faith-based, and business organizations are prepared to support interventions to prevent spread; and Integrating interventions related to social services providers, criminal justice systems, homeless persons, and other vulnerable populations and at-risk populations.
		 Anticipate disruption caused by community spread and interventions to prevent further spread. Planning for school dismissal including continuity of education and other school-based services (e.g., meals); Ensuring systems are active to provide guidance on closure of businesses, government offices, and social services agencies; Ensuring systems are in place to monitor social disruption (e.g., school closures); and Ensuring that services (e.g., housing, transportation, food) are in place for community members impacted by social distancing interventions.
	Quarantine and Isolation Support	 Examples of allowable activities: Provide lodging and wrap-around services, including food and beverage, cleaning, waste management, maintenance, repairs at quarantine/isolation sites, and clinical care costs for individuals while under state or federal quarantine and isolation orders that are not eligible for payment by another source. Review and update state quarantine and isolation laws, regulations, and procedures. Funds may also be used to develop training and educational materials for local health departments and judicial officials.

Domain	Activity Category	Allowable Activities			
		 Identify and secure safe housing for persons subject to restricted movement and other public health orders. Develop and implement behavioral health strategies to support affected populations. 			
	Distribution and Use of	Examples of allowable activities:			
Medical Material		 Ensure jurisdictional capacity for a mass vaccination campaign once vaccine becomes available, including: Enhancement of immunization information systems Maintaining ability for vaccine-specific cold chain management Coordinating mass vaccination clinics for emergency response Assessing and tracking vaccination coverage 			
		 Rapidly identifying high-risk persons requiring vaccine Planning to prioritize limited medical countermeasures (MCM) based on guidance from CDC and the Department of Health and Human Services (HHS) Ensure jurisdictional capacity for distribution of MCM and supplies. 			
Surge Management	Surge Staffing	Examples of allowable activities:			
		 Activate mechanisms for surging public health responder staff. Activate volunteer organizations including but not limited to Medical Reserve Corps. 			
	Public Health	Examples of allowable activities:			
	Coordination with Healthcare Systems	 In partnership with health care coalitions, develop triggers for enacting crisis/contingency standards of care. 			
		 Coordinate with Hospital Preparedness Program (HPP) entities, healthcare coalitions, healthcare organizations, emergency management, and other relevant partners and stakeholders to assess the public health and medical surge needs of the community. Prepare for increased demands for services, expansions of public health functions, increase in administrative management requirements, and other emergency response surge needs. Train hospitals, long-term care facilities and other high-risk facilities on infection preventio and control. Actively monitor healthcare system capacity and develop mitigation strategies to preserve 			

Domain	Activity Category	Allowable Activities
		 Execute authorities for responding to healthcare system surge and implement activities to mitigate demands on the healthcare system. Plan to activate crisis/contingency standards of care.
	Infection Control	 Examples of allowable activities: Follow updated CDC guidance on infection control and prevention and PPE. Engage with healthcare providers and healthcare coalitions to address issues related to infection prevention measures, such as: Changes in hospital/healthcare facility visitation policies, Social distancing, and Infection control practices in hospitals and long-term care facilities, such as: PPE use, Hand hygiene, Source control, and Isolation of patients.
Biosurveillance	Public Health Surveillance and Real- time Reporting	 Examples of allowable activities: Conduct surveillance and case identification (including, but not limited to, public health epidemiological investigation activities such as contact follow-up). Assess risk of travelers and other persons with potential COVID-19 exposures. Enhance surveillance systems to provide case-based and aggregate epidemiological data. Enhance existing syndromic surveillance for respiratory illness such as influenza-like illness (ILI) or acute respiratory illness (ARI) by expanding data, inputs, and sites. Enhance systems to identify and monitor the outcomes of severe disease outcomes, including among vulnerable populations. Enhance systems to track outcomes of pregnancies affected by COVID-19. Develop models for anticipating disease progression within the community.
	Public Health Laboratory Testing, Equipment, Supplies, and Shipping	 Examples of allowable activities: Assess commercial and public health capacity for lab testing. Develop a list of available testing sites and criteria for testing and disseminate to clinicians and the public.

Domain	Activity Category	Allowable Activities
		 Appropriately collect and handle hospital and other clinical laboratory specimens that require testing and shipping to Laboratory Response Network (LRN) or CDC laboratories designated for testing. Rapidly report test results between the laboratory, the public health department, healthcare facilities, and CDC to support public health investigations. Test a sample of outpatients with ILI or ARI for COVID-19 and other respiratory viruses and complete the following: Report weekly percent positive COVID-19 outpatient visits by age group. Determine the rate of ILI/ARI outpatient visits and the rate of COVID-10-confirmed ILI patients. This allowable activity is similar to "Sentinel COVID-19 Surveillance, March 2020, and ILINET Enhancements in 2019." It may include, but is not limited to the following:
	Data Management	Provide testing for impacted individuals. Examples of allowable activities:
		 Ensure data management systems are in place and meet the needs of the jurisdiction. Implement analysis, visualization, and reporting for surveillance and other available data to support understanding of the outbreak, transmission, and impact of interventions. Ensure efficient and timely data collection.

Domain	Activity Category	Allowable Activities
		 Ensure ability to rapidly exchange data with public health partners (including CDC) and other relevant partners.
		 Coordinate data systems for epidemiological and laboratory surveillance.

Type of Payment

Fixed Price

Reimbursement

Exhibit A Statement of Work Contract Term: 2018-2021

Funding Source

State

Other

Federal Subrecipient

DOH Program Name or Title: <u>HIV Client Services-HOPWA - Effective July 1, 2020</u>

Local Health Jurisdiction Name: <u>Kitsap Public Health District</u> Contract Number: <u>CLH18248</u>

Federal Compliance

(check if applicable)

FFATA (Transparency Act)

Research & Development

SOW Type: <u>Revision</u> **Revision # (for this SOW)** 1

Period of Performance: <u>July 1, 2020</u> through <u>June 30, 2021</u>

Statement of Work Purpose: The purpose of this statement of work is to provide funding to help the housing needs of persons with human immunodeficiency virus/aquired immune deficiency syndrome (HIV/AIDS) or related diseases and their families.

Revision Purpose: The purpose of this revision is to extend the period of performance from December 31, 2020 to June 30, 2021 and extend the funding end date and add additional funding for the tasks through June 2021.

Chart of Accounts Program Name or Title	CFDA #	BARS	Master	Funding		Current	Change	Total
		Revenue	Index	(LHJ Use	Only)	Consideration	Increase (+)	Consideration
		Code	Code	Start Date	End Date			
FFY20 HOUSING-PEOPLE WITH AIDS FORMULA	14.241	333.14.24	12660201	07/01/20	06/30/21	26,690	26,690	53,380
TOTALS						26,690	26,690	53,380

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Provide funding to help the housing needs of		-Perform prompt housing	Required reports are to	Administrative:
	persons with HIV/AIDS or related diseases and		inspections.	be submitted in a	\$1,746 \$3,492
	their families. The outcome of this performance-based grant is		-Make prompt rent and deposit payments to landlords and make	timely manner. DOH may delay	Support Services: \$1,250 \$2,500
	safe, affordable and stable housing for the clients of the Housing Opportunities for Persons with AIDS		utility payments to utility companies.	payment until the reports are received or	STRMU:
	(HOPWA) Program.		companies.	recapture unclaimed	\$3,750 \$7,500
			-Develop housing plans for clients	funds.	
	Services are restricted to households with at least		receiving housing assistance		Permanent Housing
	one person who has HIV/AIDS and whose total household income is less than 80% of the Area		[Short-Term Rent, Mortgage and Utility (STRMU), Tenant-Based		Placement: \$0
	Median Income (AMI) as defined by Housing and		Rental Assistance (TBRA), and		Tenant Based
	Urban Development (HUD).		Facility Based Housing] and		Rental Assistance:
			update housing plans at least annually.		\$19,944 \$3 9,888

-Provide or refer eligible clients to	Housing
supportive services and permanent	Information
housing placement when	Services:
appropriate.	\$0
-Prepare and submit monthly invoice vouchers by the 25th of the month following provision of services, except in July, when it is due on the 10 th of the month.	TOTAL: \$26,690 \$53,380
-Submission of Consolidated Annual Performance Report (CAPER) by August 10.	
-Submission of Monitor responses by the due date requested.	

***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 by DOH as required by P.L. 109-282.

Program Specific Requirements/Narrative

The outcome of this performance-based grant is safe, affordable and stable housing for the clients of the HOPWA Program.

LHJ shall provide the following inputs:

• Staff who provide services described in this Statement of Work (SOW)

Compensation and Payment:

- i) The LHJ shall submit all claims for payment for costs due and payable under this SOW and incurred during this period by *January July* 25, 2021. DOH will pay belated claims at its discretion, contingent upon the availability of funds.
- ii) The LHJ agrees to reimburse DOH for expenditures billed to DOH for costs that are later determined through audit or monitoring to be disallowed under the requirements of 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

- iii) Submission of Invoice Vouchers On a monthly basis, the CONTRACTOR shall submit correct A19-1A invoice vouchers amounts billable to DOH under this statement of work. All A19-1A invoice vouchers must be submitted by the 25th of the following month.
 - (1) The LHJ shall use and adhere to the DOH Infectious Disease Reimbursement Guidelines and Forms when submitting A19 invoice voucher requests to DOH.
- iv) Advance Payments Prohibited Funds are "cost reimbursement" funds. DOH will not make payment in advance or in anticipation of services or supplies provided under this agreement. This includes payments of "one-twelfth" of the current fiscal year's funding.

E-mail invoices to: ID.Operations@doh.wa.gov

Payment to LHJ: The LHJ will be reimbursed the amount for payments listed on the monthly invoice voucher upon receipt and approval of the required reports submitted by the due dates listed.

Contract Modifications:

- (1) Notice of Change in Services LHJ shall notify DOH program staff, within 45 days, if any situations arise that may impede provision of the services contained in this Statement of Work. DOH and LHJ will agree to strategies for resolving any shortfalls. DOH retains the right to withhold funds in the event of noncompliance.
- (2) Contract Amendments Effective Date LHJ shall not begin providing the services authorized by a contract amendment until such time as LHJ has received a signed, fully executed copy of the contract amendment from DOH.

Confidentiality Requirements:

LHJ must preserve the confidentiality of the clients they serve pursuant to the Washington Administrative Code (WAC) and the Revised Code of Washington (RCW). Failure to maintain client confidentially could result in civil or legal litigation against employees or agencies per the WAC and RCW.

Category One: Contractors that keep confidential and identifiable records including medical diagnosis and lab slips.

If your agency fits this definition, you must comply with federal and state requirements regarding the confidentiality of client records.* Proof of LHJ meeting these requirements may be requested during a site visit or audit. To meet the requirements LHJ must have the following in place:

- Clearly written agency policies regarding confidentiality and security of records;
- Appropriate physical and electronic security measures to prevent unauthorized disclosures;
- Signed statements of confidentiality and security for the staff member hired under this agreement who has access to sensitive information, either through access to files or through direct contact with clients. This statement will be on file at LHJ's office and updated yearly; and
- Appropriate confidentiality training provided to the staff member hired under this agreement with records of attendance.

Technical assistance is available through the Washington State Department of Health.

*Disclosure of information is governed by the Washington Administrative Code (WAC) 246-101-120, 520 and 635, and the Revised Code of Washington (RCW) 70.24.080, 70.24.084, and 70.24.105 regarding the exchange of medical information among health care providers related to HIV/AIDS or STD diagnosis and treatment. Please note that contractors fit under the definition of "health care providers" and "individuals with knowledge of a person with a reportable disease or condition" in the WAC and RCW.

DOH Program Contact

Deborah Green DOH, Infectious Disease HIV Client Services PO Box 47841, Olympia, WA 98504-7841 360-236-3441/Fax: 360-664-2216 Deborah.Green@doh.wa.gov DOH Fiscal Contact Abby Gilliland DOH, Infectious Disease Operations Unit PO Box 47840, Olympia, WA 98504-7840 360-236-3351/Fax: 360-664-2216 Abby.Gilliland@doh.wa.gov

Type of Payment

Fixed Price

Reimbursement

Exhibit A Statement of Work Contract Term: 2018-2021

DOH Program Name or Title: Infectious Disease Client Services (IDCS) RW CARES - Effective January 20, 2020 Local Health Jurisdiction Name: Kitsap Public Health District

Federal Compliance

(check if applicable)

FFATA (Transparency Act) Research & Development

Contract Number: CLH18248

SOW Type: <u>Revision</u> **Revision # (for this SOW)** 1

Period of Performance: January 20, 2020 through September 30, 2021

Statement of Work Purpose: The purpose of this statement of work is to provide funding through the Coronavirus Aid, Relief, and Economic Security (CARES) Act in order to address the impact created by COVID-19.

Funding Source

State

Other

Federal Subrecipient

Revision Purpose: The purpose of this revision is to extend the period of performance and funding from December 31, 2020 to September 30, 2021.

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding (LHJ Use Start Date	Only)	Consideration	8	Total Consideration
RYAN WHITE PART B COVID-19 RESPONSE	93.917	333.93.91	12613200	01/20/20	09/30/21	24,730	0	24,730
TOTALS						24,730	0	24,730

Task Number	Task/Activity/Description	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount					
	Ryan White - CARES								
COVID-19 CARES Act	All activities and purchases supported with Ryan White HIV/AIDS Program (RWHAP) CARES Act COVID-19 awards <u>must</u> be used for services, activities, and supplies needed to prevent or minimize the impact of COVID-19 on RWHAP clients. The following activities are approved: • Medical Case Management • Non-Medical Case Management • Emergency Financial Assistance • Food Bank/Home Delivered Meals • Essential Non-food Items • Health education/Risk Reduction • Housing • Linguistic Services • Medical Transportation	Agency must track and report within the DOH approved data system any and all activity related to this Service Category Additionally, all activities related to CARES Act funding must be tracked in a monthly COVID-19 Data Report (CDR) per Health Resources and Services Administration (HRSA) requirements.	CARES Act funding must be expended by <i>December 31, 2020</i> <i>September 30, 2021</i> Expenses incurred related to COVID-19 may be reimbursed back to January 20, 2020.	\$24,730– MI 12613200 – Ryan White CARES \$24,730 for 01/20/20-12/31/20 09/30/21					

Task Number	Task/Activity/Description	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Outreach ServicesPsychosocial Support Services	Progress reports to be submitted quarterly.		

***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 <u>USASpending.gov</u> by DOH as required by P.L. 109-282.

Program Specific Requirements/Narrative

1. Definitions

- a. CARES Act The Coronavirus Aid, Relief, and Economic Security Act
- b. CONTRACTOR LHJ receiving funds directly from Washington State Department of Health (DOH) to provide services for people at high risk (PAHR) and /or persons living with HIV (PLWH).
- 2. Client Eligibility and Certification Reference the HCS Manual for more information.
- 3. Title XIX HIV Medical Case Management Reference the HCS Manual for more information.
- 4. Quality Management/Improvement Activities Reference the HCS Manual for more information.
- 5. HIV Statewide Data System Reference the HCS Manual for more information.
- 6. Reporting Requirements Agency must report in agency approved data system any and all activity related to this service category. Additionally, all activities related to CARES Act funding must be tracked in a monthly COVID-19 Data Report (CDR) as determined by HRSA.
- 7. Participation in Capacity Building and Technical Assistance Activities designed to increase efficacy of HIV Community Services
 - a. Capacity building is the process by which individuals and organizations obtain, improve, and retain the skills, knowledge, tools, equipment, and other resources needed to do their jobs competently. It allows individuals and organizations to perform at a greater capacity.
 - b. Any capacity building must be related to preventing, preparing, or responding to COVID-19.
- 8. Training Requirements Reference the HCS Manual for more information.
- 9. Contract Management Reference the HCS Manual for more information.
 - a. Fiscal Guidance

- i) **Funding** The CONTRACTOR shall submit all claims for payment for costs due and payable under this statement of work by *January 21, 2020 October 25, 2021*. DOH will pay belated claims at its discretion, contingent upon the availability of funds.
- ii) The CONTRACTOR agrees to reimburse DOH for expenditures billed to the DOH for costs that are later determined through audit or monitoring to be disallowed under the requirements of 2 CFR Part 200 –Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Audits.
- iii) Submission of Invoice Vouchers On a monthly basis, the CONTRACTOR shall submit correct A19-1A invoice vouchers amounts billable to DOH under this statement of work. All A19-1A invoice vouchers must be submitted by the 25th of the following month.
- iv) Advance Payments Prohibited Reference the HCS Manual for more information.
- v) Payer of Last Resort Reference the HCS Manual for more information.
- vi) Cost of Services Reference the HCS Manual for more information.
- vii) Emergency Financial Assistance The CONTRACTOR shall not use contract funds to provide a parallel medication service to EIP. CONTRACTOR's providing case management services shall make every effort to enroll clients in EIP.
- viii) **Payment of Cash or Checks to Clients Not Allowed** Where direct provision of service is not possible or effective, vouchers or similar programs, which may only be exchanged for a specific service (e.g., transportation), shall be used to meet the need for such services. CONTRACTOR shall administer voucher programs to assure that recipients cannot readily convert vouchers into cash.
- ix) Funds for Needle Exchange Programs Not Allowed CONTRACTOR shall not expend contract funds to support needle exchange programs using funds from HIV Community Services Tasks.
- x) Supervision Under DOH Community Programs contracts, will be understood as the delivery of a set of interrelated functions encompassing administrative, educational and supportive roles that work collectively to ensure clinical staff (i.e. case managers, navigators, coordinators, assistants, coaches) are equipped with the skills necessary to deliver competent and ethical services to clients that adhere to best practices within applicable fields as well as all relevant Statewide Standards. Supervisors must meet the criteria set forth within the WA State HIV Case Management Standards and provide the level of interaction and review detailed in that document.

It is the understanding of DOH that Supervision funded under the direct program portion of this contract include at minimum the provision of at least two of the three functions detailed here: administrative, educational or supportive supervision. Supervision that encompasses only administrative functions will not be considered billable under Direct Program. To that end, it is the expectation of DOH that those personnel identified as Supervisors have no more than one degree of separation from direct client care. Exceptions to this rule can be presented and considered to and by DOH Contract Management. It will fall to the requesting organization to satisfactorily demonstrate that any Supervisory positions falling within the scope of Direct Program are meeting the expectation of provision of educational or supportive supervision with the aim of directly impacting client experiences, quality of services, and adherence to best practices and Statewide Standards.

xi) Small and Attractive items – Each agency shall perform a risk assessment (both financial and operational) on the agency's assets to identify those assets that are particularly at risk or vulnerable to loss. Operational risks include risks associated with data security on mobile or portable computing devices that store or have access to state data. Assets so identified that fall below the state's capitalization policy are considered small and attractive assets. Agency shall develop written internal policies for managing small and attractive assets. Internal policies should take into consideration the Office of the Chief Information Officer (OCIO) IT Security Standard 141 Section 5.8 Mobile Computing and Section 8.3 Media Handling and Disposal at https://ocio.wa.gov/policies.

The agency shall implement specific measures to control small and attractive assets in order to minimize identified risks. Periodically, the agency should perform a follow up risk assessment to determine if the additional controls implemented are effective in managing the identified risks.

Agency must include, at a minimum, the following assets with unit costs of \$300 or more: 1) Laptops and Notebook Computers

2) Tablets and Smart Phones

Agencies must also include the following assets with unit costs of \$1,000 or more:

- 1) Optical Devices, Binoculars, Telescopes, Infrared Viewers, and Rangefinders
- 2) Cameras and Photographic Projection Equipment
- 3) Desktop Computers (PCs)

4) Television Sets, DVD Players, Blu-ray Players, and Video Cameras (home type)

xii) Food and Refreshments - Food and refreshments are not allowable direct costs, unless provided in conjunction with allowable meetings, whose primary purpose is the dissemination of technical information. Pre-approval is required when food and refreshments are purchased for these meetings. A sign in sheet with the clients ID number from the DOH approved data system as well as an agenda is required in order to receive reimbursement for these charges.

Food for staff meetings/trainings is not allowable.

PLEASE NOTE: If meals/refreshments are purchased for lunch and learns or other allowable meetings, food can only be purchased for the clients only at per diem. Any expenses over per diem will be denied.

b. Contract Modifications

- i) Notice of Change in Services The CONTRACTOR shall notify DOH program staff, within 45 days, if any situations arise that may impede implementation of the services contained in the statement of work. DOH and the CONTRACTOR will agree to strategies for resolving any shortfalls. DOH retains the right to withhold funds in the event of substantial noncompliance.
- ii) Contract Amendments Effective Date The CONTRACTOR shall not begin providing the services authorized by a contract amendment until the CONTRACTOR has received a signed, fully executed copy of the contract amendment from DOH.

c. Subcontracting

This statement of work does not allow a CONTRACTOR to subcontract for services.

d. Written Agreements

The CONTRACTOR should execute written agreements with the providers listed below to document how the providers' services and activities will be coordinated with funded Medical HIV Case Management services and activities:

- (1) Partner Counseling and Re-Linkage Services (PCRS)
- (2) HIV Testing Services
- (3) Medical Providers providing services to agency's medical case management clients
- (4) Other Local Health Jurisdictions in the counties regularly served by the CONTRACTOR.

Technical assistance is available through DOH.

10. Material Review and Website Disclaimer Notice

In accordance with all federal guidance, contractors receiving funds through this RFA will:

a. Submit all proposed written materials including, but not limited to, pictorials, audiovisuals, questionnaires, survey instruments, agendas for conferences, plans for educational sessions, and client satisfaction surveys purchased, produced, or used by staff funded with DOH funds to the State HIV/AIDS Materials Review Committee. CONTRACTOR shall submit all materials to be reviewed to:

Michael Barnes, Washington State Department of Health PO Box 47841, Olympia, WA 98504-7841 Phone: (360) 236-3579/Fax: (360) 664-2216 Email: <u>Michael.Barnes@doh.wa.gov</u>

b. Assure prominent display of disclaimer notice on all websites containing HIV/AIDS education information (including sub- contractors). Such notice must consist of language similar to the following: "This site contains HIV prevention messages that may not be appropriate for all audiences. Since HIV infection is spread primarily through sexual practices or by sharing needles, prevention messages and programs may address these topics. If you are not seeking such information or may be offended by such materials, please exit this website."

11. Youth and Peer Outreach Workers

For purposes of this agreement, the term "youth" applies to persons under the age of 18. All programs, including subcontractors, using youth (either paid or volunteer) in program activities will use caution and judgment in the venues / situations where youth workers are placed. Agencies will give careful consideration to the age appropriateness of the activity or venue; will ensure that youth comply with all relevant laws and regulations regarding entrance into adult establishments and environments; and will implement appropriate safety protocols that include clear explanation of the appropriate laws and curfews and clearly delineate safe and appropriate participation of youth in program outreach activities.

12. Confidentiality Requirements – Reference the HCS Manual for more information.

13. Whistleblower

- a. Whistleblower statute, 41 U.S.C. & 4712, applies to all employees working for CONTRACTOR, subcontractors, and subgrantees on federal grants and contracts. The statute (41 U.S.C. & 4712) states that an "employee of a CONTRACTOR, subcontractor, grantee, or subgrantee, may not be discharged, demoted, or otherwise discriminated against as a reprisal for "whistleblowing." In addition, whistleblower protections cannot be waived by an agreement, policy, form, or condition of employment.
- b. The National Defense Authorization Act (NDAA) for Fiscal Year 2013 (Pub. L. 112-239, enacted January 2, 2013) mandates a pilot program entitled "Pilot Program for Enhancement of Contractor Employee Whistleblower Protections." This program requires all grantees, their subgrantees, and subcontractors to:
 - i. Inform their employees working on any federal award they are subject to the whistleblower rights and remedies of the pilot program;
 - ii. Inform their employees in writing of employee whistleblower protections under 41 U.S.C. & 4712 in the predominant native language of the workforce; and;
 - iii. CONTRACTOR and grantees will include such requirements in any agreement made with a subcontractor or subgrantee.

14. Allowable Costs

All expenditures incurred and reimbursements made for performance under this statement of work shall be based on actual allowable costs. Costs can include direct labor, direct material, and other direct costs specific to the performance of activities or achievement of deliverables under this statement of work.

For information in determining allowable costs, please reference OMB Circulars:

2 CFR200 (State, Local and Indian Tribal governments) at: <u>https://www.federalregister.gov/documents/2013/12/26/2013-30465/uniform-administrative-requirements-cost-principles-and-audit-requirements-for-federal-awards</u>

**Disclosure of information is governed by the Washington Administrative Code (WAC) 246-101-120, 520 and 635, and the Revised Code of Washington (RCW) 70.24.080, 70.24.084, and 70.24.105 regarding the exchange of medical information among health care providers related to HIV/AIDS or STD diagnosis and treatment. Please note that CONTRACTORs fit under the definition of "health care providers" and "individuals with knowledge of a person with a reportable disease or condition" in the WAC and RCW.

DOH statutory authority to have access to the confidential information or limited Dataset(s) identified in this agreement to the Information Recipient: RCW 43.70.050 Information Recipient's statutory authority to receive the confidential information or limited Dataset(s) identified in this Agreement: RCW 70.02.220 (7)

DOH Program Contact, PLWH Chris Wukasch DOH, HIV Client Services PO Box 47841, Olympia, WA 98504-7841 360-236-34329/Fax: 360-664-2216 Chris.Wukasch@doh.wa.gov

Exhibit A, Statements of Work Revised as of January 15, 2021 DOH Fiscal Contact Abby Gilliland DOH, Infectious Disease Operations Unit PO Box 47840, Olympia, WA 98504-7841 360-236-3351/Fax: 360-664-2216 Abby.Gilliland@doh.wa.gov

Exhibit A Statement of Work Contract Term: 2018-2021

DOH Program Name or Title: <u>Marijuana Prevention & Education Program -</u> Effective July 1, 2019 Local Health Jurisdiction Name: Kitsap Public Health District

Contract Number: CLH18248

SOW Type: <u>Revision</u> **Revision # (for this SOW)** 2

Period of Performance: July 1, 2019 through June 30, 2021

Funding Source	Federal Compliance	Type of Payment
Federal <select one=""></select>	(check if applicable)	Reimbursement
🔀 State	FFATA (Transparency Act)	Fixed Price
U Other	Research & Development	

Statement of Work Purpose: The purpose of this statement of work is to fund the activities of a regional Youth Marijuana Prevention and Education Program (YMPEP).

Revision Purpose: The purpose of this revision is extend the period of performance and SFY21 funding end date from 12/31/20 to 06/30/21 and to change the name and contact information for the DOH contract manager.

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding (LHJ Use Start Date	Only)	Current Consideration	0	Total Consideration
SFY20 MARIJUANA EDUCATION	N/A	334.04.93	77420820	07/01/19	06/30/20	247,509	0	247,509
SFY21 MARIJUANA EDUCATION	N/A	334.04.93	77420821	07/01/20	06/30/21	247,509	0	247,509
TOTALS						495,018	0	495,018

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount		
LHJ is required to complete the following tasks and deliverables and adhere to all requirements contained in the attached Youth Marijuana Prevention and Education Guide. YMPEPRegGuide.pdf Due dates and allocations are for purposes of reflecting the total annual allocation and reporting for SFY20 and SFY21. SFY21 will be split between the current 2018-2020 Consolidated Contract (ConCon) and the new ConCon term beginning January 1, 2021. Any unused portion of SFY21 will be carried forward into the new contract term.							
1. Groundwork – Build program and regional capacity to plan, coordinate, implement and evaluate regional Youth Marijuana Prevention and Education Program (YMPEP) activities based on the regionally developed strategic plan:							
А.	Hire YMPEP Regional Coordinator.		Report progress and submit invoices monthly	06/30/20 06/30/21	Reimbursement for actual expenditures, not to exceed total funding		
В.	Create and maintain Regional Network and partnerships with people throughout the region.		Report progress and submit invoices monthly	06/30/20 06/30/21	consideration.		

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
C.	Provide needed education and skill enhancement opportunities for Regional Network.		Report progress and submit invoices monthly	06/30/20 06/30/21	A19's for YMPEP expenditures must continue to be submitted to the DOH Grants Management office per the
D.	Identify organizational structure of the Regional Network		Report progress and submit invoices monthly	06/30/20 06/30/21	Consolidated Contract.
E.	Form a subcommittee of the Regional Network; refer to them as the Planning Team		Report progress and submit invoices monthly	06/30/20 06/30/21	The Expenditure Worksheet in the YMPEP Budget Workbook must be completed by the 30th of the month following the month in which costs were incurred.
2. Asses	sment – Conduct ongoing needs assessment	data within the region to	o support planning activities		
А.	Form or identify an Epidemiological Workgroup		Report progress and submit invoices monthly	06/30/20 06/30/21	Reimbursement for actual expenditures, not to exceed total funding
В.	Conduct/update a needs assessment to assess regional needs, assets, gaps, and readiness.		Report progress and submit invoices monthly	06/30/20 06/30/21	A19's for YMPEP expenditures must
C.	Determine which of the most pressing needs prevention efforts can influence.	Determine which of the most pressing Report progress and submit 06/30/20		continue to be submitted to the DOH Grants Management office per the Consolidated Contract.	
					The Expenditure Worksheet in the YMPEP Budget Workbook must be completed by the 30th of the month following the month in which costs were incurred.
3. Capa	city – Recruit and convene a regional netwo	rk and raise awareness o	of its mission and purpose		
А.	Host regular meetings with Regional Network. (Planning team meets monthly during Strategic Planning Process; Full network meets quarterly at a minimum .)		Report progress and submit invoices monthly	06/30/20 06/30/21	Reimbursement for actual expenditures, not to exceed total funding consideration.
B.	Use knowledge about the community's level of readiness to publicize the issue and encourage participation on Regional Network		Report progress and submit invoices monthly	06/30/20 06/30/21	A19's for YMPEP expenditures must continue to be submitted to the DOH Grants Management office per the Consolidated Contract.
C.	Expand the Regional Network to include sectors within the region and other members interested in preventing substance use disorder.		Report progress and submit invoices monthly	06/30/20 06/30/21	The Expenditure Worksheet in the YMPEP Budget Workbook must be completed by the 30th of the month

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
D.	Develop a plan for attending health equity trainings, recruiting and developing partnerships with a diverse representation of the community, etc.		Report progress and submit invoices monthly	06/30/20 06/30/21	following the month in which costs were incurred.
4. Planni	ng – Coordinate development of a mission, l	ogic model and strategic	e and sustainability plans for t	he region.	
А.	Convene the planning team.		Report progress and submit invoices monthly.	06/30/20 06/30/21	Reimbursement for actual expenditures, not to exceed total funding consideration. A19's for YMPEP expenditures must continue to be submitted to the DOH Grants Management office per the Consolidated Contract. The Expenditure Worksheet in the YMPEP Budget Workbook must be completed by the 30th of the month following the month in which costs were incurred.
В.	Train the planning team.		Report progress an submit invoices monthly	06/30/20 06/30/21	
C.	Analyze risk and protective factors and local conditions		Report progress and submit invoices monthly	06/30/20 06/30/21	
D.	Choose the factors on which the region will concentrate		Choose the factors on which the region will concentrate	06/30/20 06/30/21	
E.	Establish Mission of YMPEP region		Report progress an submit invoices monthly	06/30/20 06/30/21	
F.	Develop logic model to guide effort		Report progress an submit invoices monthly	06/30/20 06/30/21	
G.	Create regional strategic plan to include policies, programs and practices. Include a minimum of 70 percent of time to Primary activities and up to 30 percent of time to implement approved Innovative activities		Report progress and submit invoices monthly	06/30/20 06/30/21	
H.	Choose policy, systems, and environmental (PSE) activities to address the risk and protective factors the Regional Network prioritized.		Report progress and submit invoices monthly.	06/30/20 06/30/21	
I.	Present the plan to the communities it will serve throughout the region and gather support		Report progress and submit invoices monthly	06/30/20 06/30/21	
J.	Create Sustainability Plan		Report progress and submit invoices monthly	06/30/20 06/30/21	
5. Implen	nentation – Coordinate implementation of t	he strategic plan			
А.	Hire staff, subcontract and/or recruit volunteers to implement Regional Strategic Plan.		Report progress and submit invoices monthly.	06/30/20 06/30/21	Reimbursement for actual expenditures, not to exceed total funding consideration.

AMENDMENT #20

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
В.	Follow the Regional Strategic Plan throughout the implementation process		Report progress and submit invoices monthly	06/30/20 06/30/21	A19's for YMPEP expenditures must continue to be submitted to the DOH
C.	Continue to track and monitor resources annually. Update and revise resource assessment as needed.		Report progress and submit invoices monthly	06/30/20 06/30/21	Grants Management office per the Consolidated Contract.
D.	Meet regularly with Regional Network.		Report progress and submit invoices monthly	06/30/20 06/30/21	The Expenditure Worksheet in the YMPEP Budget Workbook must be
E.	Keep regional partners informed using a newsletter, listserv, monthly meetings		Report progress and submit invoices monthly	06/30/20 06/30/21	completed by the 30th of the month following the month in which costs were incurred.
F.	Write grant applications (as appropriate) to increase funding opportunities and ensure sustainability of YMPEP region		Report progress and submit invoices monthly	06/30/20 06/30/21	
6. Evalua	ntion – Plan and participate in state and reg	ional evaluation efforts			
A.	Create Regional Evaluation Plan		Report progress and submit invoices monthly	06/30/20 06/30/21	Reimbursement for actual expenditures, not to exceed total funding consideration. A19's for YMPEP expenditures must continue to be submitted to the DOH Grants Management office per the Consolidated Contract. The Expenditure Worksheet in the
					YMPEP Budget Workbook must be completed by the 30th of the month following the month in which costs were incurred.
7. Work	Plan – LHJ must prepare and submit a wor	k plan and budget for th	e remainder of the biennium		
А.	Prepare and submit Annual Work Plans and budgets for SFY 20 and SFY 21.		Completed work plan and budget	06/30/20 06/30/21	Reimbursement for actual expenditures, not to exceed total funding consideration.
					A19's for YMPEP expenditures must continue to be submitted to the DOH Grants Management office per the Consolidated Contract.

AMENDMENT #20

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
					The Expenditure Worksheet in the YMPEP Budget Workbook must be completed by the 30th of the month following the month in which costs were incurred.

***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

A. Local Health Jurisdiction (LHJ) will:

- 1. Fulfill program administration roles and responsibilities:
 - a) Meet requirements outlined in the YMPEP Regional Implementation Guide provided by DOH, which includes (but is not limited to) conducting a regional assessment of needs, coordinating and maintaining a regional network, preparing, annually updating and managing the implementation of the region's strategic plan.
 - b) Ensure program staffing is at least 1.0 FTE (divided among no more than three (3) people). These staff are required to attend either the Substance Abuse Prevention Skills Training (SAPST) or DOH SAPST within nine (9) months of being hired.
 - c) Participate in required conference calls, trainings, and webinars and virtual or in-person meetings for YMPEP contractors hosted by DOH.
 - d) Submit an Annual Plan and Budget according to the deadlines in Section E below.
 - e) Submit accurate and complete progress and expenditure reports, using the required guidance, reporting tool or system, and deadlines provided by DOH (See Section E below).
 - f) Act as the fiduciary agent if subcontracting. DOH must be notified and approve of any subcontractors; however, subcontractor performance is the responsibility of each YMPEP Regional Contractor/LHJ.
 - g) Participate in the DOH-funded Marijuana Prevention Practice Collaborative by following the guidelines and expectations developed by the collaborative membership.
 - h) Have completed background checks completed and on file for any staff or volunteer (funded and/or representing an YMPEP contractor or subcontractor) who will be with youth and unsupervised. Prohibit any staff with a felony conviction related to their duties from supervising and interacting with minors while performing the duties of this statement of work. This requirement is consistent with existing statute RCW 9.96A.020

2. Meet evaluation requirements:

- a) Submit at least one (1) Success Story using guidance and tools provided by DOH.
- b) Perform annual close out procedures as directed by DOH.
- c) Participate in performance measure data collection activities in collaboration with DOH.
- d) Participate in project evaluation activities developed and coordinated by DOH.
- e) Consult with and submit an Exception Request to the Washington State Institutional Review Board (<u>wsirb@dshs.wa.gov</u>) when intending to conduct focus groups, key-informant interviews, surveys, or any other method used to gather data systematically. Provide a copy of the WSIRB Exception Request and approval to the DOH Contract Manager.

3. Written Policies and Procedures/Documents

- a) Written policies and procedures, consistent with federal and state regulations, as applicable, shall be kept on file in the office of the LHJ and be available for review at the request of DOH staff. Such policies and procedures shall include, but not be limited to, as appropriate:
 - i. Position Descriptions
 - ii. Confidentiality Policy
 - iii. Regional Needs Assessment
 - iv. 5-Year Regional Strategic Plan (includes annual work plan)
 - v. Completed background checks for those staff, subcontractors or volunteers working directly with youth (ages 0-17).
 - vi. Latest Agency Audit
 - vii. Subcontractor Agreements

B. DOH will support LHJ by providing:

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

C. Program Administration

- The LHJ shall perform the requirements and activities defined in this agreement and the YMPEP Regional Implementation Guide. At a minimum, program and fiscal
 performance will be monitored and evaluated monthly by the assigned DOH staff based on each Monthly Report, and Monthly Expenditure Report and Request for
 Reimbursement Form (A19).
- 2. The YMPEP Regional Contractor/LHJ shall provide DOH with the program administrator's name, address, telephone number, and any subsequent changes. This contract information will be kept in an internal DOH database, along with the same information of all staff supported in part/full with YMPEP funds.
- 3. Failure of the YMPEP Regional Contractor/LHJ to perform activities (including those subcontracted to other agencies or organizations) as described in the DOH-approved SOW included herein and subsequent amendments, and in accordance with DOH administrative and Contract Performance Policies, and with any applicable local, state, or federal law or regulation, may result in the reduction of funds, suspension of services, or the termination of this statement of work.
- 4. DOH reserves the right to determine the amount of any reduction, based on YMPEP Regional Contractor's/LHJ's performance, and to amend the contract to effect any reduction. Any reduction shall be based on a review of the YMPEP Regional Contractor's/LHJ's expenditure patterns and actual performance.
- 5. The LHJ will make a reasonable and ongoing effort, throughout the period of performance, to secure and/or leverage resources from private and public entities to supplement the administrative, operational, and implementation costs under this program. Documentation of any collaborative efforts and securing of resources that benefit this project shall be kept current and on file in the office of the YMPEP Regional Contractor/LHJ and shall be available for review upon request by DOH staff.
- 6. The LHJ's annual work plan and budget must be approved by the DOH MPEP contract manager prior to implementation. This includes execution of subcontracts within the region. Any changes to either the work plan or budget, including personnel changes, must also be approved by the DOH contract manager prior to implementation.

D. Subcontractor Performance Expectations

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

E. Required Plans and Reports

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

Report	Date Due
1. Submit an Annual Plan and Budget	Annually no later than April 30. DOH approval will occur no later than June 15.
2. Expenditure Report and Request for Reimbursement	A19 and updated budget workbook due the 30 th of the month following the month in which costs are incurred.
3. Final Expenditure Report and Request for Reimbursement (FY Closeout)	Year-end projections are due as follows: FY20: July 10, 2020 FY21: July 10, 2021 Final Expenditure Reports are due within 45 days of the end of the contract year.
4. Contractor Monthly Report	The 15 th of the month following the month in which activities were performed.
5. Success Story	Annually, No later than June 30, 2019

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

F. Payment

- 1. All expenditures incurred and reimbursements made for performance under this statement of work shall be based on actual allowable costs. Costs can include direct labor, direct material, and other direct costs specific to the performance of activities or achievement of deliverables under this statement of work.
- 2. Billings for services on a monthly fraction of the budget will not be accepted or approved.
- 3. DOH shall pay the LHJ all allowable costs incurred as evidenced by a proper invoice submitted to DOH on a timely basis, insofar as those allowable and allocable costs do not exceed that amount appropriated or otherwise available for such purposes as stated herein, or in subsequent amendments.
- 4. Costs allowable under this statement of work are based on DOH-approved budget for periods of performance: SFY 20 (July 1, 2019 to June 30, 2020) and SFY 21 (July 1, 2020- June 30, 2021).
- 5. Authorized and allowable program expenditures shall be reimbursed upon receipt and approval of the Monthly Activity Report, Monthly Expenditure Report and Request for Reimbursement form (A19) according to Section E of this contract. If the Monthly Activity Report, Expenditure Report and/or Request for Reimbursement form are not completed within 60 days of the month when expenditures were incurred, DOH may withhold approval and payment, at its discretion, until the 30th of the month following submittal.
- 6. Final expenditure projections must be submitted annually by the 10th of July to allow DOH to appropriately accrue funds to make final payments.
- 7. The final Monthly Expenditure Report and Request for Reimbursement form must be submitted to DOH no later than 45 days following the end of the contract year.in order to assure reimbursement of approved costs.

- 8. Backup documentation can include, but is not limited to; receipts, invoices, billing records, work orders, positive time and attendance records (timesheets), travel vouchers and accounting expense reports. Backup documentation shall be kept on file by the fiscal agent and made available upon request by DOH.
- 9. Submission of electronic reports, deliverables, and other invoice attachments are preferred; however hard copies are acceptable.

G. Evaluation of YMPEP Regional Contractor's/LHJ's Performance

- 1. LHJ's performance will be evaluated on the following:
 - a) Biennial submittal and DOH approval of an updated Regional Needs Assessment in accordance with DOH guidance and requirements.
 - b) Biennial submittal and DOH approval of an updated 5-year Regional Strategic Plan in accordance with DOH guidance and requirements.
 - c) Timely completion, submission of proposed Annual Budget (Budget Line Items, Summary Budget Projections, Budget Narrative) and work plan in accordance with DOH guidance and requirements.
 - d) Submission of Electronic A19 Invoice and Financial Back-up Document to DOH Grants Management via ConCon and the YMPEP Budget Workbook by the due dates listed in Section E.
 - e) Submission of 24 monthly Activity Reports by the due dates listed in Section E.
 - f) One on-site visit per biennium per requirements and protocols provided by DOH MPEP.

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

- 1. Recipients may not use funds for research.
- 2. Recipients may not use funds for clinical care.
- 3. Recipients may only expend funds for reasonable program purposes, including personnel, travel, supplies, and services, such as contractual. Recipients may not use funds to buy marijuana products or paraphernalia used in the consumption and/or use of marijuana products.
- 4. Recipients may not generally use funding for the purchase of furniture or equipment. However, if equipment purchase is integral to a selected strategy, it will be considered. Any such proposed spending must be identified in the budget and approved by DOH Contract Manager.
- 5. Recipients may not use funding for construction or other capital expenditures.
- 6. The contractor/LHJ must comply with DOH MPEP guidance on food, incentives and use of DOH logo outlined in the YMPEP Regional Implementation Guide, and should not exceed federal per diem rates.
- 7. Reimbursement of pre-award costs is not allowed.

I. Special References

As a provision of Dedicated Marijuana Account (<u>RCW 69.50.540</u>) DOH shall fund a grants program for local health departments or other local community agencies that supports development and implementation of coordinated intervention strategies for the prevention and reduction of marijuana use by youth.

DOH - Primary Point of Contact:

David Harrelson <u>Angela Boyer</u>, YMPEP Contracts Consultant Manager Office Phone: <u>360-972-0199</u> (360) 688-6140 Email Address: <u>david.harrelson@doh.wa.gov-angela.boyer@doh.wa.gov</u> Mailing Address: PO Box 47855, Olympia, WA 98504-7855

Exhibit A Statement of Work Contract Term: 2018-2021

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: <u>Revision</u> **Revision # (for this SOW)** 7

Period of Performance: January 1, 2018 through December 31, 2021

Funding Source	Federal Compliance	Type of Payment
Federal Contractor	(check if applicable)	Reimbursement
State Other	FFATA (Transparency Act)	Fixed Price

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 extend the Period of Performance thru December 31, 2021, provide Sanitary Survey and Technical Assistance funding in Year 23, revise Special Billing Requirements and Special Instructions, and change DOH Fiscal Contact.

Chart of Accounts Program Name or Title	CFDA #	BARS	Master	Funding Period		Current	Change	Total
		Revenue	Index	(LHJ Use Only)		Consideration	Increase (+)	Consideration
		Code	Code	Start Date	End Date		increase (1)	
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	21,750	0	21,750
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
Yr 23 SRF - Local Asst (15%) (FO-SW) SS	N/A	346.26.64	24239223	01/01/21	12/31/21	0	14,250	14,250
Yr 23 SRF - Local Asst (15%) (FO-SW) TA	N/A	346.26.66	24239223	01/01/21	12/31/21	0	2,000	2,000
TOTALS						43,417	16,250	59,667

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		Provide Final* Sanitary	Final Sanitary Survey	Upon ODW acceptance of the Final
	sanitary surveys of small community		Survey Reports to ODW	Reports must be	Sanitary Survey Report, the LHJ shall
	and non-community Group A water		Regional Office. Complete	received by the ODW	be paid \$250 for each sanitary survey
	systems identified by the DOH Office		Sanitary Survey Reports shall	Regional Office within	of a non-community system with three
	of Drinking Water (ODW) Regional		include:	30 calendar days of	or fewer connections.
	Office.		1. Cover letter identifying	conducting the	
			significant deficiencies,	sanitary survey.	Upon ODW acceptance of the Final
			significant findings,		Sanitary Survey Report, the LHJ shall

AMENDMENT #20

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	See Special Instructions for task activity.		 observations, recommendations, and referrals for further ODW follow-up. Completed Small Water System checklist. Updated Water Facilities Inventory (WFI). Photos of water system with text identifying features Any other supporting documents. *Final Reports reviewed and accepted by the ODW Regional Office. 		 be paid \$500 for each sanitary survey of a non-community system with four 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 2 working days of the service request.	Upon acceptance of the completed SPI Report, the LHJ shall be paid \$800 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.
3	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. See Special Instructions for task activity.		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 30 calendar days of providing technical assistance.	 Upon acceptance of the completed TA Report, the LHJ shall be paid for each technical assistance activity as follows: Up to 3 hours of work: \$250 3-6 hours of work: \$500 More than 6 hours of work: \$750 Payment is inclusive of all associated costs such as consulting fee, travel, lodging, per diem.

AMENDMENT #20

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
					Payment is authorized upon receipt and acceptance of completed TA Report within the 30-day deadline.
					Late or incomplete reports may not be accepted for payment.
4	LHJ staff performing the activities under tasks 1, 2 and 3 must have completed the mandatory Sanitary Survey Training.		Prior to attending the training, submit an "Authorization for Travel (Non-Employee)" DOH Form 710-013 to the ODW	Annually	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
	See Special Instructions for task activity.		Program Contact below for approval (to ensure that enough funds are available).		http://www.ofm.wa.gov/resources/trav el.asp

***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 \$36,000 \$50,250 for Task 1, and \$7,417 \$9,417 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 28 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.
- No more than 7 surveys of non-community systems with three or fewer connections to be completed between January 1, 2021 and December 31, 2021.
- No more than 25 surveys of non-community systems with four or more connections and all community systems to be completed between January 1, 2021 and December 31, 2021.

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
(360) 236-3028

DOH Fiscal Contact

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

Contract Term: 2018-2021

Indirect Rate as of January 2020: 57.90% Admin	i & Fac., 57.9076 Communi	ty fifth F gins (inc	. Aumin) e	x 37.4770 E	iivii oiiiieii	iai mui r g		Jse Only			
				BARS	Statemen	t of Work		Accounts		Funding	Chart of
	Federal Award			Revenue		g Period		g Period		Period	Accounts
Chart of Accounts Program Title	Identification #	Amend #	CFDA*		•	<i>,</i>	Start Date	0	Amount	Sub Total	Total
¥											
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		09/30/19		09/30/19	\$89,063		
FFY18 CSS USDA FINI Prog Mgnt	20157001823357	Amd 8	10.331	333.10.33					(\$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		09/30/19		09/30/19	\$69,167	\$69,675	\$159,900
FFY18 CSS IAR SNAP Ed Program Mgnt CF	187WAWA5Q3903	Amd 4	10.561	333.10.56		09/30/19		09/30/19	\$13,833	\$13,833	
FFY18 CSS IAR SNAP Ed Program Mgnt	187WAWA5Q3903	Amd 4	10.561	333.10.56		09/30/18		09/30/19	\$8,150	\$69,281	
FFY18 CSS IAR SNAP Ed Program Mgnt	187WAWA5Q3903	Amd 2	10.561		01/01/18			09/30/18	\$26,548	\$07,201	
FFY18 CSS IAR SNAP Ed Program Mgnt	187WAWA5Q3903	N/A	10.561	333.10.56				09/30/18	\$34,583		
FFY17 CSS IAR SNAP Ed Program Mgnt CF	1717WAWA5Q390	N/A	10.561		01/01/18				\$6,917	\$6,917	
FFY21 IAR SNAP Ed Prog Mgnt-Region 5	NGA Not Received	Amd 18	10.561	333.10.56	10/01/20	09/30/21	10/01/20	09/30/21	\$97,864	\$97,864	\$97,864
FFY20 Housing People with AIDS Formula	WAH20-F999	Amd 20	14.241	333.14.24	07/01/20	06/30/21	07/01/20	06/30/21	\$26,690	\$53,380	\$194,782
FFY20 Housing People with AIDS Formula	WAH20-F999	Amd 16	14.241	333.14.24	07/01/20	06/30/21	07/01/20	06/30/21	\$26,690		
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	
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		
Hous. Opp for Ppl w/AIDS CARES COVID-19	WA-H2001W074	Amd 17, 18	14.241	333.14.24	07/01/20	06/30/21	01/20/20	06/30/21	\$15,000	\$15,000	\$15,000
BITV-COVID Ed LHJ Allocation-CARES	NGA Not Received	Amd 19	21.019	333.21.01	07/01/20	12/30/21	07/01/20	12/30/21	\$1,096,335	\$1,461,780	\$1,461,780
BITV-COVID Ed LHJ Allocation-CARES	NGA Not Received	Amd 17, 19	21.019					12/30/21	\$365,445	\$1,101,700	\$1,101,700
			211017	000121101	0,701,20	12,00,21	0,7,01720	12,00,21	<i>\$5</i> 00,110		
COVID LHJ OFM Allocation-CARES	NGA Not Received	Amd 17, 19	21.019	333.21.01	03/01/20	06/30/21	03/01/20	06/30/21	\$5,402,000	\$5,402,000	\$5,402,000
PS SSI 1-5 BEACH Task 4	01J18001	Amd 13	66.123	333.66.12	03/01/20	10/31/20	07/01/17	06/30/23	\$5,800	\$5,800	\$17,400
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				07/01/17		\$5,800	\$5,800	

Contract Term: 2018-2021

Indirect Rate as of January 2020: 57.90% Admin	DOH Use Only										
	Federal Award			BARS Revenue		t of Work g Period		Accounts g Period		Funding Period	Chart of Accounts
Chart of Accounts Program Title	Identification #	Amend #	CFDA*	Code**	Start Date	e End Date	Start Date	End Date	Amount	Sub Total	Total
PS SSI 1-5 PIC Task 4 PS SSI 1-5 PIC Task 4	01J18001 01J18001	Amd 2, 8 N/A, Amd 8	66.123 66.123		01/01/18 01/01/18			06/30/19 06/30/19	(\$50,000) \$78,805	\$28,805	\$28,805
FFY19 Swimming Beach Act Grant IAR (ECY) FFY18 Swimming Beach Act Grant IAR (ECY)	01J49701 00J75501	Amd 7 Amd 1	66.472 66.472	333.66.47 333.66.47		10/31/19 10/31/18		10/31/19 12/14/18	\$14,000 \$14,000	\$14,000 \$14,000	\$28,000
FFY17 EPR PHEP BP1 LHJ Funding FFY17 EPR PHEP BP1 LHJ Funding	NU90TP921889-01 NU90TP921889-01	Amd 2 N/A	93.069 93.069		01/01/18 01/01/18			07/02/18 07/02/18	\$44,006 \$119,217	\$163,223	\$163,223
FFY18 EPR PHEP BP1 Supp LHJ Funding FFY18 EPR PHEP BP1 Supp LHJ Funding	NU90TP921889-01 NU90TP921889-01	Amd 5 Amd 4	93.069 93.069	333.93.06 333.93.06	07/01/18 07/01/18		07/01/18 07/01/18	06/30/19 06/30/19	\$5,318 \$290,027	\$295,345	\$295,345
FFY20 PHEP BP2 LHJ Funding FFY20 PHEP BP2 LHJ Funding	NU90TP922043 NU90TP922043	Amd 18 Amd 16, 18	93.069 93.069	333.93.06 333.93.06	07/01/20 07/01/20		07/01/20 07/01/20	06/30/21 06/30/21	\$118,138 \$177,207	\$295,345	\$590,690
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	
FFY20 Overdose Data to Action Prev FFY19 Overdose Data to Action Prev	NU17CE925007 NU17CE925007	Amd 17, 19 Amd 11	93.136 93.136	333.93.13 333.93.13	09/01/20 09/01/19		09/01/20 09/01/19	08/31/21 08/31/20	\$50,000 \$50,000	\$50,000 \$50,000	\$100,000
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 FFY17 AFIX	5NH23IP000762-05-00 5NH23IP000762-05-00	Amd 2, 4 N/A	93.268 93.268		07/01/18 01/01/18			06/30/19 06/30/18	\$27,563 \$14,258	\$27,563 \$14,258	\$41,821
FFY21 COVID19 Vaccine Services-CARES FFY21 COVID19 Vaccine Services-CARES	NH23IP922619 NH23IP922619	Amd 20 Amd 19, 20	93.268 93.268		07/01/20 07/01/20		07/01/20 07/01/20	12/31/21 12/31/21	\$1,022,214 \$42,016	\$1,064,230	\$1,064,230
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
FFY21 PPHF Ops FFY21 PPHF Ops	NH23IP922619 NH23IP922619	Amd 18 Amd 16, 18	93.268 93.069	333.93.26 333.93.06	07/01/20 07/01/20		07/01/20 07/01/20	06/30/21 06/30/21	\$1,250 \$1,250	\$2,500	\$7,500
FFY20 PPHF Ops FFY17 PPHF Ops	NH23IP922619 NH23IP000762	Amd 9 Amd 3, 4	93.268 93.268	333.93.26 333.93.26	07/01/19 07/01/18		07/01/19 04/01/18	06/30/20 06/30/19	\$2,500 \$2,500	\$2,500 \$2,500	
FFY21 VFC IQIP	NH23IP922619	Amd 18	93.268		07/01/20			06/30/21	\$21,000	\$42,000	\$69,588
FFY21 VFC IQIP FFY20 VFC IQIP	NH23IP922619 NH23IP922619	Amd 16, 18 Amd 9	93.069 93.268	333.93.06 333.93.26	07/01/20 07/01/19		07/01/20 07/01/19	06/30/21 06/30/20	\$21,000 \$27,588	\$27,588	

Contract Term: 2018-2021

indirect Rate as of January 2020: 57.90% Admin	a Fac.; 57.96% Community	y Hith Pgms (inc.	Admin) o	2 39.4 / % E	nvironment	al Hith Pg		DOH Use Only									
				BARS	Statement			Accounts		Funding	Chart of						
Chart of Accounts Program Title	Federal Award Identification #	Amend #	CFDA*	Revenue Code**	Funding Start Date	, ,	Funding Start Date	g Period End Date	Amount	Period Sub Total	Accounts Total						
FFY21 VFC Ops	NH23IP922619	Amd 16	93.268	333.93.26	07/01/20	12/31/20	07/01/20	06/30/21	\$8,067	\$8,067	\$31,255						
FFY20 VFC Ops	NH23IP922619	Amd 9	93.268		07/01/19			06/30/20	\$16,134	\$16,134	,						
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 COVID CARES	NU50CK000515	Amd 16, 19	93.323	333.93.32	06/01/20	12/31/21	06/01/20	12/31/21	\$314,824	\$314,824	\$314,824						
FFY19 ELC COVID Ed LHJ Allocation	NGA Not Received	Amd 20	93.323	333.93.32	01/01/21	12/31/21	01/01/21	12/31/21	\$1,145,035	\$1,145,035	\$1,145,035						
FFY20 ELC EDE LHJ Allocation	NGA Not Received	Amd 20	93.323	333.93.32	01/15/21	12/31/21	01/15/21	12/31/21	\$2,560,581	\$2,560,581	\$2,560,581						
FFY20 Tobacco-Vape Prev Comp 1	NU58DP006808	Amd 18	93.387	333.93.38	07/01/20	04/28/21	06/29/20	04/28/21	\$12,241	\$24,482	\$24,482						
FFY20 Tobacco-Vape Prev Comp 1	NU58DP006808	Amd 17, 18	93.387	333.93.38	07/01/20	04/28/21	06/29/20	04/28/21	\$12,241								
FFY20 CDC COVID-19 Crisis Resp LHJ-Tribe	NU90TP922069	Amd 14, 19, <mark>20</mark>	93.354	333.93.35	01/20/20	12/31/21	01/01/20	12/31/21	\$340,263	\$340,263	\$340,263						
FFY20 Phys Actvty & Nutrition Prog	NGA Not Received	Amd 18	93.439	333.93.43	09/30/20	09/29/21	09/30/20	09/29/21	\$60,000	\$60,000	\$180,000						
FFY19 Phys Actvty & Nutrition Prog	NU58DP006504	Amd 10, 16, 18	93.439	333.93.43	09/30/19	09/29/20	09/30/19	09/29/20	\$60,000	\$60,000							
FFY18 Phys Actvty & Nutrition Prog	NU58DP006504	Amd 8	93.439	333.93.43	03/01/19	09/29/19	09/28/18	09/29/19	\$60,000	\$60,000							
FFY17 TCPI PTN Contracts	1L1331455	Amd 1, 3	93.638	333.93.63	01/01/18	09/28/18	09/29/17	09/28/18	\$73,117	\$73,117	\$73,117						
FFY18 PHBG Tobacco PPHF	NB01OT009234	Amd 4	93.758	333.93.75	10/01/18	09/30/19	10/01/18	09/30/19	\$40,000	\$40,000	\$69,034						
FFY17 PHBG Tobacco PPHF	NB01OT00918	Amd 3	93.758	333.93.75	01/01/18	09/29/18	07/01/17	09/30/18	\$3,235	\$29,034							
FFY17 PHBG Tobacco PPHF	NB01OT00918	Amd 2, 3	93.758	333.93.75	01/01/18	09/29/18	07/01/17	09/30/18	\$5,799								
FFY17 PHBG Tobacco PPHF	NB01OT00918	N/A, Amd 3	93.758	333.93.75	01/01/18	09/29/18	07/01/17	09/30/18	\$20,000								
FFY17 EPR HPP BP1 Healthcare System Prep	NU90TP921889-01	Amd 2	93.889	333.93.88	01/01/18	06/30/18	07/01/17	07/02/18	\$4,477	\$18,420	\$18,420						
FFY17 EPR HPP BP1 Healthcare System Prep	NU90TP921889-01	N/A	93.889	333.93.88	01/01/18	06/30/18	07/01/17	07/02/18	\$13,943								
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				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								

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Indirect Rate as of January 2020: 57.96% Adn	in & rac., 57.9076 Communi	ty fifth F gins (inc.	. Aumin) e	C 37.47 /0 E	iivii oiiiieii	tai mui r g		Jse Only			
				BARS	Statemen	t of Work		Accounts		Funding	Chart of
	Federal Award			Revenue	Fundin	g Period	Funding	g Period		Period	Accounts
Chart of Accounts Program Title	Identification #	Amend #	CFDA*	Code**	Start Date	e End Date	Start Date	End Date	Amount	Sub Total	Total
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
Ryan White Part B COVID-19 Response	6X7CHA368990101	Amd 16, 20	93.917	333.93.91	01/20/20	09/30/21	01/20/20	09/30/21	\$24,730	\$24,730	\$24,730
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
FFY21 MCHBG LHJ Contracts	BO440169	Amd 18	93.994	333.93.99		09/30/21		09/30/21	\$159,854	\$159,854	\$599,453
FFY20 MCHBG LHJ Contracts	B04MC32578	Amd 10	93.994	333.93.99		09/30/20		09/30/20	\$159,854	\$159,854	
FFY19 MCHBG LHJ Contracts	B04MC32578	Amd 4	93.994	333.93.99		09/30/19		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	
FEMA-75 COVID LHJ Allocation	NGA Not Received	Amd 19	97.036	333.97.03	07/01/20	12/30/20	07/01/20	12/30/20	(\$1,096,335)	\$0	\$0
FEMA-75 COVID LHJ Allocation	NGA Not Received	Amd 17	97.036	333.97.03	07/01/20	12/30/20	07/01/20	12/30/20	\$1,096,335		
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 18	N/A	334.04.91	07/01/20	06/30/21	07/01/19	06/30/21	\$20,000	\$40,000	\$134,478
State Drug User Health Program		Amd 16, 18	N/A	334.04.91	07/01/20	06/30/21	07/01/19	06/30/21	\$20,000		
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	
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	

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							DOH U	se Only			
				BARS	Statement	of Work	Chart of	Accounts		Funding	Chart of
	Federal Award			Revenue	Funding	g Period	Funding	g Period		Period	Accounts
Chart of Accounts Program Title	Identification #	Amend #	CFDA*	Code**	Start Date	End Date	Start Date	End Date	Amount	Sub Total	Total
State HIV Prevention		Amd 8	N/A	334.04.91	01/01/19	06/20/10	07/01/17	06/30/19	(\$43,333)	\$0	\$51,667
State HIV Prevention		Amd 6	N/A N/A	334.04.91	01/01/19		07/01/17	06/30/19	\$43,333	\$0	\$51,007
State HIV Prevention		Amd 6	N/A N/A	334.04.91	07/01/19		07/01/17	06/30/19	\$43,333 \$11,667	\$21 667	
State HIV Prevention		N/A	N/A N/A	334.04.91	07/01/18		07/01/17	06/30/19	\$20,000	\$31,667	
State HIV Prevention		N/A N/A	N/A N/A				07/01/17	06/30/19		\$20,000	
State HIV Prevention		IN/A	IN/A	334.04.91	01/01/18	00/30/18	0//01/1/	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	
FY20/21 COVID-19 Disaster Response Acct		Amd 14, 19	N/A	334.04.92	01/20/20	06/30/21	01/01/20	06/30/21	\$309,737	\$309,737	\$309,737
FPH Lead Case Mgmt-FPH		Amd 15	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/20	(\$2,425)	\$1,000	\$1,000
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		
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			07/01/17	06/30/18	\$3,000	\$3,000	
SFY21 Marijuana Education		Amd 16, 18	N/A	334.04.93	07/01/20	06/30/21	07/01/20	06/30/21	\$5,766	\$5,766	\$506,734
SFY21 Marijuana Education		Amd 9, 20	N/A	334.04.93		06/30/21	07/01/20	06/30/21	\$247,509	\$247,509	\$500,754
SFY20 Marijuana Education		Amd 10	N/A	334.04.93	07/01/19		07/01/19	06/30/20	\$5,950	\$5,950	
SFY20 Marijuana Education		Amd 9	N/A	334.04.93			07/01/19	06/30/20	\$247,509	\$247,509	
										A	
SFY19 Marijuana Tobacco Edu		Amd 3	N/A	334.04.93			07/01/18	06/30/19	\$247,509	\$247,509	\$403,323
SFY19 Marijuana Tobacco Edu		Amd 2	N/A	334.04.93	07/01/18		07/01/18	06/30/19	\$7,501	\$7,501	
SFY18 Marijuana Tobacco Edu		Amd 3	N/A	334.04.93	01/01/18		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 19	N/A	334.04.93	07/01/19	06/30/21	07/01/19	06/30/21	\$7,500	\$22,500	\$45,000
Rec Shellfish/Biotoxin		Amd 9, 16, 19	N/A	334.04.93	07/01/19	06/30/21	07/01/19	06/30/21	\$15,000		
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	

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Indirect Rate as of January 2020: 57.96% Admin	& Fac., 57.5070 Commu	inty finth I gills (life.	. Aumin) e	C 37.47 /0 E	iivii oninen	tai intii i g		se Only			
				BARS	Statemen	t of Work		Accounts		Funding	Chart of
	Federal Award			Revenue	Funding	g Period	Funding	g Period		Period	Accounts
Chart of Accounts Program Title	Identification #	Amend #	CFDA*	Code**	Start Date	e End Date	Start Date	End Date	Amount	Sub Total	Total
Small Onsite Management (ALEA)		Amd 19	N/A	334.04.93	01/01/21	06/30/21	07/01/19	06/30/21	\$15,000	\$15,000	\$90,000
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	ŕ
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 19	N/A	334.04.93	01/01/21	06/30/21	07/01/19	06/30/21	\$15,000	\$15,000	\$60,000
Wastewater Management-GFS		Amd 9, 19	N/A	334.04.93	07/01/20	06/30/21	07/01/19	06/30/21	\$15,000	\$15,000	
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	
FPH-Youth Tobacco Vapor Prevention		Amd 16, 18	N/A	334.04.93	07/01/20	06/30/21	07/01/19	06/30/21	\$24,289	\$24,289	\$48,801
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	
Youth Tobacco Vapor Products		Amd 16, 18	N/A	334.04.93	07/01/20	06/30/21	07/01/19	06/30/21	\$38,402	\$38,402	\$159,493
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	
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		
FFY20 Swim Beach Act Grant IAR (ECY-ALEA)		Amd 15	N/A	334.04.96	03/01/20	10/31/20	12/15/19	12/14/20	\$18,000	\$18,000	\$18,000
HIV Local Proviso		Amd 18	N/A	334.04.98	07/01/20	06/30/21	07/01/19	06/30/21	\$41,748	\$83,496	\$83,496
HIV Local Proviso		Amd 16, 18	N/A	334.04.98	07/01/20	06/30/21	07/01/19	06/30/21	\$41,748		
ADAP Rebate (Local) 19-21		Amd 16, 18	N/A	334.04.98	07/01/20	06/30/21	07/01/19	06/30/21	\$45,864	\$45,864	\$137,592
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	
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		

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Indirect Rate as of January 2020: 37.96% Admin	n & Fat., 57.7070 Unilliun	ity min i gins (inc.	. Auninij e	с J7.4 / /о L	nvn onnielli	ai mu rg		se Only			
				BARS	Statemen			Accounts		Funding	Chart of
Chart of Accounts Descence Title	Federal Award Identification #	Amend #	CFDA*	Revenue Code**	Funding Stort Date	, ,	Funding Start Date	g Period	Amount	Period Sub Total	Accounts Total
Chart of Accounts Program Title	Identification #	Amenu #	СГБА	Coue	Start Date	Ellu Date	Start Date	Ellu Date	Amount	Sub Total	10001
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		
FFY21 RW Grant Year Local (Rebate)		Amd 18	N/A	334.04.98	04/01/21	06/30/21	04/01/21	03/31/22	\$116,146	\$116,146	\$1,269,487
FFY20 RW Grant Year Local (Rebate)		Amd 18	N/A	334.04.98	07/01/20	03/31/21	04/01/20	03/31/21	\$116,146	\$348,438	
FFY20 RW Grant Year Local (Rebate)		Amd 16, 18	N/A	334.04.98			04/01/20	03/31/21	\$232,292		
FFY20 RW Grant Year Local (Rebate)		Amd 12	N/A	334.04.98	04/01/20		04/01/20	03/31/21	(\$27,285)	\$88,861	
FFY20 RW Grant Year Local (Rebate)		Amd 9	N/A	334.04.98	04/01/20		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 17, 19	N/A	336.04.25	07/01/20	06/30/21	07/01/19	06/30/21	\$64,789	\$212,134	\$571,613
FPHS Funding for LHJs		Amd 10, 19	N/A	336.04.25	07/01/20	06/30/21	07/01/19	06/30/21	\$147,345		
FPHS Funding for LHJs		Amd 17	N/A	336.04.25	07/01/19	06/30/20	07/01/19	06/30/21	\$64,789	\$212,134	
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		
FPHS Funding for LHJs Dir		Amd 3	N/A	336.04.25	07/01/18	06/30/19	07/01/17	06/30/19	\$147,345	\$147,345	
YR 20 SRF - Local Asst (15%) (FS) SS		Amd 3	N/A	346.26.64	01/01/18	12/31/18	07/01/15	12/31/18	(\$14,750)	\$0	\$0
YR 20 SRF - Local Asst (15%) (FS) SS		N/A, Amd 3	N/A	346.26.64	01/01/18	12/31/18	07/01/15	12/31/18	\$14,750		
YR 21 SRF - Local Asst (15%) (FS) SS		Amd 10	N/A	346.26.64	01/01/18			06/30/19	(\$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 15	N/A	346.26.64	01/01/19	12/31/20	07/01/19	06/30/21	\$500	\$21,750	\$21,750
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		
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 23 SRF - Local Asst (15%) (FO-SW) SS		Amd 20	N/A	346.26.64	01/01/21	12/31/21	09/01/20	06/30/21	\$14,250	\$14,250	\$14,250
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		

EXHIBIT B-20 ALLOCATIONS Contract Term: 2018-2021

Contract Number: CLH18248 Date: January 15, 2021

Indirect Rate as of January 2018: 34.98% Admin & Fac.; 37.62% Community HIth Pgms (inc. Admin) & 40.39% Environmental HIth Pgms (inc. Admin) Indirect Rate as of January 2019: 37.38% Admin & Fac.; 39.19% Community HIth Pgms (inc. Admin) & 39.83% Environmental HIth Pgms (inc. Admin) Indirect Rate as of January 2020: 37.96% Admin & Fac.; 37.96% Community HIth Pgms (inc. Admin) & 39.47% Environmental HIth Pgms (inc. Admin)

							DOH U	se Only			
				BARS	Statemen	t of Work	Chart of	Accounts		Funding	Chart of
	Federal Award			Revenue	Funding	g Period	Funding	g Period		Period	Accounts
Chart of Accounts Program Title	Identification #	Amend #	CFDA*	Code**	Start Date	e End Date	Start Date	End Date	Amount	Sub Total	Total
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		
YR 22 SRF - Local Asst (15%) (FO-SW) TA		Amd 20	N/A	346.26.66	01/01/21	12/31/21	09/01/20	06/30/21	\$2,000	\$2,000	\$2,000
TOTAL									\$20,055,953	\$20,055,953	
Total consideration:	\$15,285,183									GRAND TOTAL	\$20,055,953
GRAND TOTAL	\$4,770,770 \$20,055,953									Total Fed	\$15,616,040
*Catalog of Federal Domestic Assistance										Total State	\$4,439,913

*Catalog of Federal Domestic Assistance

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

KITSAP PUBLIC HEALTH DISTRICT-SWV0027359-00

CONTRACT CLH18248-Kitsap Public Health District

CONTRACT PERIOD: 01/01/2018-12/31/2021

Date: January 15, 2021

		DOH	Total Amt	Allocatio	on Period						
Chart of Accounts Program Title	BARS	Federal Award Date	Federal Award	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
FFY21 IAR SNAP ED PROG MGNT-REGION 5	333.10.56	NGA Not Received	NGA Not Received	10/01/20	09/30/21	\$97,864	10.561	State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	Department of Agriculture Food and Nutrition Service	NGA Not Received	NGA Not Received
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)
HOUS. OPP FOR PPL W/ AIDS CARES COVID-19	333.14.24	07/01/20	\$145,149	01/20/20	06/30/21	\$15,000	14.241	Housing Opportunities for Persons with AIDS	Department of Housing and Urban Development	WA-H2001W074	HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA) PROGRAM SUPPLEMENTAL CARES ACT
FFY20 HOUSING PEOPLE WITH AIDS FORMULA	333.14.24	08/20/20	\$1,216,499	07/01/20	06/30/21	\$53,380	14.241	Housing Opportunities for Persons with AIDS	Department of Housing and Urban Development	WAH20-F999	HOUSING OPPORTUNITIES FOR PERSON WITH AIDS (HOPWA) PROGRAM
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
COVID LHJ OFM ALLOCATION-CARES	333.21.01	NGA Not Received	NGA Not Received	03/01/20	06/30/21	\$5,402,000	21.019	Coronavirus Relief Fund	Department of the Treasury	NGA Not Received	NGA Not Received
BITV-COVID ED LHJ ALLOCATION-CARES	333.21.01	NGA Not Received	NGA Not Received	07/01/20	12/30/21	\$1,461,780	21.019	Coronavirus Relief Fund	Department of the Treasury	NGA Not Received	NGA Not Received

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CONTRACT PERIOD: 01/01/2018-12/31/2021

Date: January 15, 2021

		DOH	Total Amt	Allocatio	on Period						
Chart of Accounts Program Title	BARS	Federal Award Date	Federal Award	Start Date	End Date	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Award Identification Number	Federal Grant Award Name
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 Notificaiton Program Implementation Grants	Environmental Protection Agency Office of Water	01J49701	MARINE SWIMMING BEACH MONITORING AND PUBLIC NOTIFICATION
FFY18 SWIMMING BEACH ACT GRANT IAR (ECY)	333.66.47	12/15/17	\$91,990	03/01/18	10/31/18	\$14,000	66.472	Beach Monitoring and Notificaiton Program Implementation Grants	Environmental Protection Agency Office of Water	00J75501	MARINE SWIMMING BEACH MONITORING AND PUBLIC NOTIFICATION
FFY20 PHEP BP2 LHJ FUNDING	333.93.06	06/12/20	\$11,365,797	07/01/20	06/30/21	\$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
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
FFY17 EPR PHEP BP1 LHJ FUNDING	333.93.06	07/18/17	\$11,062,782	01/01/18	06/30/18	\$163,223	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921889-01	HOSPITAL PREPAREDNESS PROGRAM AND PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT
FFY20 OVERDOSE DATA TO ACTION PREV	333.93.13	11/06/20	\$4,390,240	09/01/20	08/31/21	\$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	NU17CE925007	WASHINGTON STATE DEPARTMENT OF HEATLH OVERDOSE DATA TO ACTION
FFY19 OVERDOSE DATA TO ACTION PREV	333.93.13	08/12/19	\$4,390,240	09/01/19	08/31/20	\$50,000	93.136	Injury Prevention and Control Research and State and Community-Based Programs	Department of Health and Human Services-Centers for Disease Control and Prevention-National Center for Injury Prevention and Control	NU17CE925007	WASHINGTON STATE DEPARTMENT OF HEATLH OVERDOSE DATA TO ACTION
FFY21 VFC OPS	333.93.26	07/01/20	\$9,082,252	07/01/20	12/31/20	\$8,067	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
FFY21 VFC IQIP	333.93.26	07/01/20	\$9,082,252	07/01/20	06/30/21	\$42,000	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
FFY21 PPHF OPS	333.93.26	07/01/20	\$9,082,252	07/01/20	06/30/21	\$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
FFY21 COVID19 VACCINE SERVICES-CARES	333.93.26	01/15/21	\$68,807,053	07/01/20	12/31/21	\$1,064,230	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY20 VFC OPS	333.93.26	07/01/19	\$9,234,835	07/01/19	06/30/20	\$16,134	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM

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		DOH	Total Amt		n Period						
Chart of Accounts Program Title	BARS	Federal Award Date	Federal Award	Start Date	End Date	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Award Identification Number	Federal Grant Award Name
FFY20 VFC IQIP	333.93.26	07/01/19	\$9,234,835	07/01/19	06/30/20	\$27,588	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY20 PPHF OPS	333.93.26	07/01/19	\$9,234,835	07/01/19	06/30/20	\$2,500	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY17 VFC OPS	333.93.26	03/03/17	\$1,201,605	01/01/18	06/30/18	\$7,054	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	5NH23IP000762-05-00	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY17 PPHF OPS	333.93.26	06/29/18	\$3,634,512	07/01/18	06/30/19	\$2,500	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP000762	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY17 INCREASING IMMUNIZATION RATES	333.93.26	06/29/18	\$1,722,443	07/01/18	06/30/19	\$16,134	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP000762	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY17 AFIX	333.93.26	03/03/17	\$1,672,289	01/01/18	06/30/19	\$41,821	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	5NH23IP000762-05-00	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY17 317 OPS	333.93.26	03/03/17	\$575,969	01/01/18	06/30/18	\$4,837	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	5NH23IP000762-05-00	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY19 TOBACCO PREVENTION	333.93.30	03/04/19	\$5,538,507	03/29/19	04/28/20	\$24,482	93.305	National State Based Tobacco Control Programs	Department of Health and Human Services Centers for Disease Control and Prevention	NU58DP006004	TOBACCO CONTROL PROGRAM
FFY18 TOBACCO PREVENTION	333.93.30	03/22/18	\$1,081,051	03/29/18	03/29/19	\$11,012	93.305	National State Based Tobacco Control Programs	Department of Health and Human Services Centers for Disease Control and Prevention	U58DP006004	TOBACCO CONTROL PROGRAM
FFY20 ELC EDE LHJ ALLOCATION	333.93.32	NGA Not Received	NGA Not Received	01/15/21	12/31/21	\$2,560,581	93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)-Building and Strengthening Epidemiology, Laboratory and	Department of Health and Human Services Centers for Disease Control and Prevention	NGA Not Received	NGA Not Received
FFY19 ELC COVID ED LHJ ALLOCATION	333.93.32	NGA Not Received	NGA Not Received	01/01/21	12/31/21	\$1,145,035	93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)-Building and Strengthening Epidemiology, Laboratory and	Department of Health and Human Services Centers for Disease Control and Prevention	NGA Not Received	NGA Not Received
FFY19 COVID CARES	333.93.32	04/23/20	\$22,581,799	06/01/20	12/31/21	\$314,824	93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)-Building and Strengthening Epidemiology, Laboratory and	Department of Health and Human Services Centers for Disease Control and Prevention	NU50CK000515	EPIDEMIOLOGY & LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)-BUILDING & STRENGTHENING EPIDEMIOLOGY,
FFY20 CDC COVID-19 CRISIS RESP LHJ-TRIBE	333.93.35	03/16/20	\$13,230,799	01/20/20	12/31/21	\$340,263	93.354	Public Health Emergency Response: Cooperative Agreement for Emergency Response: Public Health Crisis	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP922069	CDC COOPERATIVE AGREEMENT FOR EMERGENCY RESPONSE: PUBLIC HEALTH CRISIS RESPONSE CDC-RFA-TP18-1802
FFY20 TOBACCO-VAPE PREV COMP 1	333.93.38	06/21/20	\$1,523,776	07/01/20	04/28/21	\$24,482	93.387	National and State Tobacco Control Program	Department of Health and Human Services Centers for Disease Control and Prevention	NU58DP006808	TOBACCO AND VAPOR PRODUCT PREVENTION AND CONTROL PROGRAM
FFY20 PHYS ACTVTY & NUTRITION PROG	333.93.43	NGA Not Received	NGA Not Received		09/29/21	\$60,000	93.439	State Physical Activity and Nutrition (SPAN)	Department of Health and Human Services (HHS) Centers for Disease Control and Prevention (CDC)	NGA Not Received	NGA Not Received

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		DOH	Total Amt	Allocatio	on Period						
Chart of Accounts Program Title	BARS	Federal Award Date	Federal Award	Start Date	End Date	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Award Identification Number	Federal Grant Award Name
FFY19 PHYS ACTVTY & NUTRITION PROG	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
FFY18 PHYS ACTVTY & NUTRITION PROG	333.93.43	09/01/18	\$923,000	03/01/19	09/29/19	\$60,000	93.439	State Physical Activity and Nutrition (SPAN)	Department of Health and Human Services	NU58DP006504	STATE PHYSICAL ACTIVITY AND NUTRITION-WASHINGTON (SPANWA
FFY17 TCPI PTN CONTRACTS	333.93.63	09/24/15	\$11,254,883	01/01/18	09/28/18	\$73,117	93.638	ACA-Transforming Clinical Practice Initiative: Practice Transformation Networks (PTNs)	Department of Health and Human Services Centers for Medicare and Medicaid Services	1L1331455	TRANSFORMING CLINICAL PRACTICES INITIATIVE
FFY18 PHBG TOBACCO PPHF	333.93.75	08/31/18	\$1,675,032	10/01/18	09/30/19	\$40,000	93.758	Preventive Health and Health Services Block Grant funded solely with Prevention and Public Health Funds (PPHF)	Department of Health and Human Services Health Centers for Disease Control and Prevention	NB01OT009234	PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT 2018
FFY17 PHBG TOBACCO PPHF	333.93.75	03/09/17	\$1,557,831	01/01/18	09/29/18	\$29,034	93.758	Preventive Health and Health Services Block Grant funded solely with Prevention and Public Health Funds (PPHF)	Department of Health and Human Services Health Centers for Disease Control and Prevention	NB01OT00918	PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT
FFY17 EPR HPP BP1 HEALTHCARE SYS PREP	333.93.88	07/18/17	\$4,279,234	01/01/18	06/30/18	\$18,420	93.889	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921889-01	HPP AND PHEP COOPERATIVE AGREEMENT
RYAN WHITE PART B COVID-19 RESPONSE	333.93.91	05/19/20	\$320,994	01/20/20	09/30/21	\$24,730	93.917	HIV Care Formula Grants	Department of Health & Human Services Administration	6X7CHA368990101	RYAN WHITE HIV/AIDS PROGRAM PART B COVID19 RESPONSE
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
FFY21 MCHBG LHJ CONTRACTS	333.93.99	02/08/21	\$2,662,201	10/01/20	09/30/21	\$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	B0440169	MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT
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

KITSAP PUBLIC HEALTH DISTRICT-SWV0027359-00
CONTRACT CLH18248-Kitsap Public Health District
CONTRACT PERIOD: 01/01/2018-12/31/2021

AMENDMENT #20

Date: January 15, 2021

CONTRACT FERIOD. 01/01/2010-12/31/2021											
		DOH	Total Amt	Allocatio	n Period						
Chart of Accounts Program Title	BARS	Federal	Federal	Start	End	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Award	Federal Grant Award Name
	BARS	Award Date	Award	Date	Date	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Identification Number	Federal Grafit Award Name

TOTAL \$15,616,040

KC 546-20B AMENDMENT TO PROFESSIONAL SERVICES AGREEMENT Between KITSAP PUBLIC HEALTH DISTRICT And KITSAP COUNTY

This Amendment ("Amendment") to the Professional Services Agreement Between Kitsap Public Health District and Kitsap County KC 546-20 ("Contract") is entered into between Kitsap County ("Contractor") and the Kitsap Public Health District ("District").

WHEREAS, the Parties entered into the Contract effective March 1, 2020, which was subsequently amended by KC 546-20A; and

WHEREAS, the reimbursement period of allocated funding through the CARES Act has been extended and therefore the parties desire to extend the Contract term to June 30, 2021, and

WHEREAS, the District desires to give to the County additional funding it does not expect to expend on its own operations by the expiration date of the CARES Act funding.

In consideration of the mutual benefits and covenants contained herein, the parties agree that Contract is amended as follows:

- 1. <u>Section 2 Purpose</u>. Section 2 is amended to increase the amount of eligible funding from \$850,000 to \$2,050,000.
- 2. <u>Section 5 Compensation</u>. Section 5 is amended to increase the amount of eligible funding from \$850,000 to \$2,050,000.
- 3. <u>Attachment A-1, Scope of Work and Compensation</u>. Attachment A-1 is amended to increase the compensation amount of eligible funding from \$850,000 to \$2,050,000.
- 4. <u>Other Provisions Unchanged</u>. Except as expressly provided in this Amendment, all other terms and conditions of the Contract, and any subsequent amendments, addenda, or modifications thereto, remain unchanged in full force and effect.
- 5. <u>Counterparts</u>. This Contract Amendment may be executed in several counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same agreement.
- 6. <u>Effective Date</u>. The effective date of this Amendment is the date last executed by all parties.
- 7. <u>Authorization</u>. 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.

[Signatures on next page]

DATED thisday of 2021.	DATED thisday of 2021.
KITSAP PUBLIC HEALTH DISTRICT By: Keith Grellner, Administrator	BOARD OF COUNTY COMMISSIONERS KITSAP COUNTY, WASHINGTON
	ROBERT GELDER, Chair
	CHARLOTTE GARRIDO, Commissioner
	EDWARD E. WOLFE, Commissioner
	ATTEST:
	DANA DANIELS, Clerk of the Board

AGREEMENT AMENDMENT A

This AGREEMENT AMENDMENT is made and entered into between KITSAP COUNTY, a municipal corporation, with its principal offices at 614 Division Street, Port Orchard, Washington 98366, hereinafter "COUNTY", and Kitsap Public Health District, hereinafter "CONTRACTOR."

In consideration of the mutual benefits and covenants contained herein, the parties agree that their Contract, numbered as Kitsap County Contract No. KC-474-20, executed on January 25, 2021, shall be amended as follows:

- 1. This contract amendment updates how many families will be served from seven (7) to twenty (20) families.
- 2. Exhibit B: Budget shall be replaced in its entirety.

Adding \$38,217 in additional funds to an existing contract for the purpose of augmenting state and federal funding of evidence-based substance abuse prevention programs and services for the time period of January 1, 2021 – June 30, 2021.

Contract total is increased from \$20,220 to \$58,437.

- 3. Attachment G is added.
- 4. Except as expressly provided in this Contract Amendment, all other terms and conditions of the original Contract, and any subsequent amendments, addenda or modifications thereto, remain in full force and effect.

KPHD 2131 Amendment 1

This amendment shall be effective upon execution by the parties.

DATED this day, 2021.	DATED this day, 2021.					
KITSAP PUBLIC HEALTH DISTRICT	KITSAP COUNTY					
Keith Grellner, Administrator	ROBERT GELDER, Chair					
	EDWARD E. WOLFE, Commissioner					
	CHARLOTTE GARRIDO, Commissioner					
	ATTEST:					
	Dana Daniels, Clerk of the Board					

Approved as to form by the Prosecuting Attorney's Office

Kitsap Public Health District KC-474-20-A 1/1/2021 – 6/30/21								
Expenditure CostFund SourceTime PeriodPrevious BudgetChanges this ContractCurrent Budget								
Nurse-Family Partnership Program Staff hours	WA State Dedicated Marijuana Funds	1/1/21-6/30/21	\$0.00		\$20,220.00			
Nurse-Family Partnership Program Staff Hours	Substance Abuse Block Grant funds	1/1/21 – 6/30/21	\$20,220.00	\$38,217.00	\$58,437.00			
Total		<u> </u>	\$20,220.00	\$38,217.00	\$58,437.00			

KPHD 2131 Amendment 1 ATTACHMENT G - Substance Abuse and Mental Health Services Administration (SAMHSA) Award Terms 1.

SAMHSA Award Terms. I. This grant is subject to the terms and conditions, included directly, or incorporated by reference on the Notice of Award (NoA). II. Grant funds cannot be used to supplant current funding of existing activities. III. By law, none of the funds awarded can be used to pay the salary of an individual at a rate in excess of the Executive Level 1, which is \$199,700 annually. IV. Awardees and sub-recipients must maintain records which adequately identify the source and application of funds provided for financially assisted activities. These records must contain information pertaining to grant or sub-grant awards and authorizations, obligations, unobligated balances, assets, liabilities, outlays or expenditures, and income. SAMHSA or its designee may conduct a financial compliance audit and onsite program review of grants with significant amounts of Federal funding. V. Per 45 Code of Federal Regulations (CFR) 74.36 and 45 CFR 92.34 and the US Department of Health and Human Services Grants Policy Statement, any copyrighted or copyrightable works developed under this cooperative agreement/grant shall be subject to royalty-free, nonexclusive and irrevocable license to the government to reproduce, publish, or otherwise use them and to authorize others to do so for General Government purposes. Income earned from any copyrightable work developed under this grant must be used as program income. VI. Program income accrued under this award must be used in accordance with the additional costs alternative described in 45 CFR 74.24(b)(1) or 45 CFR 92.25(g)(2) as applicable. Program income must be used to further the grant objectives and shall only be used for allowable costs as set forth in the applicable Office of Management and Budget circulars A-102 and A-110. VII. No part of an appropriation contained in this Act shall be used, other than for normal and recognized executive-legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, radio, television, or video presentation designed to support or defeat legislation pending before the Congress, except in presentation to the Congress itself or any State legislature. VIII. No part of any appropriation contained in this Act shall be used to pay the salary or expenses of any grant or contract recipient, or agency acting for such recipient, related to any activity designed to influence legislation or appropriations pending before the Congress or any State legislature. IX. Where a conference is funded by a grant or cooperative agreement the recipient must include the following statement on all conference materials (including promotional materials, agenda, and internet sites): "Funding for this conference was made possible (in part) by Grants, and from SAMHSA. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government." X. If federal funds are used by the Contractor to attend a meeting, conference, etc. and meal(s) are provided as part of the program, then the per diem applied to the Federal travel costs (Meal and Incidental Expenses allowance) must be reduced by the allotted meal cost(s). XI. Marijuana Attestation. The primary award recipient and all subrecipients (contractor & sub-awardee) will not use funds, directly or indirectly, to purchase, prescribe, or provide marijuana or treatment using marijuana. Treatment in this context includes the treatment of opioid use disorder. Grant funds also will Washington State Health Care Authority Page 69 of 86 CPWI Prevention Services HCA Contract K3923, Amendment 1 Attachment 7 - Substance Abuse and Mental Health Services Administration (SAMHSA) Award Terms KC-509-19-A DocuSign Envelope ID: CD3D70F4-F4BF-446D-9944-D1 D8540D0883 not be provided to any individual who or organization that provides or permits marijuana use for the purposes of treating substance use or mental disorders (45 CFR. § 75.300(a); 21 United States Code §§ 812(c) (10) and 8410). This prohibition does not apply to those providing such treatment in the context of clinical research permitted by the Drug Enforcement Administration and under a US Food and Drug Administration-approved

KPHD 2131 Amendment 1

investigational new drug application where the article being evaluated is marijuana or a constituent thereof that is otherwise a banned controlled substance under federal law. XII. SABG Block Grant Attestation: SABG Block grant funds will not be used to supplant State funding of alcohol and other drug prevention and treatment programs. (45 CFR section 96.123(a)(10)).

BINDER

(Summary of Coverage)

MEMBER:

Kitsap Public Health District 345 6th St, Suite 300 Bremerton, Washington 98337

MEMORANDUM #

2021-00-012

EFFECTIVE: 9/1/2020 through 8/31/2021

This is to certify that the Memorandum of Coverage has been issued to the Member named above for the period indicated.

COVERAGE:	COVERAGE TYPE	LIMIT	DEDUCTIBLE
GENERAL LIABILITY General Liability; Professional Liability; Personal Liability	Each occurrence	\$20,000,000	\$10,000
AUTO LIABILITY Hired and Non-Owned; Temporary Substitute	Each occurrence	\$20,000,000	\$10,000
PUBLIC OFFICIALS ERRORS AND OMISSIONS LIABILITY	Each Wrongful Act Member Aggregate	\$20,000,000 \$20,000,000	\$10,000
TERRORISM LIABILITY	Each Occurrence Aggregate	\$500,000 \$1,000,000	\$10,000
EMPLOYMENT PRACTICES LIABILITY	Aggregate Per member	\$20,000,000	20% Co Pay*
CRIME BLANKET COVERAGE WITH FAITHFUL PERFORMANCE OF DUTY	Per Occurrence Member Aggregate	\$250,000 N/A	\$1,000
NAMED POSITION COVERAGE WITH FAITHFUL PERFORMANCE OF DUTY	Per Occurrence	N/A	N/A
	Member Aggregate	N/A	
PROPERTY/MOBILE EQUIPMENT/BOILER AND MACHINERY Property; Mobile Equipment; Boiler & Machinery	Replacement Cost	Per Schedule with Enduris	Per Schedule with Enduris
CYBER COVERAGE	Each Claim Member Aggregate	\$2,000,000	20% Co Pay*
AUTOMOBILE PHYSICAL DAMAGE	Per Schedule with Enduris	N/A	\$250
DENTITY FRAUD EXPENSE REIMBURSEMENT	Per Occurrence Member Aggregate	\$25,000 \$25,000	\$1,000

*CoPay may be waived as per Memorandum of Coverage



alache

Authorized Representative Chief Operating Officer

1610KitsaphRublic, HealthoDistricte Washington - 99KG-47453988-0910 - Toll Free (800) 462-8418 - Fax (509) 747-38756

KPHD 2131 Amendment 1 SAM Search Results List of records matching your search for : Search Term : KITSAP PUBLIC HEALTH DISTRICT* Record Status: Active						
	C HEALTH DISTRICT	Status: Active				
DUNS: 169167202 +4:	CAGE Code:	0UMV3 DoDAAC:				
Expiration Date: 12/14/2021	Has Active Exclusion?: No	Debt Subject to Offset?: No				
Address: 345 6TH ST STE 300City: BREMERTONState/Province: WASHINGTONZIP Code: 98337-1866Country: UNITED STATES						



PO Box 641 Port Townsend, WA 98368

CLALLAM • JEFFERSON • KITSAP

March 31, 2021

Kitsap Public Health District (KPHD) Attn: Siri Kushner

Subject: Application for Olympic Region COVID-19 Recovery Funds

Dear Siri,

Thank you for the careful thought and time that went into the development of KPHD's application to support COVID-19 recovery in the Olympic region. We reviewed a number of applications based on alignment to the COVID-19 recovery strategies and scoring criteria outlined in the application. Final funding decisions were made by the OCH Executive Committee.

OCH is pleased to inform you that your request will be fully funded in the amount of \$75,000.

To ensure timely receipt of funds, please review this letter and provide the requested information. Once the requested information is received, OCH will issue payment.

I acknowledge the following:

- I am authorized to accept these funds from Olympic Community of Health and will use them to support COVID-19 recovery in my organization as outlined in my funding application.
- I will be required to complete reporting related to these funds in December of 2021.
- Distribution of these funds is public information and OCH is required to report to the Health Care Authority on their use.

Signature:	Date:
Organization/Tribe:	
Mailing address:	
OCH Implementation Partners have the option to receiv Financial Executor portal or via a check. Please indicate	C C

_____ Electronic payment via the FE portal _____ Check via the mail

OlympicCH.org

Thank you for your work to keep the Olympic region healthy and safe. I appreciate your partnership.

Sincerely,

Canmalu

Celeste Schoenthaler Executive Director

Kitsap Public Health District

New or Renewed Contracts for the Period of 02/01/2021 through 02/28/2021

(PHD Contract ID	KPHD Program	Contract Type	Contract Length	KPHB Approved	Contract Amount	Signed Date	Start Date	End Date	Client Contract ID
ctive (4 co	ontracts)								
OH, Wash	ningston State								
D: 2134	Assessment and Epidemiology, Kari Hur	nter Data Sharing Agreement	Closed			02/05/21	01/01/21	12/31/22	CLH25992-0
Descrip	tion: Allows KPHD to access COVID-19 va	accine administration data from WAIIS							
OH, Wash	nington State								
D: 2138	Administration, Keith Grellner	Amendment	Closed	02/02/21	\$1,353,058.00	02/08/21	01/01/18	12/31/21	CLH18248
objectiv Initial fu Amendi		tionship and planning efforts between KPHL lan and facilitate the delivery of public healt				contained ar	e intended t	o implement	applicable
Amendi Amendi Amendi	ment 3 + 578,009 = \$2,276,940 ment 4 + 608,902 = \$2,885,842 ment 5 + 57,258 = \$2,943,100								
Amendi Amendi	ment 6 + 285,691 = \$3,228,791 ment 7 +16,800 = \$3,245,591 ment 8 + 151,537 = \$3,397,128 ment 9 + 1,320.224 = \$4,717,352								
Amendi Amendi	ment 10 + 921,764 = \$5,639,116 ment 11 + 66,060 = \$5,705,176 ment 12 + 11,500 = \$5,716,677								
Amendi	ment 12 + 11,500 = \$5,716,677 ment 13 + 5,800 = \$5,722,477 ment 14 +650,000 = \$6,372,477								
	ment 15 +16,075 = \$6,388,522								
	ment 16 +804,922 = \$7,193,474								
efferson (-				A=0.040.00			10/01/00	10.04.004
D: 2127	Assessment and Epidemiology, Kari Hur	0,	Closed	01/05/21	\$50,240.00		01/01/21	12/31/22	AD-21-001
Descrip	tion: KPHD to manage, track and analyze o	data for Jefferson County Mental Health/Sul	bstance Abuse (1/1	Oth of 1%) and pro	ovide technical s	upport.			
2000.10									
* For ne	ext contract consider removing section 34.	Crinimal History/Background Check.							
* For ne									
* For ne			Closed	01/05/21	\$1,230,000.00) 02/08/21	01/01/21	12/31/21	KC-429-20

Kitsap Public Health Board Meeting Date: April 06, 2021

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

Approvals:		1	1		1	2			
		T	\mathbb{Z}	Π	6	Signature		Dat	e
Administrator		M	U	J	C		3	23/	2021
Finance Manager	n	m	2	2		- Jaind	3	23	2021

Recommended Motion: Approval

Items:

Туре	Warrant/EFT Date	Beginning Warrant	Ending Warrant	Total Amount
Accounts Payable	2/1/2021	3815296	3515301	\$ 33,290.44
Accounts Payable	2/2/2021	DD115313	DD115319	15,094.97
Accounts Payable	2/8/2021	3815532	3815537	10,856.17
Accounts Payable	2/15/2021	DD115447	DD115460	122,214.61
Accounts Payable	2/16/2021	3815865	3815878	26,372.77
Accounts Payable	2/17/2021	DD1157011	DD115713	4,298.96
Accounts Payable	2/19/2021	3815953		40.24
Accounts Payable	2/22/2021	3816025	3816041	11,923.36
Accounts Payable	2/23/2021	3815954		790.00
Accounts Payable	2/23/2021	DD115802	DD115811	13,947.31
Accounts Payable Vital Stats	2/19/2021	R00102468	R00102468	17,385.00
Accounts Payable Total			1. See 5. 1	\$ 238,828.83
Payroll PERS Payment		N/A	N/A	150,682.63
Payroll Taxes	2/28/2021	N/A	N/A	188,745.25
Payroll	2/28/2021	N/A	N/A	504,455.73
Payroll Totai				\$ 843,883.61
			Grand Total	\$ 1,100,097.44

Kitsap Public Health Board Action:

□ Approve

🛛 Deny

□ Table / Continue

	Signature	Date
Kitsap Public Health Board Chair		

		W A/P US WARRAN	Page Date							
Department	Vendor Number	Vendor Name		Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check∕ Itm Date	Warrant Amount
00969 95969 Kitsap Public Health Di	429378	BLUE SKY PRINTING			1617601	001	3815296	PK	02/03/21	169.46
Warrant 3815296 total										169.46
Warrant 3815297	402886	IRON MOUNTAIN PO	BOX 601		1617604	001	3815297	РК	02/03/21	378.70
total										378.70
Warrant 3815298	16054	KITSAP COUNTY DEPT	OF ADM		1617606	001	3815298	PK	02/03/21	25,229.00
total										25,229.00
	335569	LINGO			1617607	001	38152 99	РК	02/03/21	19.93
Warrant 3815299 total										19.93
Warrant 3815300	409198	OFFICE DEPOT INC ()	POB 292		1617608	001	3815300	РК	02/03/21	54.93
total										54.93
	268891	VERIZON WIRELESS -	PO BOX		1617678	001	3815301	РК	02/03/21	1,715.79
	268891	VERIZON WIRELESS	PO BOX		1617680	001	3815301	РК	02/03/21	3,390.27
1	268891	VERIZON WIRELESS	PO BOX		1617681	001	3815301	РК	02/03/21	2,332.36
Warrant 3815301 total										7,438.42
Department 95969										

Department total

33,290.44

- 3 - 02/03/2

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Department	Vendor Number	Name	Purchase Order	Number				Check/ Itm Date	
Department 95969 00969 95969		CANON FINANCIAL SERVICES,			001	115313	PT	02/04/21	1,041.15
Warrant 115313 total									1,041.15
Warrant 115314	404844	DELIVERY EXPRESS, INC.		1617603	001	115314	PT	02/04/21	609.95
total									609.95
Warrant 115315	200487	JEFFERSON COUNTY HEALTH/H		1617605	001	115315	PT	02/04/21	4,953.27
total									4,953.27
Warrant 115316 total	285101	LYTLE, ROSS		1617599	001	115316	PT	02/04/21	104.72
LOLAI	265867	PENINSULA COMMUNITY HEALT		1617609	0.01	115317	рт	02/04/21	104.72
Warrant 115317 total								02, 01, 21	5,013.08
	257990	PLEMMONS, SUZANNE		1617600	001	115318	PT	02/04/21	21.85
Warrant 115318 total									21.85
	368115	THE SALVATION ARMY, BREME		1617662	001	115319	PT	02/04/21	3,350.95
Warrant 115319 total									3,350.95
Department 95969 total									15,094.97

Depa	rtment	Vendor Number	Vendor Name	Order	Voucher Number		Warrant Number			
00969 Kitsap Pu	95969 blic Health Di	418879	HEALTHCARE NEWS		1618221	001	3815532	PK	02/08/21	
Warrant 38 total	15532		5							325.91
		433925	SHRED-IT C/O STERICYCLE I		1618224	001	3815533	РК	02/08/21	110.85
Warrant 38 total	15533									110.85
		423515	STAPLES ADVANTAGE (PO BOX		1618225	001	3815534	РК	02/08/21	312.99
Warrant 38 total	15534									312.99
Warrant 38	15535	433849	TRENTON HOUSE APTS LLC		1618227	001	3815535	РК	02/08/21	1,240.00
total										1,240.00
		327504	US BANK (JUNIOR DISTS ONL		1618328	001	3815536	PK	02/08/21	573.10
		327504	US BANK (JUNIOR DISTS ONL		1618329	001	3815536	ΡK	02/08/21	1,539.88
		327504	US BANK (JUNIOR DISTS ONL		1618330	001	3815536	РК	02/08/21	1,051.00
		327504	US BANK (JUNIOR DISTS ONL		1618375	001	3815536	РК	02/08/21	1,478.75
		327504	US BANK (JUNIOR DISTS ONL		1618376	001	3815536	РК	02/08/21	929.82
		327504	US BANK (JUNIOR DISTS ONL		1618378	001	3815536	PK	02/08/21	2,249.09
		327504	US BANK (JUNIOR DISTS ONL		1618379	001	3815536	PK	02/08/21	394.76
		327504	US BANK (JUNIOR DISTS ONL		1618703	001	3815536	PK	02/08/21	441.68
Warrant 381 total	15536									8,658.08
		206991	WASHINGTON POISON CENTER		1618249	001	3815537	РК	02/08/21	208.34
Warrant 38] total	15537									208.34
Department	95969									
total	/ / / /									10,856.17

é - 02/08/2

Page

Date

Department 95969

Department	Vendor Number	Vendor Name	Order	Number	Itm	Number	Тур	Itm Date	Warrant Amount
Department 95969 00969 95969 Kitsap Public Health Di									389.74
Warrant 115447 total									389.74
	294940	ANDERSON, AMY C		1618212	001	115448	РТ	02/09/21	35.65
Warrant 115448 total									35.65
Warrant 115449	404844	DELIVERY EXPRESS, INC.		1618220	001	115449	\mathbf{PT}	02/09/21	609.95
total									609.95
Warrant 115450	356354	GUIDRY, JESSICA		1618213	001	115450	ΡT	02/09/21	231.56
total									231.56
Warrant 115451	412198	HAMEL PATRICK B		1618214	001	115451	PT	02/09/21	
total	277555	MOEN, ANNE M		1610015	0.01	115450	DE	00 (00 (01	235.80
Warrant 115452 total	277355	MOEN, ANNE M		1010210	001	115452	ΡI	02/09/21	127.65
	295081	NGUYEN, LOAN		1618216	001	115453	PT	02/09/21	
Warrant 115453 total									12.32
	405627	NUNO, CRYSTAL M		1618217	001	115454	\mathbf{PT}	02/09/21	290.64
Warrant 115454 total									290.64
	265867	PENINSULA COMMUNITY HEALT		1618222	001	115455	PT	02/09/21	118,015.97

Page Date - 39 - 02/08/21 -

Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
Warrant 115455 total									118,015.97
									110,015.97
	426229	QUATRIS HEALTHCO LLC		1618223	002	115456	\mathbf{PT}	02/09/21	235.50
	426229	QUATRIS HEALTHCO LLC		1618223	001	115456	PT	02/09/21	251.41
Warrant 115456 total									486.91
	10979	QUAYLE, TIM		1618218	001	115457	\mathbf{PT}	02/09/21	90.72
Warrant 115457 total									90.72
	289067	TELELANGUAGE INC		1618226	001	115458	\mathbf{PT}	02/09/21	283.80
Warrant 115458 total									283.80
	12382	UNITED BUSINESS MACHINES		1618228	001	115459	PT	02/09/21	1,057.66
Warrant 115459 total									1,057.66
	11598	ZIMNY, JAMES A.		1618219	001	115460	PT	02/09/21	346.24
Warrant 115460 total									346.24
Department 95969									
total									122,214.61

č		A∕F War	WARRANTS B ' USE THIS RE RANTS & GIVE	PORT FOR	SORT	ING TMT			Page Date
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	412631 COMC	CAST		1619198	001	3815865	РК	02/17/21	753.35
Warrant 3815865 total									753.35
Warrant 3815866	301784 COMC	AST PO BOX 60533		1619197	001	3815866	PK	02/17/21	655.82
total									655.82
Warrant 3815867	17992 DELL	MARKETING L.P. (C	HIC	1619200	001	3815867	РК	02/17/21	8,716.72
total									8,716.72
Warrant 3815868	435867 GAY,	SONGAYA Y		1619201	001	3815868	РК	02/17/21	700.00
total									700.00
Warrant 3815869	339396 GIUN	TOLI, PAUL		1619134	001	3815869	РК	02/17/21	168.56
total									168.56
Warrant 3815870	14532 LOOM	IS 🤟 PALATINE		1619235	001	3815870	РК	02/17/21	451.93
total									451.93
Warrant 3815871	231611 MICR	OSOFT SERVICES PO 1	BOX	1619202	001	3815871	РК	02/17/21	3,339.10
total									3,339.10
Warrant 3815872	409198 OFFI	CE DEPOT INC (POB 2	292	1619207	001	3815872	РК	02/17/21	92.87
total			\bigcirc						92.87
Warrant 3815873	348243 OUR L	LADY STAR OF THE SE	(IN)	1619304	001	3815873	РК	02/17/21	8,000.00
total									8,000.00

- 4 - 02/17/2

WARRANTS BY DEPARTMENT A/P USE THIS REPORT FOR SORTING WARRANTS & GIVE TO IND DEPARTMT										
Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount	
Warrant 3815874	423515	STAPLES ADVANTAGE	(PO BOX	1619228	001	3815874	РК	02/17/21	359.58	
total									359,58	
Warrant 3815875	95386	VANFOSSEN, GERALD		1619334	001	3815875	PK	02/17/21	1,427.53	
total									1,427.53	
	244803	WEX BANK		1619239	001	3815876	РК	02/17/21	240.31	
Warrant 3815876 total									240.31	
	277244	WSEHA		1619237	001	3815877	РК	02/17/21	50.00	
Warrant 3815877 total									50.00	
	427920	XIOLOGIX, LLC		1619240	001	3815878	РК	02/17/21	1,417.00	
Warrant 3815878 total									1,417.00	
Department 95969										
total									26,372.77	

- 2 - 02/17/2

Department	Vendor Number	Name	Purchase Order	Number	Itm	Number	Тур	Itm Date	Amount
Department 95969 00969 95969 Kitsap Public Health Di									60.50
Warrant 115701 total									60.50
No	409418	BURCHETT, BRIAN D		1619133	001	115702	PT		280.64
Warrant 115702 total									280.64
Warrant 115703	404844	DELIVERY EXPRESS, INC.		1619199	001	115703	ΡT	02/18/21	609.95
total									609.95
Warrant 115704	356354	GUIDRY, JESSICA		1619135	001	115704	PT	02/18/21	139.49
total									139.49
Warrant 115705 total	17216	KNOOP, MELINA		1619136	001	115705	ΡT	02/18/21	
LOCAL	277555	MOEN, ANNE M		1610127	0.01	115506	7.00	00/10/01	142.03
Warrant 115706 total	277333	NOLA, ANNI M		1019137	001	TT2106	Ρ1	02/18/21	50.00
	430757	NICHOLS, ELIZABETH K		1619138	001	115707	PT	02/18/21	80.64
Warrant 115707 total									80.64
	425554	SHUHLER, YANA		1619139	001	115708	PT	02/18/21	66.61
Warrant 115708 total									66.61
	397857	SPECTRA LABORATORIES - KI		1619208	001	115709	PT	02/18/21	2,013.51

Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount
Warrant 115709									
total									2,013.51
Warrant 115710	429745 ULA	CIA, NICHOLAS		1619148	001	115710	ΡT	02/18/21	140.92
total									140.92
Warrant 115711	12382 UNIT	ED BUSINESS MACHINES		1619236	001	115711	PT	02/18/21	512.91
total									512.91
Warrant 115712	393230 WALT	HER, SUSAN B		1619151	001	115712	PT	02/18/21	155.83
total									155.83
	397370 WENI	T, JAN E		1619156	001	115713	PT	02/18/21	45.93
Warrant 115713 total									45.93
Department 95969 total									4,298.96
									4,298.96

	WARRANTS BY DEPARTMENT A/P USE THIS REPORT FOR SORTING WARRANTS & GIVE TO IND DEPARTMT										- 2 - 02/19/2
Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number		Warrant Number		Check∕ Itm Date	Warrant Amount		
00969 95969 Kitsap Public Health Di Warrant 3815953	244803	WEX BANK		1620165	001	3815953	РК	02/19/21	40.2		
total									40.2		
Department 95969 total									40.2		

RECEIVED FEB 22 2021 KITSAP PUBLIC HEALTH DISTRICT

VOID & REISSUE

VUID # 3814 542- 1/21/21

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				WAR	WARRANTS B USE THIS RE RANTS & GIVE	PORT FOR TO IND D	SORT	тмт				Page Date	
	the second second second	epartment	Vendor Number	Vendor Name	Purchase Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check∕ Itm Date	Warrant Amount		
	00969	95969 Public Health Di								02/22/21	1,250.0	0 0	
	Warrant total	3816025									1,250.0		
	Warrant total	3816026	213116	CITY OF BREMERTON PARK	S &	1619719	001	3816026	РК	02/22/21	76.0		
	LOLAI										76.0		
	Warrant	3816027	425863	CLEMENTS, JAMES B.		1619724	001	3816027	РК	02/22/21	1,850.0		
	total										1,850.(0 0	
	Warrant	3816028	369036	ONE TIME PAYMENT		1619725	001	3816028	ΡK	02/22/21	590.0	0	
	total										590.0	00	
	Warrant	3816029	369036	ONE TIME PAYMENT		1619727	001	3816029	РК	02/22/21	40.(
	total										40.0	0	
c	Warrant	3816030	339396	GIUNTOLI, PAUL		1619704	001	3816030	РК	02/22/21	112.5		
	total	0010000									112.5	6	
	Warrant	3816031	418879	HEALTHCARE NEWS		1619731	001	3816031	РК		325.9		
	total	5010051									325.9	1	
	Happast	2816022	426159	JOYCE, DOUGLAS L		1619734	001	3816032	РК		613.0		
	Warrant total	3010095									613.0	0	
	Janne-+	7 9 1 / 0 7 7	425122	KANIA, SHARON FAYE		1619773	001	3816033	РК	02/22/21	475.0		
	Warrant : total	2010022									475.0	0	

		A/P US	ARRANTS B' E THIS REI TS & GIVE	PORT FOR S	SORTI	ING TMT				Page Date	- 02/22/2
Department	Vendor Number	Name	Order	Voucher Number	Pay Itm	Warrant Number	Wrt Typ	Check/ Itm Date	Warrant Amount		
Warrant 3816034 total	369036	ONE TIME PAYMENT		1619780	001	3816034	РК	02/22/21			
Warrant 3816035	425365	MASTERS, SPENCER R.		1619781	001	3816035	РК	02/22/21	350.0 722.0	0	
total	322761	MCKESSON MEDICAL SURGICAL		1/1077/		701/07/	D.K		722.0		
		MCKESSON MEDICAL SURGICAL						02/22/21	.143.6	0	
Warrant 3816036 total									143.7	7	
Warrant 3816037 total	394347	PEAK 1 ADMINISTRATION, LL		1619726	001	3816037	PK		275.0		
	398308	QUADIENT FINANCE USA INC		1619899	100	3816038	PK	02/22/21	275.0		
Warrant 3816038 total							I K	52,22,21	2,500.0		
Warrant 3816039	425127	SIENA HOLDINGS LLC		1619782	001	3816039	РК	02/22/21	677.0	0	
total	423515	STAPLES ADVANTAGE (PO BOX		1 (10007					677.0		
Warrant 3816040 total				1013001	001	3010040	r' K	02/22/21	1,573.1		
	369036 1	ONE TIME PAYMENT		1619808	001	3816041	РК	02/22/21		٥	
Warrant 3816041 total									350.0		
Department [®] 95969											

		Page Date	- 02/22/2	
Vendor	Vendor	Purchase Voucher Pay Warrant Wrt Check/	Warrant	

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

WARRANTS BY DEPARTMENT A/P USE THIS REPORT FOR SORTING WARRANTS & GIVE TO IND DEPARTMT										'age late	02/22/;
Department	Vendor Number	Vendor Name	Purchase Order	Voucher Number		Warrant Number			Warrant Amount	-	
00969 95969 Kitsap Public Health D1 Warrant 3815954 total	433935	BLACKWELL REAL ESTATE LLC		1619717	001	3815954	PK	02/23/21	790.00 790.00	-	
Department 95969										*	

total

790.00

Department	Vendor Number	Vendor Name	Purchase Order	Number	Itm	Number	Typ	Check/ Itm Date	Amount
Department 95969 00969 95969 Kitsap Public Health Di	413333	ADER, SAM A							312.29
Warrant 115802 total									312.29
Warrant 115803	413731	CLALLAM CO DEPT OF HEALTH		1619723	001	115803	ΡT	02/23/21	6,153.40
total									6,153.40
Warrant 115804 total	422623	FINE, GEORGE F.		1619702	001	115804	PT	02/23/21	114.58
	200487	JEFFERSON COUNTY HEALTH/H		1619733	001	115805	PT	02/23/21	114.58 5,324.83
Warrant 115805 total									5,324.83
	387985	JOHNSON, RENEE K		1619706	001	115806	PT	02/23/21	117.71
Warrant 115806 total									117.71
Warrant 115807	422629	KINDSCHY, BRANDON J.		1619708	001	115807	PT	02/23/21	54.32
total	417895	LAIRD, MELISSA Y		1610710	0.01	115000	59	00/00/01	54.32
Warrant 115808 total	11,000	LING, MILLOR I		1019110	001	112808	P. 1.	02/23/21	75.00
	285101	LYTLE, ROSS		1619712	001	115809	PT	02/23/21	62.72
Warrant 115809 total									62.72
	10979	QUAYLE, TIM		1619714	001	115810	\mathbf{PT}	02/23/21	81.76

Department	Vendor Number		Vendor Name		Order	Number	Itm	Warrant Number	Тур	Itm Date	Warrant Amount
Warrant 115810 total											
											81.76
Warmark 115011	397857	SPECTRA	LABORATORIES	- KI		1619783	001	115811	\mathbf{PT}	02/23/21	1,650.70
Warrant 115811 total											1,650.70
Department 95969											
total											13,947.31



Kitsap County Treasurer's Office Cash Transmittal

Transfer Receipt #R00102468

Approved: 2/19/2021

GL Date: 2/19/2021

Total Amount: \$0.00

Request Details

Request ID	104019
Туре	Transfer
Owner	Becky Stack
Organization	Kitsap Public Health District
Approved By	Becky Stack
Comments	Kitsap Public Health District Vital Statistics Transfer

Funds Breakdown

Fund Name	Fund #	Account #	Subledger	T Code	Amount	Memo
General Fund	95969	3860			(\$17,385.00)	JAN 2021 VITAL STATISTICS FEE TRN
Death Investigate Suspense Fund	82584	2370			\$10,951.00	Death invest. acct
Death Investigate Suspense Fund	82584	2371			\$6,434.00	Vital records

09200	Account Ledger Inquiry			
	95969.2315 CRUED EMPLOYEE BENEFITS	Thru Date	e/Period <u>02/12/21</u> e/Period <u>02/12/21</u> /pe <u>AA</u> <u>*</u>	
Skip to Doc/Type Y-T-D Period End . Cumul Period End . Additional Selections	8,254.09- 145,669.31- Exist	Subreager	••••	-
<u>0</u> <u>DT</u> <u>Document</u> <u>Date</u> 01 381782 02/12/21	Explanation/Alpha DAILY CASH TRANSMI	Debit 32,310.81	Credit	- <u>P</u>
_ 01 381/82 02/12/21	DAILY CASH TRANSMI	118,371.82		. Р
		150,682.63		
	Ledger Total Unposted Total	150,682.63		

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

09200	Account Ledger Inquir	у	/	
Account	295.26-	Thru Date	/Period <u>02/26/21</u> /Period <u>02/28/21</u> De <u>AA</u> <u>*</u>	_
Additional Selecti O DT Document Dat U1 382251 02/26	ons Exist e Explanation/Alpha /21 DAILY CASH TRANSMI 	Debit 188,745.25 188,745.25	Credit	<u>Р</u> Р
	Ledger Total Unposted Total	188,745.25		

Opt: 1/2=Orig Entry	5=Details	F17=Top	F18=Totals	F21=Prt Ledg	F24=More
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Last Name	Hours	Gross Pay	Employer Paid Taxes	Employer Paid Benefits	Non-Cash Taxable Benefits	Net Pay
Abazi (427227)	173.33	\$5,143.00				\$4,075.63
Abney (4563)	173.33	\$4,981.00				\$3,328.83
Acosta (278956)	187.09	\$9,122.12				\$5,533.86
Ader (413193)	173.33	\$4,878.00				\$3,258.14
	173.33	\$6,999.00				\$4,802.47
Adhikari (407901)						
Anderson (419470)	188.08	\$6,209.92				\$4,159.55
Arias (433900)	173.33	\$4,920.00				\$3,636.71
Atisme (433909)	173.33	\$6,522.00				\$4,718.08
Banigan (215189)	173.33	\$6,905.00				\$4,871.26
Bazzell (328436)	173.33	\$6,905.00				\$4,770.30
Beers (434028)	173.33	\$5,424.00				\$4,118.31
Bell (419805)	149.33	\$6,040.20				\$4,111.04
Berger (407902)	173.33	\$4,686.00				\$3,365.96
Bierman (404611)	156.00	\$6,795.00				\$5,119.58
Bolstad (434072)	173.33	\$6,555.00				\$4,706.96
Borja (426250)	204.08	\$5,939.03				\$4,479.76
Boysen-Knapp (2058)	156.00	\$6,542.00				\$4,140.90
Brown (271677)	173.33	\$7,928.00				\$4,312.64
Burchett (409212)	175.08	\$4,492.02				\$3,327.20
Byrd (434085)	213.33	\$4,424.60				\$3,598.81
Chang (411387)	173.33	\$3,696.00				\$2,606.91
Ciulla (400655)	173.33	\$7,174.00				\$4,563.88
Contreras (433998)	173.33	\$4,149.00				\$3,259.49
Crow (433648)	173.33	\$4,013.00				\$3,020.38
Davis (433997)	225.33	\$9,370.82				\$6,959.61
Dowless (340919)	173.33	\$6,593.00				\$4,793.39
Duren (430735)	173.33	\$4,861.20				\$3,697.51
Eakes (223648)	193.33	\$5,608.20				\$4,031.31
Evans (4565)	173.33	\$10,118.00				\$2,917.94
Fine (421693)	86.67	\$2,073.00				\$1,614.46
Fisk (321284)	173.33	\$7,669.00				\$4,644.67
	173.33	\$10,624.00				\$7,337.49
Fong (356883)						
Giuntoli (337331)	173.33 173.33	\$6,905.00 \$6,700.00				\$4,113.48 \$5,027.20
Gonzalez (401905) Crollpor (1264)	173.33	\$6,709.00 \$12,655.00				\$5,027.39 \$8,770.04
Grellner (1264)	173.33	\$12,655.00 \$4,075.00				\$8,779.04 \$3,090.98
Gress (421427)						
Griego (410072)	156.00	\$3,916.00				\$2,964.06
Guerrero (434054)	104.00	\$3,117.00				\$2,524.23
Guidry (355732)	173.33	\$8,740.00				\$6,091.68
Guzman (356336)	173.33	\$4,399.00				\$3,063.49
Hamel (412171)	173.33	\$6,536.00				\$4,187.24
Holdcroft (270783)	173.33	\$6,905.00				\$3,851.06
Holdcroft (4579)	173.33	\$8,740.00				\$5,036.70
Holt (1041)	173.33	\$8,740.00				\$5,155.48
Holt (2726)	173.33	\$8,740.00				\$5,660.57
Howard Lindquist (43	138.66	\$3,918.00				\$3,095.85
Huff (433996)	173.33	\$4,665.00				\$3,370.62
Hughes (306605)	196.08	\$4,904.72				\$3,496.04
Hunter (409213)	173.33	\$7,928.00				\$5,489.19
Jameson (295036)	173.33	\$4,279.00				\$3,216.26
Jenkins (434053)	173.33	\$3,540.00				\$2,678.21
Johanson (400651)	175.33	\$4,377.49				\$3,372.22
Johnson (421429)	187.83	\$6,545.93				\$4,654.26
Jones (358933)	173.33	\$7,928.00				\$5,322.12
Katula (393427)	173.33	\$7,191.00				\$4,204.26
Kellum (418812)	156.00	\$6,542.00				\$4,869.52
Kench (245476)	173.33	\$4,064.00				\$2,587.93
Kiess (250913)	173.33	\$10,624.00				\$7,702.76
Kindschy (421430)	173.33	\$5,647.00				\$3,960.70
Knoop (16125)	173.33	\$6,905.00				\$4,655.10
Kruse (243184)	176.08	\$7,165.75				\$4,616.87
Kushner (327580)	173.33	\$10,118.00				\$7,630.64
Kvistad (434056)	101.30	\$2,473.10				\$1,988.86
Laird (416539)	173.33	\$8,740.00				\$6,068.65
Lau (429748)	173.33	\$5,696.00				\$4,213.46
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Last Name	Hours	Gross Pay	Employer Paid Taxes	Employer Paid Benefits	Non-Cash Taxable Benefits	Net Pay
Lytle (285038)	173.33	\$6,905.00			Denento	\$4,464.63
Mazur (388104)	173.33	\$7,054.00				\$4,733.22
Mckinnon (387088)	173.33	\$5,647.00				\$4,437.53
McMillan (434052)	173.33	\$4,443.00				\$3,202.85
McNamara (429377)	185.00	\$5,311.19				\$4,197.36
Moen (279971)	217.83	\$7,627.65				\$5,132.60
Moontree (406607)	173.33	\$5,143.00				\$3,711.00
Moore (421227)	156.00	\$5,413.00				\$3,708.60
Moore (433995)	173.33	\$4,665.00				\$3,532.85
Morgan (324204)	156.00	\$6,215.00				\$4,606.64
Morris (312378)	138.66	\$4,022.00				\$2,928.23
Morris (433859)	20.50	\$317.75				\$291.01
Morrow (433895)	173.33	\$15,606.00				\$7,382.99
Nguyen (295033)	173.33	\$4,518.00				\$3,204.90
Nguyen (434026)	173.33	\$4,029.00				\$2,770.17
Nichols (430367)	84.55	\$3,441.19				\$2,320.55
Nicolaisen (208456)	183.33	\$7,502.60				\$5,339.49
Noble (3128)	173.33	\$5,122.00				\$3,333.10
North (22459)	173.33	\$9,636.00				\$3,766.03
Nuno (405301)	173.33	\$6,536.00				\$3,658.84
O'Brien (433907)	173.33	\$4,013.00				\$2,947.48
Onarheim (426938)	173.33	\$4,231.00				\$3,019.27
Outhwaite (243679)	180.58	\$7,496.61				\$5,426.14
Pandino (419118)	173.33	\$4,518.00				\$3,371.15
Pearson (434051)	173.33	\$3,491.00				\$2,896.92
Phares (434024)	181.83	\$4,769.78				\$3,560.23
Phipps (229901)	173.33	\$8,117.00				\$3,649.02
Plemmons (433994)	102.75	\$5,265.94				\$4,293.96
Prewitt (394466)	173.33	\$4,399.00				\$3,322.72
Quayle (1214)	173.33	\$7,034.00				\$4,686.51
Quist-Therson (41986	176.83	\$7,949.73				\$5,683.96
Rassa (433650)	155.46	\$4,787.09				\$3,401.63
Rhea (324654) Bidgo (267072)	173.33 173.33	\$4,098.00 \$7,055.00				\$3,070.33 \$4,504.49
Ridge (267073) Rodgers (434050)	173.33	\$7,055.00 \$3,540.00				\$4,504.49 \$2,799.58
Rodriguez (434050)	205.33	\$5,487.76				\$2,799.58 \$3,277.13
Rork (404613)	173.33	\$5,378.00				\$3,950.52
Ryder (434027)	155.56	\$4,184.09				\$3,022.17
Shuhler (425553)	183.33	\$3,744.20				\$2,697.09
Smith (361388)	173.33	\$7,716.00				\$5,344.95
Sooter (427776)	173.33	\$6,923.00				\$5,044.84
Stedman (347366)	173.33	\$8,324.00				\$5,534.37
Stepp (433993)	153.58	\$4,339.86				\$3,266.82
Steusloff (429204)	173.33	\$4,013.00				\$3,014.72
Stewart (423168)	189.33	\$6,429.16				\$4,594.68
Tapia (434025)	173.33	\$4,785.00				\$2,280.38
Tiemeyer (433908)		\$0.00				\$0.00
Tjemsland (433192)	173.33	\$5,980.00				\$4,218.40
Turner (1682)	187.83	\$5,606.10				\$3,678.18
Ulacia (429750)	173.33	\$4,214.00				\$2,982.16
Wagner (426251)	148.93	\$3,193.74				\$2,278.46
Walther (392243)	173.33	\$6,536.00				\$4,296.04
Wellborn (14545)	131.00	\$3,071.45				\$1,870.59
Wells (434049)	104.00	\$2,666.00				\$2,213.77
Wendt (397255)	173.33	\$7,211.00				\$5,283.47
Whitlock (433906)	173.33	\$4,029.00				\$3,097.45
Wickhamshire (434070	86.67	\$1,791.00				\$1,425.48
Winchester (431493)	181.83	\$4,509.29				\$3,072.59
Winters (426939)	173.33	\$5,143.00				\$3,835.76
Yanda (301566) Zimpy (2008)	173.33	\$7,564.00				\$5,166.44
Zimny (2908)	173.33	\$6,905.00	0.00	0.00	0.00	\$5,031.34
	2,226.90	740,452.28	0.00	0.00	0.00	504,455.73