

**Kitsap Public Health District  
Consent Agenda  
June 6, 2023**

<b>KPHD Contract Number</b>	<b>Their Contract Number</b>	<b>Contractor and Agreement Name</b>	<b>Type of Agreement</b>	<b>Term of Agreement</b>	<b>Amount to District</b>	<b>Amount to Other Agency</b>
<b>1890 Amendment 1</b>	<b>NA</b>	<b>Kitsap Board of Health</b> <i>Employment Agreement</i>	<b>Amendment</b>	<b>01/01/2019-06/30/2023</b>	<b>\$0</b>	<b>\$0</b>
<b>Description:</b> Amends agreement term to extend employment through December 31, 2023.						
<b>2203 Amendment 12</b>	<b>CLH31014 Amendment 12</b>	<b>WA State Dept. of Health</b> <i>Consolidated Contract</i>	<b>Amendment</b>	<b>01/01/2022-12/31/2024</b>	<b>\$274,482</b>	<b>\$0</b>
<b>Description:</b> Amends statements of work for Foundational Public Health Services, Injury & Violence Prevention Overdose Data to Action and Youth Cannabis & Commercial Tobacco Prevention Program and adds an additional \$274,482 in funding for a revised maximum consideration of \$12,298,666.						
<b>2262 Amendment 2</b>	<b>N-22-028</b>	<b>Jefferson County Public Health</b> <i>Youth Cannabis &amp; Commercial Tobacco Prevention Program (YCCTPP)</i>	<b>Amendment</b>	<b>07/01/2022-06/30/2024</b>	<b>\$0</b>	<b>\$82,000</b>
<b>Description:</b> Amendment to extend contract to June 30, 2024, updates statement of work and adds additional \$82,000 for a total combined compensation of \$209,761.						
<b>2263 Amendment 12</b>	<b>KC-388-22</b>	<b>Kitsap County</b> <i>Youth Cannabis &amp; Commercial Tobacco Prevention Program (YCCTPP)</i>	<b>Amendment</b>	<b>07/01/2022-06/30/2024</b>	<b>\$0</b>	<b>\$26,000</b>
<b>Description:</b> Amendment to extend contract to June 30, 2024, updates statement of work and adds additional \$26,000 for a total combined compensation of \$52,129.						
<b>2330</b>	<b>20230497</b>	<b>Office of Superintendent of Public Instruction</b> <i>Summer Food Inspections</i>	<b>Interlocal Agreement</b>	<b>06/06/2023-09/30/2023</b>	<b>\$6,600</b>	<b>\$0</b>
<b>Description:</b> KPHD to perform periodic health and sanitation evaluations of food service management companies (vendors), sponsor food preparation facilities and feeding sites operating under the U.S. Department of Agriculture (USDA) Summer Food Service Program (SFSP) as required by 7 CFR Part 225 as a condition to the allocation and expenditure of USDA SFSP funding.						

<b>2340</b>	<b>KC-228-23</b>	<b>Kitsap County</b> <i>Nurse Family Partnership</i>	<b>Interlocal Agreement</b>	<b>03/27/2023-06/30/2023</b>	<b>\$22,610</b>	<b>\$0</b>
<b>Description:</b> The District to provide NFP services to Twelve (12) first-time, low-income moms and their babies by maintaining a 0.5 FTE Nurse Home Visitor to intervene with families who either have or at risk for substance abuse and/or mental health problems. The goal is to prevent substance abuse, mental illness, behavioral problems, and future addiction in young children.						
<b>2346</b>	<b>NA</b>	<b>Hood Canal Coordinating Counsel</b> <i>Hood Canal Regional PIC</i>	<b>Amendment</b>	<b>06/06/2023-09/30/2023</b>	<b>\$11,230</b>	<b>\$0</b>
<b>Description:</b> Amendment to extend contract term to run through September 30, 2023, and adds an additional \$11,230 in funding.						

**AMENDMENT TO THE EMPLOYMENT AGREEMENT**  
**Between**  
**KITSAP PUBLIC HEALTH DISTRICT**  
**And**  
**KEITH GRELLNER**

Kitsap Public Health Board (“Board”) and Keith Grellner, (“Employee”) agree to amend their Employment Agreement which was effective January 1, 2019 (Agreement). The parties mutually agree as follows:

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

The Employee will serve in the position of Administrator until the position is modified or terminated in accordance with Sections 8 or 9 of the Agreement and RCW 70.05.040. This Agreement is in effect from January 1, 2019, until December 31, 2023.

2. The section title of Section 9 of the Agreement, “Notice of Employer’s Intention to Terminate” (underline added), shall be stricken in its entirety and replaced with the following revised section title:

“Notice of Employee’s Intention to Terminate” (underline added)

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

Dated this \_\_\_\_ day of \_\_\_\_\_, 2023      Dated this \_\_\_\_ day of \_\_\_\_\_, 2023

EMPLOYEE

KITSAP PUBLIC HEALTH DISTRICT

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

\_\_\_\_\_  
Mayor Becky Erickson, Chair  
Kitsap Public Health Board

**KITSAP PUBLIC HEALTH DISTRICT  
2022-2024 CONSOLIDATED CONTRACT**

**CONTRACT NUMBER: CLH31014**

**AMENDMENT NUMBER: 12**

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, includes the following statements of work, which are incorporated by this reference and located on the DOH Finance SharePoint site in the Upload Center at the following URL:  
<https://stateofwa.sharepoint.com/sites/doh-ofsfundingresources/sitewebpages/home.aspx?e1:9a94688da2d94d3ea80ac7fbc32e4d7c>
  - Adds Statements of Work for the following programs:
  - Amends Statements of Work for the following programs:  
 Foundational Public Health Services (FPHS) - Effective July 1, 2022  
 Injury & Violence Prevention Overdose Data to Action - Effective September 1, 2022  
 Youth Cannabis & Commercial Tobacco Prevention Program - Effective July 1, 2022
  - Deletes Statements of Work for the following programs:
  
2. Exhibit B-12 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-11 Allocations as follows:
  - Increase of **\$274,482** for a revised maximum consideration of **\$12,298,666**.
  - Decrease of \_\_\_\_\_ for a revised maximum consideration of \_\_\_\_\_.
  - No change in the maximum consideration of \_\_\_\_\_.  
 Exhibit B Allocations are attached only for informational purposes.

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

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

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

KITSAP PUBLIC HEALTH DISTRICT	STATE OF WASHINGTON DEPARTMENT OF HEALTH
Signature:	Signature:
Date:	Date:

APPROVED AS TO FORM ONLY  
Assistant Attorney General

EXHIBIT B-12  
 ALLOCATIONS  
 Contract Term: 2022-2024

Kitsap Public Health District

Indirect Rate January 1, 2022-December 31, 2022: 37.96% Admin & Facilities; 37.96% Community Hlth Prgms (inc. Admin) & 39.47% Environmental Hlth Prgms (inc. Admin)

Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**	Statement of Work		DOH Use Only		Funding Period SubTotal	Chart of Accounts Total
					LHJ Funding Period		Chart of Accounts Funding Period			
					Start Date	End Date	Start Date	End Date		
FFY23 IAR SNAP Ed Prog Mgmt-Region 5	NGA Not Received	Amd 9	10.561	333.10.56	10/01/22	09/30/23	10/01/22	09/30/23	\$115,813	\$213,829
FFY22 IAR SNAP Ed Prog Mgmt-Region 5	207WAWA5Q3903	Amd 7	10.561	333.10.56	01/01/22	09/30/22	10/01/21	09/30/22	\$98,016	(\$19,204)
FFY22 IAR SNAP Ed Prog Mgmt-Region 5	207WAWA5Q3903	Amd 4	10.561	333.10.56	01/01/22	09/30/22	10/01/21	09/30/22	\$12,723	\$104,497
FFY22 IAR SNAP Ed Prog Mgmt-Region 5	207WAWA5Q3903	Amd 1	10.561	333.10.56	01/01/22	09/30/22	10/01/21	09/30/22	\$104,497	
Hous. Opp. for Ppl w/AIDS CARES COVID-19	WA-H2001W074	Amd 4	14.241	333.14.24	01/01/22	06/30/23	01/01/22	06/30/23	\$11,418	\$11,418
FFY22 Housing People with AIDS Formula	WAH21-F999	Amd 10	14.241	333.14.24	10/01/22	06/30/23	09/12/22	06/30/23	\$103,989	\$211,168
FFY21 Housing People with AIDS Formula	WAH21-F999	Amd 10	14.241	333.14.24	07/01/22	06/30/23	07/01/20	06/30/23	\$27,229	(\$103,989)
FFY21 Housing People with AIDS Formula	WAH21-F999	Amd 5	14.241	333.14.24	07/01/22	06/30/23	07/01/20	06/30/23	\$131,218	
FFY21 Housing People with AIDS Formula	WAH21-F999	Amd 4	14.241	333.14.24	01/01/22	06/30/23	07/01/20	06/30/23	\$28,622	\$49,215
FFY21 Housing People with AIDS Formula	WAH21-F999	Amd 2	14.241	333.14.24	01/01/22	06/30/22	07/01/20	06/30/23	\$20,593	
FFY20 Housing People with AIDS Formula	WAH20-F999	Amd 4	14.241	333.14.24	01/01/22	06/30/22	07/01/20	06/30/23	\$4,045	\$30,735
FFY20 Housing People with AIDS Formula	WAH20-F999	Amd 1	14.241	333.14.24	01/01/22	06/30/22	07/01/20	06/30/23	\$26,690	
FFY23 Swimming Beach Act Grant IAR (ECY)	NGA Not Received	Amd 11	66.472	333.66.47	03/01/23	10/31/23	03/01/23	10/31/23	\$25,000	\$50,000
FFY22 Swimming Beach Act Grant IAR (ECY)	NGA Not Received	Amd 2	66.472	333.66.47	03/01/22	10/31/22	01/01/22	11/30/22	\$25,000	
FFY22 PHEP BP4 LHJ Funding	NU90TP922043	Amd 7	93.069	333.93.06	07/01/22	06/30/23	07/01/22	06/30/23	\$295,345	\$495,235
FFY21 PHEP BP3 LHJ Funding	NU90TP922043	Amd 7	93.069	333.93.06	07/01/22	06/30/23	07/01/21	06/30/23	\$4,176	
FFY21 PHEP BP3 LHJ Funding	NU90TP922043	Amd 2	93.069	333.93.06	01/01/22	06/30/22	07/01/21	06/30/23	\$195,714	
FFY22 TB Uniting for Ukraine Supp	<b>NU52PS910221</b>	Amd 10	93.116	333.93.11	07/01/22	12/31/22	05/21/22	12/31/22	\$7,500	\$7,500
FFY22 Overdose Data to Action Prev	NU17CE925007	Amd 10	93.136	333.93.13	09/01/22	08/31/23	09/01/22	08/31/23	\$57,417	\$107,417
FFY22 Overdose Data to Action Prev	NU17CE925007	Amd 7	93.136	333.93.13	09/01/22	08/31/23	09/01/22	08/31/23	\$50,000	
FFY21 Overdose Data to Action Prev	NU17CE925007	Amd 3	93.136	333.93.13	01/01/22	08/31/22	09/01/21	08/31/22	\$19,907	\$19,907
COVID19 Vaccines	NH23IP922619	Amd 7	93.268	333.93.26	01/01/22	06/30/24	07/01/20	06/30/24	\$283,424	\$283,424
COVID19 Vaccines R4	NH23IP922619	Amd 5	93.268	333.93.26	01/01/22	06/30/24	07/01/20	06/30/24	\$5,000	\$1,032,214
COVID19 Vaccines R4	NH23IP922619	Amd 1	93.268	333.93.26	01/01/22	06/30/24	07/01/20	06/30/24	\$1,027,214	
FFY23 PPHF Ops	NH23IP922619	Amd 7	93.268	333.93.26	07/01/22	06/30/23	07/01/22	06/30/23	\$2,500	\$4,459
FFY22 PPHF Ops	NH23IP922619	Amd 3	93.268	333.93.26	01/01/22	06/30/22	07/01/21	06/30/22	\$1,959	\$1,959
FFY23 VFC IQIP	NH23IP922619	Amd 7	93.268	333.93.26	07/01/22	06/30/23	07/01/22	06/30/23	\$27,588	\$27,588
FFY23 VFC Ops	NH23IP922619	Amd 5	93.268	333.93.26	07/01/22	06/30/23	07/01/22	06/30/23	\$16,134	\$29,004
FFY22 VFC Ops	NH23IP922619	Amd 3	93.268	333.93.26	01/01/22	06/30/22	07/01/21	06/30/22	\$12,870	\$12,870

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Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**	Statement of Work		DOH Use Only		Funding Period SubTotal	Chart of Accounts Total
					LHJ Funding Period Start Date	LHJ Funding Period End Date	Chart of Accounts Funding Period Start Date	Chart of Accounts Funding Period End Date		
FFY19 COVID CARES	NU50CK000515	Amd 2	93.323	333.93.32	01/01/22	04/22/22	04/23/20	07/31/24	\$314,824	\$314,824
FFY19 ELC COVID Ed LHJ Allocation	NU50CK000515	Amd 7	93.323	333.93.32	01/01/22	10/18/22	05/19/20	10/18/22	\$155,419	\$155,419
FFY19 ELC COVID Ed LHJ Allocation	NU50CK000515	Amd 2	93.323	333.93.32	01/01/22	10/18/22	05/19/20	10/18/22	\$1,145,035	\$1,145,035
FFY20 ELC EDE LHJ Allocation	NU50CK000515	Amd 7, 9, 11	93.323	333.93.32	01/01/22	12/31/23	01/15/21	07/31/24	\$2,720,344	\$2,720,344
FFY20 ELC EDE LHJ Allocation	NU50CK000515	Amd 2, 9, 11	93.323	333.93.32	01/01/22	12/31/23	01/15/21	07/31/24	\$2,919,838	\$2,919,838
FFY21 SHARP HAI ELC	NU50CK000515	Amd 9	93.323	333.93.32	09/01/22	07/31/24	08/01/21	07/31/24	\$192,500	\$192,500
FFY23 Tobacco-Vape Prev Comp 1	NU58DP006808	Amd 12	93.387	333.93.38	04/29/23	04/28/24	04/29/23	04/28/24	\$24,482	\$24,482
FFY22 Tobacco-Vape Prev Comp 1	NU58DP006808	Amd 5, 9	93.387	333.93.38	04/29/22	04/28/23	04/29/22	04/28/23	\$24,482	\$24,482
FFY21 Tobacco-Vape Prev Comp 1	NU58DP006808	Amd 2	93.387	333.93.38	01/01/22	04/28/22	04/29/21	04/28/22	\$24,482	\$24,482
FFY22 Phys Actvty & Nutrition Prog	NU58DP006504	Amd 11	93.439	333.93.43	09/30/22	09/29/23	09/30/22	09/29/23	\$82,000	\$82,000
FFY22 Phys Actvty & Nutrition Prog	NU58DP006504	Amd 7	93.439	333.93.43	09/30/22	09/29/23	09/30/22	09/29/23	\$80,000	\$80,000
FFY21 Phys Actvty & Nutrition Prog	NU58DP006504	Amd 7	93.439	333.93.43	01/01/22	09/29/22	09/30/21	09/29/22	\$15,000	\$15,000
FFY21 Phys Actvty & Nutrition Prog	NU58DP006504	Amd 1	93.439	333.93.43	01/01/22	09/29/22	09/30/21	09/29/22	\$52,000	\$52,000
FFY23 MCHBG LHJ Contracts	B04MC47453	Amd 7	93.994	333.93.99	10/01/22	09/30/23	10/01/22	09/30/23	\$159,854	\$159,854
FFY22 MCHBG LHJ Contracts	B04MC45251	Amd 4	93.994	333.93.99	01/01/22	09/30/22	10/01/21	09/30/22	\$14,691	\$14,691
FFY22 MCHBG LHJ Contracts	B04MC45251	Amd 1	93.994	333.93.99	01/01/22	09/30/22	10/01/21	09/30/22	\$119,890	\$119,890
GFS-Group B (FO-SW)		Amd 10	N/A	334.04.90	01/01/23	06/30/23	07/01/22	06/30/23	\$25,878	\$25,878
GFS-Group B (FO-SW)		Amd 1	N/A	334.04.90	01/01/22	06/30/22	07/01/21	06/30/22	\$25,877	\$25,877
State Drug User Health Program		Amd 7	N/A	334.04.91	07/01/22	06/30/23	07/01/21	06/30/23	\$0	\$0
State Drug User Health Program		Amd 5	N/A	334.04.91	07/01/22	06/30/23	07/01/21	06/30/23	\$40,000	\$40,000
State Drug User Health Program		Amd 1	N/A	334.04.91	01/01/22	06/30/22	07/01/21	06/30/23	\$20,000	\$20,000
Rec Shellfish/Biotoxin		Amd 1	N/A	334.04.93	01/01/22	06/30/23	07/01/21	06/30/23	\$20,000	\$20,000
Small Onsite Management (ALEA)		Amd 1	N/A	334.04.93	07/01/22	06/30/23	07/01/21	06/30/23	\$15,000	\$15,000
Small Onsite Management (ALEA)		Amd 1	N/A	334.04.93	01/01/22	06/30/22	07/01/21	06/30/23	\$22,500	\$22,500
SFY23 Dedicated Cannabis Account		Amd 5, 9	N/A	334.04.93	07/01/22	06/30/23	07/01/22	06/30/23	\$247,509	\$247,509
SFY22 Marijuana Education		Amd 2	N/A	334.04.93	01/01/22	06/30/22	07/01/21	06/30/23	\$132,277	\$132,277
SFY22 Marijuana Education		Amd 2	N/A	334.04.93	01/01/22	06/30/22	07/01/21	06/30/23	\$7,571	\$7,571

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Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**	Statement of Work		DOH Use Only		Funding Period SubTotal	Chart of Accounts Total
					LHJ Funding Period		Chart of Accounts Funding Period			
					Start Date	End Date	Start Date	End Date		
SFY23 Tobacco Prevention Proviso		Amd 7, 9	N/A	334.04.93	07/01/22	06/30/23	07/01/22	06/30/23	\$194,000	\$194,000
SFY23 Tobacco Prevention Proviso		Amd 5, 9	N/A	334.04.93	07/01/22	06/30/23	07/01/22	06/30/23	\$38,402	\$65,704
SFY23 Youth Tobacco Vapor Products		Amd 2	N/A	334.04.93	01/01/22	06/30/22	07/01/21	06/30/23	\$27,302	\$27,302
Wastewater Management-GFS		Amd 1	N/A	334.04.93	07/01/22	06/30/23	07/01/21	06/30/23	\$30,000	\$30,000
HIV Local Proviso-RW Grant Year 2023		Amd 5	N/A	334.04.98	04/01/23	06/30/23	04/01/23	06/30/23	\$30,814	\$185,184
HIV Local Proviso-RW Grant Year 2022		Amd 5	N/A	334.04.98	07/01/22	03/31/23	04/01/22	03/31/23	\$92,442	\$92,442
HIV Local Proviso-RW Grant Year 2022		Amd 10	N/A	334.04.98	04/01/22	06/30/22	04/01/22	03/31/23	\$21,174	(\$19,580)
HIV Local Proviso-RW Grant Year 2022		Amd 2	N/A	334.04.98	04/01/22	06/30/22	04/01/22	03/31/23	\$19,880	\$19,880
HIV Local Proviso-RW Grant Year 2022		Amd 1	N/A	334.04.98	04/01/22	06/30/22	04/01/22	03/31/23	\$20,874	\$20,874
HIV Local Proviso-RW Grant Year 2021		Amd 2	N/A	334.04.98	01/01/22	03/31/22	04/01/21	03/31/22	\$19,880	\$19,880
HIV Local Proviso-RW Grant Year 2021		Amd 1	N/A	334.04.98	01/01/22	03/31/22	04/01/21	03/31/22	\$20,874	\$20,874
RW FFY23 Grant Year Local (Rebate)		Amd 7	N/A	334.04.98	04/01/23	06/30/23	04/01/23	06/30/23	\$9,940	\$804,785
RW FFY23 Grant Year Local (Rebate)		Amd 5	N/A	334.04.98	04/01/23	06/30/23	04/01/23	06/30/23	\$116,146	\$116,146
RW FFY22 Grant Year Local (Rebate)		Amd 7	N/A	334.04.98	07/01/22	03/31/23	04/01/22	03/31/23	\$29,820	\$378,258
RW FFY22 Grant Year Local (Rebate)		Amd 5	N/A	334.04.98	07/01/22	03/31/23	04/01/22	03/31/23	\$348,438	\$348,438
RW FFY22 Grant Year Local (Rebate)		Amd 10	N/A	334.04.98	04/01/22	06/30/22	04/01/22	03/31/23	\$135,726	\$135,726
RW FFY22 Grant Year Local (Rebate)		Amd 1	N/A	334.04.98	04/01/22	06/30/22	04/01/22	03/31/23	\$116,146	\$116,146
RW FFY21 Grant Year Local (Rebate)		Amd 2	N/A	334.04.98	01/01/22	03/31/22	04/01/21	03/31/22	\$48,569	\$164,715
RW FFY21 Grant Year Local (Rebate)		Amd 1	N/A	334.04.98	01/01/22	03/31/22	04/01/21	03/31/22	\$116,146	\$116,146
YR3 TFAH-Trust for America's Health		Amd 2, 10	N/A	334.04.98	10/01/22	03/31/23	10/01/22	09/30/23	\$5,400	\$10,000
YR2 TFAH-Trust for America's Health		Amd 2	N/A	334.04.98	02/01/22	09/30/22	10/01/21	09/30/22	\$4,600	\$4,600
<b>FPHS-LHI-Proviso (YR2)</b>		<b>Amd 12</b>	<b>N/A</b>	<b>336.04.25</b>	<b>07/01/22</b>	<b>06/30/23</b>	<b>07/01/21</b>	<b>06/30/23</b>	<b>\$250,000</b>	<b>\$2,719,000</b>
FPHS-LHI-Proviso (YR2)		Amd 6	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	\$2,469,000	\$2,469,000
FPHS-LHI-Proviso (YR2)		Amd 7	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	\$0	(\$1,345,000)
FPHS-LHI-Proviso (YR2)		Amd 1	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	\$1,345,000	\$1,345,000
FPHS-LHI-Proviso (YR1)		Amd 1	N/A	336.04.25	01/01/22	06/30/22	07/01/21	06/30/23	\$1,345,000	\$1,345,000
YR 25 SRF - Local Asst (15%) (FO-SW) SS		Amd 11	N/A	346.26.64	01/01/23	12/31/23	01/01/23	12/31/23	\$13,250	\$13,250
YR24 SRF - Local Asst (15%) (FO-SW) SS		Amd 7	N/A	346.26.64	01/01/22	12/31/22	07/01/21	06/30/23	\$1,500	\$19,000
YR24 SRF - Local Asst (15%) (FO-SW) SS		Amd 1	N/A	346.26.64	01/01/22	12/31/22	07/01/21	06/30/23	\$17,500	\$17,500
YR 25 SRF - Local Asst (15%) (FO-SW) TA		Amd 11	N/A	346.26.66	01/01/23	12/31/23	01/01/23	12/31/23	\$2,000	\$2,000
YR24 SRF - Local Asst (15%) (FO-SW) TA		Amd 1	N/A	346.26.66	01/01/22	12/31/22	07/01/21	06/30/23	\$1,000	\$1,000

Indirect Rate January 1, 2022-December 31, 2022: 37.96% Admin & Facilities; 37.96% Community Hlth Pgms (inc. Admin) & 39.47% Environmental Hlth Pgms (inc. Admin)

Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**		Statement of Work LHHJ Funding Period		DOH Use Only Chart of Accounts Funding Period		Funding Period Sub Total	Chart of Accounts Total
				Start Date	End Date	Start Date	End Date	Start Date	End Date		
TOTAL										\$12,298,666	\$12,298,666
Total consideration:	\$12,024,184										\$12,298,666
GRAND TOTAL	\$274,482										\$6,393,131
	\$12,298,666										\$5,905,535
										GRAND TOTAL	\$12,298,666
										Total Fed	\$6,393,131
										Total State	\$5,905,535

\*Catalog of Federal Domestic Assistance

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



**Exhibit A  
Statement of Work  
Contract Term: 2022-2024**

**DOH Program Name or Title:** Foundational Public Health Services (FPHS) - Effective July 1, 2022

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

**Contract Number:** CLH31014

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

**Period of Performance:** July 1, 2022 through June 30, 2023

<b>Funding Source</b> <input type="checkbox"/> Federal <Select One> <input checked="" type="checkbox"/> State <input type="checkbox"/> Other	<b>Federal Compliance (check if applicable)</b> <input type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development	<b>Type of Payment</b> <input type="checkbox"/> Reimbursement <input checked="" type="checkbox"/> Periodic Distribution
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**Statement of Work Purpose:** Per RCW 43.70.512, Foundational Public Health Services (FPHS) funds are for the governmental public health system: local health jurisdictions, Department of Health, state Board of Health, sovereign tribal nations and Indian health programs. These funds are to build the system's capacity and increase the availability of FPHS services statewide.

**Revision Purpose:** The purpose of this revision is to update allocation to match actual funds requested and distributed for SFY23. Task #1 increased by \$250,000 due to reallocation of unspent funds from other LHJs.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date	Funding Period End Date	Current Allocation	Allocation Change Increase (+)	Total Allocation
FPHS - LHJ - Proviso (YR2)	99202112	N/A	336.04.25	07/01/22	06/30/23	2,469,000	250,000	2,719,000
						0	0	0
						0	0	0
						0	0	0
						0	0	0
						0	0	0
<b>TOTALS</b>						<b>2,469,000</b>	<b>250,000</b>	<b>2,719,000</b>

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	<u>FPHS funds to each LHJ</u> – See below in <u>Program Specific Requirements – Activity Special Instructions</u> for details	See below in <u>Program Specific Requirements - Deliverables</u>	See below in <u>Program Specific Requirements - Deliverables</u>	<del>\$1,278,000</del> <b>\$1,528,000</b>
2	<u>Assessment funds to each LHJ</u> – See below in <u>Program Specific Requirements – Activity Special Instructions</u> for details	See below in <u>Program Specific Requirements - Deliverables</u>	See below in <u>Program Specific Requirements - Deliverables</u>	\$60,000
3	<u>Assessment funds to each LHJ – CHA/CHIP</u> – See below in <u>Program Specific Requirements – Activity Special Instructions</u> for details	See below in <u>Program Specific Requirements - Deliverables</u>	See below in <u>Program Specific Requirements - Deliverables</u>	\$30,000

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
4	<b>CD – Hepatitis C</b> – See below in <u>Program Specific Requirements – Activity Special Instructions</u> for details	See below in <u>Program Specific Requirements - Deliverables</u>	See below in <u>Program Specific Requirements - Deliverables</u>	\$37,000
5	<b>CD – Case Investigation Capacity</b> – See below in <u>Program Specific Requirements – Activity Special Instructions</u> for details	See below in <u>Program Specific Requirements - Deliverables</u>	See below in <u>Program Specific Requirements - Deliverables</u>	\$354,000
6	<b>CD – TB – Part 2</b> – See below in <u>Program Specific Requirements – Activity Special Instructions</u> for details	See below in <u>Program Specific Requirements - Deliverables</u>	See below in <u>Program Specific Requirements - Deliverables</u>	\$21,000
7	<b>EPH – Radiation Emergency Preparedness</b> – See below in <u>Program Specific Requirements – Activity Special Instructions</u> for details	See below in <u>Program Specific Requirements - Deliverables</u>	See below in <u>Program Specific Requirements - Deliverables</u>	\$38,000
8	<b>EPH – Climate Change Response</b> – See below in <u>Program Specific Requirements – Activity Special Instructions</u> for details	See below in <u>Program Specific Requirements - Deliverables</u>	See below in <u>Program Specific Requirements - Deliverables</u>	\$43,000
9	<b>EPH – Water System Capacity</b> – See below in <u>Program Specific Requirements – Activity Special Instructions</u> for details	See below in <u>Program Specific Requirements - Deliverables</u>	See below in <u>Program Specific Requirements - Deliverables</u>	\$38,000
10	<b>MCH – Child Death Review</b> – See below in <u>Program Specific Requirements – Activity Special Instructions</u> for details	See below in <u>Program Specific Requirements - Deliverables</u>	See below in <u>Program Specific Requirements - Deliverables</u>	\$83,000
11	<b>Lifecourse – Infrastructure &amp; Workforce Capacity</b> – See below in <u>Program Specific Requirements – Activity Special Instructions</u> for details	See below in <u>Program Specific Requirements - Deliverables</u>	See below in <u>Program Specific Requirements - Deliverables</u>	\$487,000

**DOH Program and Fiscal Contact Information** for all ConCon SOWs can be found on the [DOH Finance SharePoint](#) site. Questions related to this SOW, or any other finance-related inquiry, may be sent to [finance@doh.wa.gov](mailto:finance@doh.wa.gov).

FPHS staff from DOH and the Washington State Association of Local Public Health Officials (WSALPHO) will coordinate and communicate together to build and assure common systemwide approaches per FPHS Steering Committee direction and the FPHS framework intent.

- For LHJ questions about the use of funds:
  - Chris Goodwin, FPHS Policy Advisor, WSALPHO – [cgoodwin@wsac.org](mailto:cgoodwin@wsac.org), 564-200-3166
  - Brianna Steere, FPHS Policy Advisor, WSALPHO – [bsteere@wsac.org](mailto:bsteere@wsac.org), 564-200-3171
- ~~For other questions:~~
  - ~~Marie Flake, FPHS Lead, DOH – [marie.flake@doh.wa.gov](mailto:marie.flake@doh.wa.gov), 360-951-7566~~

#### **Program Specific Requirements**

The Steering Committee is engaged in a long-term, multi-biennial, phased, building-block approach to full funding and implementation of of FPHS statewide that includes:

- Full funding of FPHS with adequate, dedicated, stable funding that keeps pace with inflation and demand for services
- Full implementation of FPHS that includes system transformation and modernization to deliver services in the most equitable, effective, and efficient manner possible for the funds available

Foundational Public Health Services Definitions and related information can be found here: [www.doh.wa.gov/fphs](http://www.doh.wa.gov/fphs) or [FPHS | Powered by Box](#).

**Stable funding and an iterative decision-making process** – The FPHS Steering Committee is the decision making body for FPHS. The Steering Committee provides oversight including determination of goals, priorities, budget request, funding allocation and accountability metrics. The Steering Committee relies on FPHS Subject Matter Expert (SME) Workgroups and other FPHS workgroups to ensure a collaborative, systemwide, decision making process. The Steering Committee use an iterative approach to decision making. This means that additional tasks and/or funds may be added to a local health jurisdiction's (LHJ) FPHS Statement of Work (SOW) as funding decisions are made.

**Annual Allocations** – The legislature appropriates FPHS funding on an annual basis and the FPHS Steering Committee allocates funds annually through the FPHS Concurrence Process for the State Fiscal Year (SFY): July - June. FPHS funds can be applied retroactively to expenditures within the SFY for which they were allocated even if the expenditure occurred before the Steering Committee made the allocation decision or the agency contract was signed.

SFYs are named for the year in which they end. The state biennium is named for the year in which it begins and ends.

- SFY22 (July 1, 2021 – June 30, 2022); half of annual FPHS allocation disbursed July 1, 2021 and January 1, 2022
- SFY23 (July 1, 2022 – June 30, 2023); half of annual FPHS allocation disbursed July 1, 2022 and January 1, 2023
- SFY 22 & 23 comprise the 2021 – 2023 Biennium (21-23)

The Legislature appropriates FPHS funding amounts for each fiscal year of the biennium. This means that funds must be spent within that fiscal year and cannot be carried forward. Any funds not spent by June 30<sup>th</sup> each year must be returned to the State Treasury. Funding allocations reset and begin again at the start of the next fiscal year (July 1).

The Consolidated Contract (ConCon) is based on the calendar year and renewed every 3 years. FPHS statements of work may include reference information such as allocations, fund disbursement schedules, deliverable due dates, etc. that fall outside of the current 3-year contract period if they are part of the same state fiscal year. The purpose for including this information in the ConCon is to provide a) historical information from the previous ConCon cycle; and/or b) prospective information about future ConCon cycle, if they are part of the same SFY.

**Disbursement of FPHS funds to LHJs** – Unlike other ConCon grants, FPHS bill-back to DOH is NOT required. Half of the annual FPHS funds allocated by the Steering Committee to each LHJ are disbursed, each July and January. The July payments to LHJs and access to FPHS allocation for all other parts of the governmental public health system occur upon completion of the FPHS Annual Assessment.

**Spending of FPHS funds** – The FPHS funds are for assuring FPHS services are available, and as reflected in the SOW. Each agency is responsible for deciding how to spend their funds within the parameters established by the FPHS Steering Committee and the SOW contract. Assurance includes providing the FPHS as part of your jurisdiction's program operations, contracting with another governmental public health system partner to provide the service, or receiving the service through a new service delivery model such as cross-jurisdictional sharing or regional staff.

**Deliverables** – FPHS funds are to be used to increase the availability of FPHS services statewide. The FPHS accountability process measures how funds are sent, along with changes in system capacity through the FPHS Annual Assessment, system performance indicators, and other data. Each part of the governmental public health system that receives FPHS funds must complete:

1. Routine reporting of spending and spending projections. Process and reporting template are provided by the FPHS Steering Committee via FPHS Support Staff.

Unspent or projected unspent funds may be reallocated by the Steering Committee to other FPHS activities in order to fully utilize funds within the state fiscal year timeframe to deliver services to Washington communities. Any FPHS funds unspent at the end of the state fiscal year (ending June 30) revert to the state treasury. Because LHJs receive funds up front, prospectively, any unspent funds and must be returned to DOH by end of July of each year for DOH to return to the Office of Financial Management.

2. FPHS Annual Assessment is due each July to report on the previous state fiscal year. Process and reporting template are provided by the FPHS Steering Committee via FPHS Support Staff. System results are published in the annual FPHS Investment Report available at [www.doh.wa.gov/fphs](http://www.doh.wa.gov/fphs).

**BARS Revenue Code:** 336.04.25

**BARS Expenditure Coding** – provided for your reference

562.xx	BARS Expenditure Codes for FPHS activities: see below
10	FPHS Epidemiology & Surveillance
11	FPHS Community Health Assessment
12	FPHS Emergency Preparedness & Response
13	FPHS Communication
14	FPHS Policy Development
15	FPHS Community Partnership Development
16	FPHS Business Competencies
17	FPHS Technology
20	FPHS CD Data & Planning
21	FPHS Promote Immunizations
23	FPHS Disease Investigation – Tuberculosis (TB)
24	FPHS Disease Investigation – Hepatitis C
25	FPHS Disease Investigation – Syphilis, Gonorrhea & HIV
26	FPHS Disease Investigation – STD (other)
27	FPHS Disease Investigation – VPD
28	FPHS Disease Investigation – Enteric
29	FPHS Disease Investigation – General CD
40	FPHS EPH Data & Planning
41	FPHS Food
42	FPHS Recreational Water
43	FPHS Drinking Water Quality
44	FPHS On-site Wastewater
45	FPHS Solid & Hazardous Waste
46	FPHS Schools
47	FPHS Temporary Worker Housing
48	FPHS Transient Accommodations
49	FPHS Smoking in Public Places
50	FPHS Other EPH Outbreak Investigations
51	FPHS Zoonotics (includes vectors)
52	FPHS Radiation
53	FPHS Land Use Planning
60	FPHS MCH Data & Planning
70	FPHS Chronic Disease, Injury & Violence Prevention Data & Planning
80	FPHS Access/Linkage with Medical, Oral and Behavioral Health Care Services Data & Planning
90	FPHS Vital Records
91	FPHS Laboratory – Centralized (PHSKC Only)

There are two different BARS Revenue Codes for “state flexible funds” to be tracked separately and reported separately on your annual BARS report. These two BARS Revenue Codes and definitions from the State Auditor’s Office (SAO’s) are listed below along with a link to the BARS Manual. 336.04.25 is the new BARS Revenue Code to use for the Foundational Public Health Services (FPHS) funds included in this statement of work.

### **336.04.24 – County Public Health Assistance**

Use this account for the state distribution authorized by the 2013 2ESSB 5034, section 710. The local health jurisdictions are required to provide reports regarding expenditures to the legislature from this revenue source.

### **336.04.25 – Foundational Public Health Services**

Use this account for the funding designated for the local health jurisdictions to provide a set of core services that government is responsible for in all communities in the WA state. This set of core services provides the foundation to support the work of the broader public health system and community partners. At this time the funding from this account is for delivering ANY or all of the FPHS communicable disease services (listed above) and can also be used for the FPHS capabilities that support FPHS communicable disease services as defined in the most current version of FPHS Definitions.

Public Health Budgeting, Accounting and Reporting System (BARS) Resources: [www.doh.wa.gov/lhj/funding](http://www.doh.wa.gov/lhj/funding)

## **Special References (i.e., RCWs, WACs, etc.):**

Link to RCW 43.70.512 – [RCW 43.70.512: Public health system—Foundational public health services—Intent.](http://RCW43.70.512) ([wa.gov](http://wa.gov))

Link to RCW 43.70.515 – [RCW 43.70.515: Foundational public health services—Funding.](http://RCW43.70.515) ([wa.gov](http://wa.gov))

## **Activity Special Instructions:**

### **1. FPHS funds to each LHJ**

These funds are allocated to each Local Health Jurisdiction to assure FPHS are available in their own jurisdiction. In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, these funds may be used to provide any of the activities described in the most current version of FPHS definitions for foundational programs and foundational capabilities. Each LHJ is empowered to prioritize where and how to use these funds to maximize equitable, effective and efficient delivery of FPHS to every community in Washington.

Even if FPHS services are provided by another agency through a contract, new service delivery model, or centralized service delivery model (such as the State Public Health Lab), all agencies that receive FPHS funds are responsible for reporting progress on the availability and implementation within their jurisdiction using the FPHS Annual Assessment.

These funds are not intended for fee-based services such as selected environmental public health services, licensing of healthcare facilities, screening of newborn babies for congenital disorders, etc. As state funding for FPHS increases, other funds sources (local revenue, grants, federal block grants) should be directed to the implementation of additional important services and local/state priorities as determined by each agency/jurisdiction.

Use BARS expenditure codes from the list above that most closely align with expenditure made.

**Pandemic Response** – These FPHS funds are to be used as directed and allocated by the FPHS Steering Committee to deliver FPHS services. As the global COVID-19 pandemic and the public health response to it continues to wane, these FPHS funds can be braided with and used to supplement other short-term pandemic response funding as needed for FPHS activities during this period of performance through 6/30/23. Responding to pandemics, epidemics and public health emergencies are foundational services of the governmental public health system.

### **2. Assessment funds to each LHJ – (FPHS definition G.2)**

These funds are allocated to each Local Health Jurisdiction to assure FPHS are available in their own jurisdiction - Support LHJ assessment capacity with flexible funds to meet locally identified needs. BARS expenditure codes: 562.10 or 11

3. **Assessment funds to each LHJ – CHA/CHIP (FPHS definitions G.3)**  
These funds are allocated to each LHJ to assure FPHS are available in their own jurisdiction – Support any CHA/CHIP activity or service (e.g., data analysis, focus groups, report writing, process facilitation) and may be used to contract with other agencies for staff time or services. Use BARS expenditure codes: 562.11
4. **CD – Hepatitis C (FPHS definitions C.4.o-p)**  
These funds are to select LHJs to assure FPHS are available in their own jurisdictions – Address Hepatitis C cases per guidance developed by the statewide FPHS Communicable Disease Workgroup, including, but not limited to: shared priorities, standardized surveillance, minimum standards of practice, common metrics and staffing models. Use BARS expenditure codes: 562.24.
- The priorities for the 2021–2023 biennium (July 2021 – June 2023):
- Surveillance – entering labs into Washington Disease Reporting System (WDRS), enter acute cases into WDRS.
  - Investigation – focus on acute cases: people aged 35 or younger, newly diagnosed, pregnant women, people seen in the ED/inpatient, Black, Indigenous and People of Color or other historically marginalized population, and incorporate Hepatitis B work.
5. **CD – Case investigation Capacity (FPHS definitions C.2, C. 4)**  
These funds are to select LHJs to assure FPHS are available in their own jurisdictions - Support LHJ communicable disease capacity to conduct case investigation and follow up to reduce gaps and meet locally identified needs that address notifiable conditions responsibilities. Use BARS expenditure codes: 562.23-29.
6. **CD – TB – Part 2 (FPHS definition C.4.q-v)**  
Funding allocated to LHJs with high Tuberculosis (TB) burden - Expand capacity to conduct timely investigation for all infectious TB cases, conduct outreach and evaluation to Class B arrivers and infected contacts, provide education and resources to promote engagement with community
7. **EPH – Radiation Emergency Preparedness (FPHS definitions B.2, B.3, B.5, B.6, B.7)**  
 The goal of this investment is to sustainably fund planning, training, and response for radiological emergencies. This will include training with agency Incident Management Team members and other Environmental Public Health Division staff outside of the Office of Radiation Protection (ORP) to allow for smoothly coordinated response actions and public messaging. This will allow agencies to respond, investigate, remove and dispose of unwanted and abandoned radioactive materials, and address responsibilities for protection of public health and reducing the inappropriate burden placed on licensees to fund activities outside of their permit/license or registration. Use BARS expenditure code: 562.52
- Anticipated expenses include, but are not limited to:
- Staffing
  - Materials and supplies to support training exercises
8. **EPH – Climate Change Response (FPHS definitions B.1, B.2, B.3, B.6, B.7)**  
 The goal of this investment is to fund education, communications, and response needs for wildfire smoke and harmful algal blooms. These funds should be used to establish sufficient capacity to contribute to the public health education, communication, and response efforts necessary to reduce the public health impacts of wildfire smoke exposure, as well as the capacity to help communities prepare for wildfire smoke events through education, community engagement, guidance development, and emergency response. These activities should reduce LHJ reliance on DOH toxicology capacity to help them determine appropriate and consistent messaging and next steps, in addition to providing adequate funding to collect necessary samples or pay for laboratory costs. Use BARS expenditure code: 562.40
- Anticipated expenses include, but are not limited to:
- Staffing
  - Sampling and laboratory costs

**9. EPH – Water System Capacity** (FPHS Definitions B.3, B.6, B.7)

The goal of this investment is to increase LHJ capacity for water resource management and planning. This request was funded in 2022 as a "core team" and this new request is for LHJ capacity to engage in key issues related to water resources management, planning, etc. Use BARS expenditure code: 562.43 or 53.

Anticipated expenses include, but are not limited to:

- Staffing

**10. MCH – Child Death Review** (FPHS definitions D.1, F.1, F.2, F.3, J.1, J.2, K.1)

This investment assures LHJs and DOH have adequate staffing to conduct regular Child Death Reviews and use their findings to track fatality data and inform policy recommendations to reduce and eliminate preventable child deaths. Allocations are for staff and operating costs for 9 LHJs. Use BARS expenditure codes: 562.60.

Anticipated expenses include, but are not limited to:

- Staffing

**11. Lifecourse – Infrastructure & Workforce Capacity** (FPHS definitions D, E, F)

These funds are to each LHJ to assure FPFS are available in their own jurisdictions - Infrastructure and workforce investments to each LHJ to meet fundamental needs in three areas: Maternal/Child/Family Health; Access/Linkage with Medical, Oral and Behavioral Health Services; and Chronic Disease, Injury and Violence Prevention. Use BARS expenditure codes: 562.60 or 70 or 80.

**Exhibit A  
Statement of Work  
Contract Term: 2022-2024**

**DOH Program Name or Title:** Injury & Violence Prevention Overdose Data to Action - Effective September 1, 2022

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

**Contract Number:** CLH31014

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

<b>Funding Source</b> <input checked="" type="checkbox"/> Federal Subrecipient <input type="checkbox"/> State <input type="checkbox"/> Other	<b>Federal Compliance (check if applicable)</b> <input checked="" type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development	<b>Type of Payment</b> <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
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**Period of Performance:** September 1, 2022 through August 31, 2023

**Statement of Work Purpose:** The purpose of this statement of work (SOW) is to add level funding for Overdose Data to Action (OD2A) Year 3 Supplement. Kitsap Public Health District will support Strategy 6 - Establishing Linkages to Care, Strategy 8 - Partnerships with Public Safety and First Responders, and Strategy 9 - Empowering Individuals to Make Safer Choices.

**Revision Purpose:** The purpose of this revision is to edit language under activity 7 and remove contingency language around naloxone purchase. Program specific requirements like restrictions on funds and billing requirements have been updated.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date End Date	Current Allocation	Allocation Change None	Total Allocation
FFY22 OVERDOSE DATA TO ACTION PREV	77520272	93.136	333.93.13	09/01/22 08/31/23	107,417	0	107,417
					0	0	0
					0	0	0
					0	0	0
					0	0	0
					0	0	0
<b>TOTALS</b>					<b>107,417</b>	<b>0</b>	<b>107,417</b>

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.	Strategy 6: Continue to expand the Peninsula Harm Reduction Network by engaging local healthcare providers, behavioral health, EMS, law enforcement, and other community members to partner on harm reduction and anti-stigma education and improve access to substance use disorder (SUD) treatment and comprehensive care for people who access syringe exchange services. Timeline: By the end of March 2023, LHJ will expand its network to include local health care providers and local EMS.	Progress report: Describe procedures, policies, participation in network and program design. Describe successes, challenges, and ongoing changes to program. Demonstrate how work aligns with OD2A logic model.	Quarterly progress reports to DOH for all tasks.  Due Dates: September-November due December 9, 2022. December-February due March 10, 2023.	Monthly invoices for actual cost reimbursement will be submitted to DOH.  Total of all invoices will not exceed \$107,417 through August 31, 2023.



Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
2.	<p>Strategy 9: Continue to convene monthly community-wide meetings with partners and potential partners to discuss stigma reduction education programs and overdose prevention strategies for our community. Timeline: Ongoing, monthly.</p>	<p>Progress report: Share outcomes of meetings and what strategies and educational programs are being implemented. Successes and challenges. Share materials with DOH. Demonstrate how work aligns with OD2A logic model.</p>	<p>March-May due June 9, 2023. June-August final report for this funding period due September 29, 2023.</p>	<p>(See Special Billing Requirements below.)</p>
3.	<p>Strategy 6: Conduct site visits with current and future syringe exchange sites to ensure they are following policies and procedures and collecting appropriate data for exchanges. Continue to provide support and guidance where needed. Timeline: site visits for existing sites will be completed annually. LHJ lead will continue to have monthly check-ins via Zoom or telephone, with the syringe exchange sites it contracts with.</p>	<p>Progress report: Report site visit outcomes, collected data and any important finds, updates or changes to policies. Demonstrate how work aligns with OD2A logic model.</p>		
4.	<p>Strategy 6: Will implement QA system checklist created in 2022 during site visits with existing syringe exchange sites. Timeline: The Q A system checklist utilized annually during site visits beginning May 2022.</p>	<p>Progress report: Share progress with implementation of QA system. Demonstrate how work aligns with OD2A logic model.</p>		
5.	<p>Strategy 6: Provide overdose education and naloxone distribution in the county to agencies for their staff, and community members for individual use. Includes visiting agencies to provide training and participating in community events. Timeline: Ongoing as requested by agencies or community members and as community events occur.</p>	<p>Progress report: Report on types of education provided and to whom and amount of naloxone that was distributed. Provide names of agencies that training was provided for and types of community events that were participated in. Demonstrate how work aligns with OD2A logic model.</p>		
6.	<p>Strategy 8: Continue to build a relationship with EMS and other agencies/programs to begin discussing co-creating a post overdose outreach plan to help connect people who inject drugs with SUD treatment and other services after experiencing an overdose. Timeline: Ongoing - building these relationships will take time but the LHJ lead started that process in 2021/2022.</p>	<p>Progress report: Updates on creation and implementation of plan. Demonstrate how work aligns with OD2A logic model.</p>		
7.	<p>Dependent on <i>available DOH funding, LHH need, and contingent-on-CDC-approval</i>, the county may purchase and distribute naloxone <i>under prevention strategies, focusing on people who use drugs.</i> <i>Funding cannot be spent for naloxone until the LHH receives written approval from DOH. Reimbursement for naloxone purchases will be allowable after written approval is provided by DOH.</i></p>	<p>Progress report, <i>if applicable</i>: a. Number of staff/volunteers trained to use and distribute naloxone kits i. If possible, please share the description/topics of the training b. Number of kits purchased and in inventory c. Number of people who received naloxone kits and education on use</p>		

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		i. If possible, please share the description/contents of the provided education d. Number of nasal kits distributed i. If applicable, the number of kits distributed through vending machines and settings for vending machine locations ii. If possible, please share an average/estimate of number of kits/doses given per person e. Number of intramuscular kits distributed i. If possible, please share an average/estimate of number of kits/doses given per person f. Number of overdose reversals reported i. If known, please share the number of doses used per overdose reversal g. Do you plan to make any changes/updates in implementation or to the implementation plan? h. What have been successes/challenges in distribution? Please share any lessons learned or innovations.		
8.	Continue to participate in quarterly and monthly calls with DOH and LHJ's to share lessons learned and successes. Timeline: Ongoing.	Collaboration with grant partners and DOH to improve statewide efforts to address the opioid/all drug epidemic.		

**DOH Program and Fiscal Contact Information** for all ConCon SOWs can be found on the [DOH Finance SharePoint](#) site. Questions related to this SOW, or any other finance-related inquiry, may be sent to [finance@doh.wa.gov](mailto:finance@doh.wa.gov).

**Federal Funding Accountability and Transparency Act (FFATA) (Applies to federal grant awards.)**

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 Unique Entity Identifier (UEI) generated by SAM.gov.

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**

**Restrictions on Funds (i.e., disallowed expenses or activities, indirect costs, etc.):**

- Subrecipients may not use funds for research.

Exhibit A, Statement of Work

- Subrecipients may not use funds for clinical care except as allowed by law.
- Subrecipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- Generally, subrecipients may not use funds to purchase furniture or equipment.
- No funds may be used for:
  - Publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.
  - In accordance with the United States Protecting Life in Global Health Assistance policy, all non-governmental organization (NGO) applicants acknowledge that foreign NGOs that receive funds provided through this award, either as a prime recipient or subrecipient, are strictly prohibited, regardless of the source of funds, from performing abortions as a method of family planning or engaging in any activity that promotes abortion as a method of family planning, or to provide financial support to any other foreign non-governmental organization that conducts such activities. See Additional Requirement (AR) 35 for applicability (<https://www.cdc.gov/grants/additional-requirements/index.html>).
- Program funds cannot be used for ~~purchase~~ implementing or expanding drug “take back” programs or other drug disposal programs (e.g. drop boxes or disposal bags), or directly funding or expanding direct provision of substance abuse treatment programs. Such activities are outside the scope of this Notice of Funding Opportunity (NOFO). *As of November 2022, FFY22 Overdose Data to Action Funds may be used to purchase naloxone. Programs must receive prior approval from CDC, delivered as written approval from DOH, before purchasing naloxone.*

**Monitoring Visits (i.e., frequency, type, etc.):**

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

**Billing Requirements:**

Billing on an A19-1A invoice voucher must be received by DOH monthly. *DOH must receive correct and complete invoices within 45 days of the end of the period of performance for this statement of work.*

**Special Instructions:**

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

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

**Exhibit A  
Statement of Work  
Contract Term: 2022-2024**

**DOH Program Name or Title:** Youth Cannabis & Commercial Tobacco Prevention Program - Effective July 1, 2022

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

**Contract Number:** CLH31014

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

**Period of Performance:** July 1, 2022 through April 28, 2024

<b>Funding Source</b> <input checked="" type="checkbox"/> Federal Subrecipient <input checked="" type="checkbox"/> State <input type="checkbox"/> Other	<b>Federal Compliance (check if applicable)</b> <input checked="" type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development	<b>Type of Payment</b> <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
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**Statement of Work Purpose:** The purpose of this statement of work is to provide funding for cannabis & commercial tobacco (including vaping products) prevention and control activities as a regional contractor for the Youth Cannabis and Commercial Tobacco Prevention Program through four sources of funding: SFY23 Dedicated Cannabis Account, SFY23 Tobacco Prevention, SFY23 Youth Tobacco Vapor Products, and FFY22 Tobacco-Vap Prevention Component 1.

Note: Commercial tobacco includes any product that contains tobacco and/or nicotine, such as cigarettes, cigars, electronic cigarettes, hookah, pipes, smokeless tobacco, heated tobacco, and other oral nicotine products. Commercial tobacco does not include FDA-approved nicotine replacement therapies.

**\*\* PLEASE NOTE:** Due dates and allocations are for purposes of reflecting the total annual allocation and reporting for FFY22 and SFY23.

**Revision Purpose:** The purpose of this revision is to extend the period of performance from June 30, 2023 to April 28, 2024; add a Chart of Accounts Master Index Title for the next federal fiscal year round of funding; add delivery dates to coincide with the new line of funding; update program specific funding language for new line of funding; add termination disclaimer; and revise SOW.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date End Date	Current Allocation	Allocation Change Increase (+)	Total Allocation
SFY23 YOUTH TOBACCO VAPOR PRODUCTS	77410893	N/A	334.04.93	07/01/22 06/30/23	38,402	0	38,402
FFY22 TOBACCO-VAPE PREV COMP 1	77410212	93.387	333.93.38	04/29/22 04/28/23	24,482	0	24,482
SFY23 TOBACCO PREVENTION PROVISO	77410823	N/A	334.04.93	07/01/22 06/30/23	194,000	0	194,000
SFY23 DEDICATED CANNABIS ACCOUNT	77420823	N/A	334.04.93	07/01/22 06/30/23	247,509	0	247,509
FFY23 TOBACCO-VAPE PREV COMP 1	77410215	93.387	333.94.98	04/29/23 04/28/24	0	24,482	24,482
<b>TOTALS</b>					<b>504,393</b>	<b>24,482</b>	<b>528,875</b>

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	DEVELOP NETWORK ANNUAL WORK PLAN	Contractor will submit a work plan for 2022-2023 utilizing the template provided by YCCTPP that addresses the four goals of the program and includes: <ul style="list-style-type: none"> <li>Performance-based objectives that will be defined by the contractor and YCCTPP contract manager.</li> <li>Activities that utilize program strategies (defined into the YCCTPP implementation guide), that will address the defined performance-based</li> </ul>	45 days of contract execution	Funding utilized: State (YTVP, Tobacco Prevention, Marijuana Prevention and Education)

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		<p>objectives and overarching goals, tied to a specific timeframe with identified timeline goals.</p> <ul style="list-style-type: none"> <li>• <b>Funding must be dedicated to equitable policy, systems, environmental change in communities of higher need within the contractor’s specified region, and if it is unclear a justification must be provided.</b></li> <li>• The workplan must have a designated equity framework that will be utilized in <b>all</b> prevention efforts.</li> <li>• This workplan will be created in collaboration with and approved by the YCCTPP Contract Manager.</li> <li>• More details regarding the workplan requirements including the goals of the YCCTPP program, objectives, and strategies can be found in the YCCTPP Implementation guide.</li> </ul> <p>Note: Activities can be added to the tasks after workplan approval, the contractor should speak with their contract manager for approval.</p>		<p>Reimbursement for actual expenditures, not to exceed total funding consideration. A19-1A invoice for YCCTPP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract.</p> <p>The expenditure worksheet in the YCCTPP budget workbook must be completed by the 30<sup>th</sup> of the month following the month in which costs were incurred.</p>
2	NETWORK EQUITY ASSESSMENT	<p>Contractor will complete an <u>initial equity assessment</u> provided by YCCTPP within their regional network that will be submitted to the YCCTPP contract manager <b>within 90 days of the workplan being completed</b>. The assessment will be continuously revised throughout the year based on the network’s needs.</p>	Within 90 days of the workplan being completed	
3	ORGANIZATION AND NETWORK ADMINISTRATIVE PLAN	<p>Contractor will complete an administrative plan within <b>90 days of contract execution</b> and submit any updates or changes on a quarterly basis, which will include:</p> <ul style="list-style-type: none"> <li>• Most current job descriptions and contact information of the program facilitator that is responsible for the performance of the statement of work and relevant staff.</li> <li>• Calendar of meetings, trainings, and professional development opportunities that the program administrator and relevant staff will participate in. All relevant staff are expected to participate in required conference calls (including kick off training, monthly check ins, YCCTPP program all contractors calls), trainings, webinars, and in-person or virtual meetings for YCCTPP contractors according to the schedule provided by DOH. <b>This is subject to change based on trainings and professional opportunities available.</b></li> <li>• A list of all individuals/organizations that participate in the regional network that including contact information, a copy of a Memorandum of Understanding (MOU), Memorandum of Agreement (MOA), or membership agreement, and the justification of their participation in the network.</li> <li>• <b>Required network sectors must have a representative for the grant to be considered in compliance.</b> Sectors chosen and their levels of engagement will be determined with the contract manager and tailored to the region’s needs. A complete list of network sectors will be provided in the implementation guide.</li> <li>• Network meeting schedule and supporting documentation regarding membership participation/engagement.</li> </ul>	90 days of contract execution	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
4	<p>IMPLEMENT ANNUAL WORK PLAN AND REPORT PROGRESS</p>	<ul style="list-style-type: none"> <li>A list of organizations and the contact information for the point person that are considered subcontractors.</li> </ul> <p>Based on the specific timeline developed by the YCCTPP contract manager and the contractor, they will report on activities progress and data by the <b>20<sup>th</sup> of each month</b>.</p> <p>Contractor will share network process on a quarterly basis through electronic survey that focuses on successes and challenges of their network and the YCCTPP program.</p>	<p>20<sup>th</sup> of each month</p>	
5	<p>ASSESS PROGRAM IMPLEMENTATION</p>	<p>Contractor will create annual report based on monthly and quarterly reporting for their regional network due <b>30 days after the period of performance</b>. Report guidelines and expectations will be provided by DOH for more information.</p> <p>Contractor will participate in state evaluation of YCCTPP, their networks, and the Practice Collaborative.</p> <p>Contractor will participate in region or population needs assessment every 2 years to update community/population data and needs.</p> <p>Contractor will participate in creation and updating of the 5-year strategic plan for the YCCTPP Program.</p>	<p>Annual Report- 30 days after the period of performance</p> <p>Needs assessment due every 2 years</p>	
6	<p>PREPARE AND MANAGE WORK PLAN</p>	<p>Contractor will submit work plan for 2022-2023 for all required tasks (listed in more detail within the table below) for commercial tobacco prevention within <b>45 days of the state contract execution (estimated start date of 7/1/22)</b>, utilizing template provided by YCCTPP that addresses the goals of the program as well as CDC grant requirements, which includes:</p> <ul style="list-style-type: none"> <li>A minimum of one activity per required task with performance-based objective that will be defined by the contractor and the YCCTPP Contract Manager during workplan development.</li> <li>The workplan plan must have a designated equity framework that will be utilized in <u>all</u> prevention efforts.</li> <li>Funding must be dedicated to supporting the regional/priority population through equitable policy, systems, and environmental change and if it is unclear, a justification must be provided.</li> </ul> <p>This workplan will be created in collaboration with and approved by the YCCTPP Contract Manager. Note: Activities can be added after workplan approval, the contractor should speak with their YCCTPP contract manager for approval.</p>	<p><b>45 days of the state contract execution</b></p>	<p>Funding utilized: CDC</p> <p>Reimbursement for actual expenditures, not to exceed total funding consideration. A19 invoice for YCCTPP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract.</p> <p>The expenditure worksheet in the budget work-book must be completed by the 30th of the month following the month in which costs were incurred.</p>
	<p>IMPLEMENT WORK PLAN AND REPORT PROGRESS</p>	<p>Based on the specific timeline developed by the YCCTPP contract manager and the contractor, they will report on activities progress and data by the <b>20<sup>th</sup> of each month</b>.</p>	<p><b>20<sup>th</sup> of each month</b></p>	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		<p>Contractor will share network process on quarterly basis through electronic survey that focuses on successes and challenges of their organization and YCCTPP program.</p>		
	<p><b>ASSESS PROGRAM IMPLEMENTATION</b></p>	<p>Contractor will participate in statewide evaluation of YCCTPP, Practice Collaborative, and CDC-funded programs.</p> <p>Contractor will participate in creation and updating of the 5-year strategic plan for the YCCTPP Program.</p> <p>Contractor will participate in community or population needs assessment every 2 years to update community/population data and needs.</p>	<p>Annual Report due 30 days after the period of performance</p> <p>Needs assessment due every 2 years</p>	
7	<p><b>Policies, Systems &amp; Environmental Work</b></p>	<p>Contractor will work to strengthen or defend existing policy, systems, or environmental change (ex: SIPP and VIPP laws).</p> <p>Contractor will educate private and public organizations of current policies in place.</p> <p>Contractor will work to establish new policy, systems or environmental change that is equitable.</p> <p>Contractor will ensure that an existing policy, systems, or environmental change is properly implemented (including funding) and evaluated/monitored.</p>	<p>04/28/22 – 04/29/23 <i>04/29/23 – 12/31/23</i></p>	
	<p><b>Education &amp; Technical Assistance</b></p>	<p>Contractor will provide technical assistance regarding commercial tobacco (including e-cigarettes/vapor products) to community partners, and decision makers.</p> <p>Contractor will host or speak at trainings or community events to education others regarding prevention and education for commercial tobacco to increase the knowledge skills, and abilities of network members, community partners, and other community stakeholders.</p> <p>Contractor will disseminate resources (ex: TUDT) provided by YCCTPP and/or developed local to CBOs, centers, and networks supporting disparately affected communities that address emerging commercial tobacco/e-cigarettes and are culturally &amp; linguistically appropriate, trauma-informed &amp; equity-based.</p>	<p>04/28/22 – 04/29/23 <i>04/29/23 – 12/31/23</i></p>	
	<p><b>Collaboration &amp; Engagement</b></p>	<p>Contractor will collaborate with YCCTPP program partners and external organizations (CBOs, CPWI, TPWI, ACH, DFC, etc.) to support prevention efforts for the youth and their community.</p> <p>Contractor will educate individuals, public and private organizations on the value of YCCTPP, utilizing material provided by DOH or created by their own organization network or another YCCTPP contractor/network.</p>	<p>04/28/22 – 04/29/23 <i>04/29/23 – 12/31/23</i></p>	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		<p>Contractor will educate adults who influence youth, such as parents, other family members, educators, clergy, coaches, etc.</p> <p>Contractor will build or enhance partnerships with youth-serving organizations and local champions (including identifying youth champions) to collaborate on youth access and industry marketing.</p> <p>Contractor will implement activities designed to prepare young people to make informed decisions, and lead change in their community.</p>		
	<p><b>Media &amp; Communication</b></p>	<p>Contractor will plan and implement public relations/earned media efforts (i.e. press releases, social media) utilizing national (ex: CDC Tips Campaign), statewide, and tailored media campaigns to prevent youth commercial tobacco initiation, and support cessation.</p> <p>Contractor will promote Washington State Quitline and self-help options for TUDT, including 2Morrow Health App (<a href="http://doh.wa.gov/quit">doh.wa.gov/quit</a>) and This is Quitting (<a href="http://doh.wa.gov/vapefreeva">doh.wa.gov/vapefreeva</a>), to people who use commercial tobacco.</p> <p>Contractor will prepare (design, research, write, edit), get approval for, or distribute informational/educational materials in hard copy or online.</p> <p>Contractor will plan, conduct, and document reach of various campaigns on various platforms (e.g., social media, point of purchase, movie theaters, radio, etc.).</p>	<p>04/28/22 – 04/29/23  <span style="color: red;">04/29/23 – 12/31/23</span></p>	
8	<p><b>Synar Coverage Study</b></p>	<p>Contractor will attend trainings hosted by Washington State Health Care Authority regarding the Coverage Study. The training schedule will be announced by August 15, 2022.</p> <p>Contractor will utilize the designated amount of funds (\$4,000) to pay for staff time, travel-related costs, and other relevant costs to the completion of the Coverage Study in their assigned census tract(s) by October 31, 2022.</p> <p>Contractor may use any funds not utilized in the designated amount for the coverage study for other commercial tobacco-related activities that focus on prevention, control, and/or cessation.</p>	<p>October 31, 2022</p>	<p>Funding Utilized: SFY23 Tobacco Prevention</p> <p>Reimbursement for actual expenditures, not to exceed total funding consideration. A19 invoice for YCCTPP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract. The expenditure worksheet in the budget workbook must be completed by the 30th of the month following the month in which costs were incurred.</p>



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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 Unique Entity Identifier (UEI) generated by SAM.gov. 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**

**For MI Codes 77410893, 77410823 & 77420823 To be in compliance with grant requirements, contractor will:**

1. Hire and maintain program staff, which includes a minimum of one person (1.0 FTE) who is designated as the YCCTPP Region Network Facilitator. Additional staff to support workplan activities and completion of deliverables is allowed with approval of YCCTPP contract manager. See YCCTPP implementation guide for more information. The contractor shall ensure that DOH has the most current contact information of the person that is responsible for the performance of this statement of work.
2. ~~Participate in required conference calls (including kick-off trainings, monthly check-ins, quarterly conference calls for the YCCTPP program), trainings, webinars, and in-person or virtual meetings for YCCTPP contractors according to the schedule provided by DOH. Maintain a regional network of prevention partners.~~
  - i. *A Network - an intentional collaboration between groups and individual partners who draw upon lived and professional experience to help guide the regions prevention efforts and share resources.*
  - ii. Minimum Requirements for A Network (See Implementation Guide for further guidance):
    1. A Network Coordinator (minimum of 1.0 FTE)
    2. Key partners with representation from 4 required sectors (Local Health Jurisdiction, Youth Serving Organization, Community Based Organization / Non-Profit, and Prevention Coalitions)
    3. A clear process for engaging key partners in development of YCCTPP workplan and shared responsibility in implementation.
    4. A Network Administrative Plan
3. ~~Submit an Annual Implementation Plan and Budget according to the deadlines in Section E below. Participate in required virtual and/or in-person meetings, and optional trainings/webinars including but not limited to:~~
  - i. YCCTPP quarterly meetings, tentatively scheduled for July 11, 2023, November 7-9, 2023, March 12, 2024, and May 14-16, 2024.
  - ii. Monthly check-ins with contract manager
  - iii. Practice Collaborative (PC) meetings, schedule to be determined by the PC's Leadership Team
  - iv. Optional: Trainings and/or Webinars, schedule to be determined by TA contractor and WA DOH.
  - v. Contractor will participate in a DOH site visit once per biennium.
4. ~~Submit an Organization and Network Equity Assessment according to the deadlines in Section E below. Contractor will serve as YCCTPP Representative of their region/population for Washington State.~~
5. ~~Submit an Organization and Network Administrative Plan according to the deadlines in Section E below.~~

Act as the fiduciary agent, if subcontracting, DOH must be notified and approve of any subcontractors; however, subcontractor performance is the responsibility of each YCCTPP Contractor.
6. ~~Submit accurate and complete progress reports, budgets, and A19-1A invoices, using the required guidance, reporting tool or system, and deadlines (see Section E below) provided by DOH.~~

Meet all requirements outlined in the YCCTPP Implementation Guide provided by YCCTPP.

7. Have completed background checks and on file for any staff or volunteer (funded and/or representing a YCCTPP contractor or subcontractor) who will be with youth and unsupervised. Prohibit any staff with a felony conviction related to their duties from supervising and interacting with minors while performing the duties of this contract. This requirement is consistent with existing statute RCW 9.96A.020.

**For MI Codes: 77410212, To be in compliance with grant requirements, the contractor will:**

1. Hire and maintain program staff, which includes at least .25 FTE (that can be split among two people). They shall ensure that DOH has the most current contact information of the local program administrator that is responsible for the performance of this statement of work.
2. Participate in required conference calls (including kick off training, monthly check ins, quarterly conference calls for the YCCTPP program), trainings, webinars, and in-person or virtual meetings for YCCTPP contractors according to the schedule provided by DOH.
3. Submit an Annual Budget according to the deadlines in Section E below.
4. Submit an Annual Work Plan that is supplemental to the state contract, according to the deadlines in Section E below.
5. Submit accurate and complete progress reports, budgets, and A19-1A invoices, using the required guidance, reporting tool or system, and deadlines (see Section E below) provided by DOH.
6. Act as the fiduciary agent if subcontracting. DOH must be notified and approve of any subcontractors; however, subcontractor performance is the responsibility of each YCCTPP Contractor.
7. Meet all requirements outlined in the YCCTPP Implementation Guide provided by YCCTPP.
8. Have completed background checks and on file for any staff or volunteer (funded and/or representing a YCCTPP contractor or subcontractor) who will be with youth and unsupervised. Prohibit any staff with a felony conviction related to their duties from supervising and interacting with minors while performing the duties of this contract. This requirement is consistent with existing statute RCW 9.96A.020.

**For MI Code: 77410215, To be in compliance with grant requirements, the contractor will:**

1. *Hire and maintain program staff, which includes at least .25 FTE (that can be split among two people). They shall ensure that DOH has the most current contact information of the local program administrator that is responsible for the performance of this statement of work.*
2. *Participate in required conference calls (including kick off training, monthly check ins, quarterly conference calls for the YCCTPP program), trainings, webinars, and in-person or virtual meetings for YCCTPP contractors according to the schedule provided by DOH.*
3. *Submit an Annual Budget according to the deadlines in Section E below.*
4. *Submit an Annual Work Plan that is supplemental to the state contract, according to the deadlines in Section E below.*
5. *Submit accurate and complete progress reports, budgets, and A19-1A invoices, using the required guidance, reporting tool or system, and deadlines (see Section E below) provided by DOH.*
6. *Act as the fiduciary agent if subcontracting. DOH must be notified and approve of any subcontractors; however, subcontractor performance is the responsibility of each YCCTPP Contractor.*
7. *Meet all requirements outlined in the YCCTPP Implementation Guide provided by YCCTPP.*
8. *Have completed background checks and on file for any staff or volunteer (funded and/or representing a YCCTPP contractor or subcontractor) who will be with youth and unsupervised. Prohibit any staff with a felony conviction related to their duties from supervising and interacting with minors while performing the duties of this contract. This requirement is consistent with existing statute RCW 9.96A.020.*

**DOH will support Contractor by providing:**

1. Timely communications regarding funding amounts and/or funding reductions.
2. An annual calendar of key events including required and optional trainings and other key dates.
3. Contract oversight and point of contact for overall project coordination, technical assistance, and facilitation of project communication.
4. Templates for implementation plan, budget workbook, and reporting requirements.
5. Technical assistance on meeting project goals, objectives, and activities related to:
  - a. Adapting required and innovative activities to ensure they are culturally and linguistically appropriate evidence-based or evidence-informed, or promising programs.
  - b. Developing and adapting project materials so they are culturally and linguistically appropriate using Cultural and Linguistically Appropriate Services (CLAS) standards <https://minorityhealth.hhs.gov/omb/browse.aspx?vl=2&vlid=53>.

- c. Providing relevant resources and training, as resources permit.
- d. Meeting performance measure, evaluation, and data collection requirements.
- e. Interpreting DOH guidelines, requirements, and expectations. This includes making determinations of whether CTPP funds may be used for activities and projects proposed by the Priority Population Contractor.

**Program Administration:**

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

**Subcontractor Requirements:**

1. When subcontracting with an organization that is leading regional efforts in one or more counties, the YCCPPP Contractor is required to include language in these contracts that reflects the following:
  - Submit monthly progress reports and invoices that reflect work performed and funding spent using tools provided by DOH or the YCCPPP Contractor. **Monthly progress reports for subcontractors should be due by the 15<sup>th</sup> of each month.**
2. When subcontracting with an organization to work directly with youth (ages 0-17), the YCCPPP Contractor is required to include language in these contracts that reflects the following:
  - 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.

**Required Plans and Reports**

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

<u>Report</u>	<u>Date Due</u>
1. Submit an annual work plan and budget	Annually, no later than 45 days after state contract execution (07/01/22). DOH approval will occur no later than two weeks after submission. Update as needed with contract manager approval.
2. Expenditure Report and Request for Reimbursement (A19)	A19s and updated budget workbook due the 30 <sup>th</sup> of the month following the month in which costs are incurred.  Non-health departments (non-consolidated contracts): A19 documents (PDFs) must be saved, signed and emailed with the following title format: <b>A-19-Contract #-organization name-month-year.</b>

<p><del>3. Final Expenditure Projections, Report and Request for Reimbursement (FY Closeout)</del></p>	<p><del>Year end projections are due as follows: SFY23: May 10, 2023. An invoice must be submitted market FINAL INVOICE PROJECTION</del></p> <p><del>Final Expenditure Reports and invoices are due no later than July 14, 2023 for SFY and June 13, 2023 for FFY and must be marked FINAL INVOICE.</del></p>
<p><del>4. Monthly Progress Report</del></p>	<p><del>The 20<sup>th</sup> of the month following the month in which activities were performed. Monthly reports of work will report on overall progress of activities in a monthly survey provided by YCC TPP. All documents related to task activities will be attached. Subcontractor reporting should be submitted to the YCC TPP contractor by the 15<sup>th</sup> of each month.</del></p>
<p><del>5. Quarterly Progress Report</del></p>	<p><del>The 20<sup>th</sup> of the of each month on a quarterly basis, starting September 2022 that focuses on narrative successes and challenges for each contractor. This report will be submitted in a survey provided by YCC TPP.</del></p>
<p><del>6. SFY Only: Network Equity Assessment</del></p>	<p><del>Completed annually, no later than 90 days after workplan approval.</del></p>
<p><del>7. SFY Only: Organization and Network Administrative Plan</del></p>	<p><del>Completed no later than 90 days after contract execution and updated quarterly after the fact.</del></p>
<p><del>8. SFY Only: Annual Report</del></p>	<p><del>Completed no later than 30 days after period of performance, utilizing a template provided by YCC TPP that includes data from monthly and quarterly reports.</del></p>
<p><del>9. Assessment and Evaluation</del></p>	<p><del>Using a template provided by YCC TPP, complete project evaluation activities developed and coordinated by YCC TPP as requested. Additionally, utilizing data in monthly and quarterly progress reports, participate and support statewide evaluation efforts of CDC funds.</del></p>

**BREAKDOWN OF DELIVERABLES, DUE DATES, AND FUNDING SOURCE**

<b>Deliverable</b>	<b>Due Date</b>	<b>Funding Source</b>
Update Annual Network Workplan & Submit budget proposal	Due within 15 days of Contract Execution July 16, 2023	YTVP DCA
Submit Organization Administrative Plan	Due within 30 Days of Contract Execution July 31, 2023	YTVP DCA
Network Administrative Plan	Due within 90 days of contract execution September 30, 2023	YTVP DCA
Community/Population Data Evaluation and Needs & Resource Assessment	Due by last day of the contract June 30, 2024	YTVP DCA
Monthly Progress Reporting	Due the 20 <sup>th</sup> of each month	YTVP DCA
Annual Report	Due within 30 days after the period of performance. July 31, 2024	YTVP DCA

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

**Payment**

- All expenditures incurred and reimbursements made for performance under this statement of work shall be based on actual allowable costs in accordance with the YCC TPP Implementation Guide.
- DOH will reimburse the contractor for actual allowable program costs. Billings for services on a monthly fraction of the budget will not be accepted or approved.

- DOH shall pay the contractor all allowable costs incurred as evidenced by a proper invoice submitted to DOH on a timely basis, insofar as those allowable and allocable costs do not exceed that amount appropriated or otherwise available for such purposes as stated herein, or in subsequent amendments.
- DOH shall pay for costs under this statement of work up to a total not exceeding the total funding consideration amount. Costs allowable under this statement of work are based on DOH-approved budget for periods of performance: SFY July 1, 2022 – June 30, 2023, ~~FFY April 29, 2022 – April 28, 2023 & April 29, 2023 – April 28, 2024~~
- Authorized and allowable program expenditures shall be reimbursed upon receipt and approval of the Monthly Progress Report, Monthly Expenditure Report and Request for Reimbursement form (A19) according to Section E of this contract. If the Monthly Progress Report, Expenditure Report and/or Request for Reimbursement form (A19) 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.
- Final expenditure projections must be submitted by the 14<sup>th</sup> of July for state funds and 13<sup>th</sup> of June for federal funds to allow DOH to appropriately accrue funds to make final payments.
- 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.
- 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.
- Submission of electronic reports, deliverables, and other invoice attachments are preferred; however hard copies are acceptable.

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

Meet requirements outlined in the Youth Cannabis and Commercial Tobacco Prevention Program (YCCTPP) Implementation Guide.

#### **Evaluation of YCCTPP Contractor's Performance**

*The YCCTPP Contractor performance will be evaluated through submission of project deliverables, annual budget tracking, network partnership and collaboration efforts. More information on evaluation can be found in the Implementation Guide.*

~~The YCCTPP Contractor performance will be evaluated on the following:~~

- ~~Timely completion, submission and YCCTPP approval of proposed annual work plan and Annual Budget Tracking Tool (Budget Line Items, Summary Budget Projections, Budget Narrative) to their designated contract manager in accordance with YCCTPP guidance and requirements.~~
- ~~Submission of an organizational and network equity assessment with YCCTPP guidance, requirements, and timelines.~~
- ~~Submission of an organizational and network administrative plan with YCCTPP guidance, requirements, and timelines.~~
- ~~Submission of Electronic A19 Invoice and Financial Back-up Document to DOH Grants Management and the YCCTPP SharePoint by the due dates listed above.~~
- ~~Submission of monthly progress reports and quarterly reports by the due dates listed above.~~
- ~~Submission of annual report with YCCTPP guidance, requirements, and timelines.~~
- ~~Site visits per requirements and protocols provided by DOH/YCCTPP.~~

#### **Restrictions on Funds (what funds can be used for which activities, not direct payments, etc.) Federal Funding Restrictions and Limitations:**

- Recipients may not use funds for research.
- Recipients may not use funds for clinical care except as allowed by law.
- Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- Recipients may not use funds to purchase tobacco prevention curriculum for K-12 schools.
- Recipients may not use funds for tobacco compliance check inspections.
- Recipients may not use funds to pay for Syнар or Federal Drug Administration (FDA) compliance monitoring.
- Generally, recipients may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- Reimbursement of pre-award costs generally is not allowed, unless the CDC provides written approval to the recipient.

- 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](#).
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.

In accordance with the United States Protecting Life in Global Health Assistance policy, all non-governmental organization (NGO) applicants acknowledge that foreign NGOs that receive funds provided through this award, either as a prime recipient or subrecipient, are strictly prohibited, regardless of the source of funds, from performing abortions as a method of family planning or engaging in any activity that promotes abortion as a method of family planning, or to provide financial support to any other foreign non-governmental organization that conducts such activities. See Additional Requirement (AR) 35 for applicability (<https://www.cdc.gov/grants/additionalrequirements/ar-35.html>).

**Dedicated Cannabis Account Restrictions:**

- 0) Recipients may not use funds for clinical care.
- 1) 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 cannabis products or paraphernalia used in the consumption and/or use of cannabis products.
- 2) 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.
- 3) Recipients may not use funding for construction or other capital expenditures.
- 4) The contractor must comply with DOH YCCTPP guidance on food, incentives and use of DOH logo outlined in the YCCTPP Tailored Implementation Guide, and should not exceed federal per diem rates.
- 5) Reimbursement of pre-award costs is not allowed.

**Please see YCCTPP Implementation Guide for further restricts on each funding stream.**

**Program Manual, Handbook, Policy References**

Meet requirements outlined in the Youth Cannabis and Commercial Tobacco Prevention Program (YCCTPP) Implementation Guide.

**Special References**

As a provision of Dedicated Cannabis Account ([RCW 69.50.540](#)) 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.

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

As a provision of the 2022 Operating Budget, ([ESSB5693](#)) funds are provided solely for tobacco, vapor product, and nicotine control, cessation, treatment and prevention, and other substance use prevention and education, with an emphasis on community-based strategies. These strategies must include programs that consider the disparate impacts of nicotine addiction on specific populations, including youth and racial or other disparities.

**AMENDMENT TO AGREEMENT 2262**

This Amendment (“Amendment”) to Kitsap Public Health District Contract for Youth Cannabis & Commercial Tobacco Prevention Program (the “Contract”), is entered into between the Jefferson County Public Health (“Contractor”) and the Kitsap Public Health District (“District”).

**RECITALS**

**WHEREAS**, the Parties entered into the Contract effective July 1, 2022; and

**WHEREAS**, Washington State Department of Health has extended the contract by one year, and thus, has made changes to the statement of work, and the parties have agreed it is desirable to adjust funding; and

**WHEREAS**, the Parties have entered into one prior amendment to the Contract.

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

- I. **Amendment of Contract Section 1. Period of Performance.** The date of the contract will be extended to June 30, 2024.
- II. **Amendment of Contract Section 4. Statement of work and Budget.** Subcontractor shall furnish the necessary personnel, equipment material, and/or services and otherwise do all the things necessary for or incidental to the performance of the work set forth in ATTACHEMENT A-2, attached hereto and incorporated herein. ATTACHMENT A of the initial contract and ATTACHMENT A-1 of Amendment 1 remain unchanged.
- III. **Amendment of Contract Section 5. Compensation.** \$82,000 dollars will be added to the total budget for Jefferson County Public Health to provide services in both Jefferson County and Clallam County. For a total compensation of \$209,761.
- IV. **Other Provisions Unchanged.** The other provisions of the Contract, as it has been amended from time to time, remain unchanged.
- V. **Effective Date.** This Amendment is effective July 1, 2023.
- VI. **Authorization.** Each party signing below warrants to the other party that they have the full power and authority to execute this Amendment on behalf of the party for whom they sign.

[SIGNATURES FOLLOW ON THE NEXT PAGE]

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

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2023.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2023.

**KITSAP PUBLIC  
HEALTH DISTRICT**

**BOARD OF COUNTY COMMISSIONERS  
JEFFERSON COUNTY, WASHINGTON**

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

\_\_\_\_\_  
Heidi Eisenhour, Chair

Date

ATTEST:

\_\_\_\_\_  
Carolyn Galloway, Clerk of the Board

APPROVED AS TO FORM:

\_\_\_\_\_  
Philip C. Hunsucker, Date  
Chief Civil Deputy Prosecuting Attorney



**ATTACHMENT A-2 – SCOPE OF WORK AND BUDGET**  
**Jefferson County Public Health**  
**July 1, 2023 – June 30, 2024**

As a subrecipient of KPHD under the Washington Department of Health funded *Youth Cannabis & Commercial Tobacco Prevention Program (YCCTPP)*, Jefferson County Public Health agrees to the following activities funded in full or part by the associated budget.

<b>Activity</b>	
<b>Planning &amp; Coordination of Regional Network</b>	<p>Coordinate and maintain the Olympic Prevention Partnership steering committee and network.</p> <ul style="list-style-type: none"> <li>• Invite new community partners to join the Olympic Prevention Partnership Steering Committee.</li> <li>• Attend four quarterly regional networking meetings (June 2023 – June 2024)</li> <li>• Each subcontractor will be responsible for planning one of the above meetings. Refer to the workplan for schedule.</li> </ul>
<b>Implementation</b>	<p><i>2023-2024 Strategies for Youth Cannabis &amp; Commercial Tobacco Prevention:</i></p> <ul style="list-style-type: none"> <li>• <b>Social Norms: Media &amp; Health Communications</b></li> <li>• <b>Youth Empowerment &amp; Engagement</b></li> <li>• <b>Decision-maker Engagement</b></li> <li>• <b>Policy, System, Environmental Changes</b></li> </ul> <p>Specific Jefferson County activities are described in the 2023-2024 YCCTPP workplan. Please refer to the workplan for guidance on which activities fall under each funding source. Workplans are subject to change. Any changes will be approved by both parties.</p>
<b>Monitoring and Reporting</b>	<p>Monitor progress for each activity as appropriate; submit monthly narrative and data reports as requested by KPHD on the 5<sup>th</sup> of every month.</p>
<b>Midterm Evaluation</b>	<p>By February 1, 2024, report progress to YCCTPP Regional Coordinator. If needed, adjust activities to ensure spend down. Conduct a mid-year workplan re-evaluation.</p>
<b>Calls/Meetings</b>	<p>Participate in monthly conference call with KPHD and attend webinars as scheduled; respond to correspondences related to YCCTPP from the Department of Health; respond to activity assessments/surveys administered by KPHD as appropriate per scope of work.</p>
<b>Invoicing</b>	<p>Submit monthly invoices by the 20<sup>th</sup> of the month following the month in which costs were incurred, except for the Final Expenditure Report and Request for Reimbursement in each federal fiscal year (due July 1, 2024). Invoices must include supporting documentation such as timecards for staff time and copies of invoices paid for goods and services.</p>

**Budget July 1, 2023 – June 30, 2024**

<i>Cannabis</i>	<i>Cost</i>	<i>Description</i>
Staff Salary	\$18,304	11 hours per week
Benefits	\$4,576	
Indirect	\$6,635	Rate 29 %
Goods & Services	\$1,000	Materials necessary and approved for programing
Mini Grants	\$11,235	Mini Grants to Community Members
Mileage	\$250	Any travel to and from implementation sites
Travel/Training		
<b>Total Jefferson</b>	<b>\$42,000</b>	

<i>Tobacco</i>	<i>Cost</i>	<i>Description</i>
Staff Salary	\$16,640	10 hours per week
Benefits	\$4,160	
Indirect	\$6,032	Rate 29 %
Mini Grants	\$10,000	Mini Grants to Community Members
Mileage	\$100	Any travel to and from implementation sites
Goods & Services	\$3,068	Materials necessary and approved for programing
<b>Total Jefferson</b>	<b>\$40,000</b>	

**Funding Source**

<b>Chart of Accounts Program Name or Title</b>	<b>AL#</b>	<b>BARS Code</b>	<b>7/1/23 – 6/30/24</b>
SFY24 Dedicated Cannabis Account (MJ)	n/a	334.04.93	\$42,000
SFY24 Tobacco Prevention Proviso	n/a	334.04.93	\$40,000
<b>Total to Jefferson</b>			<b>\$82,000</b>

**Subrecipient DUNS Number: 184826790**

**Subrecipient Indirect Rate: 29%**

**Research and Development: No**

**AMENDMENT TO AGREEMENT 2263**

This Amendment (“Amendment”) to Kitsap Public Health District Contract for Youth Cannabis & Commercial Tobacco Prevention Program (the “Contract”), is entered into between the Kitsap County Human Services (“Contractor”) and the Kitsap Public Health District (“District”).

**RECITALS**

**WHEREAS**, the Parties entered into the Contract effective July 1, 2022; and

**WHEREAS**, Washington State Department of Health has extended the contract by one year, and thus, has made changes to the statement of work, and the parties have agreed it is desirable to adjust funding; and

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

- I. **Amendment of Contract Section 1. Period of Performance.** The date of the contract will be extended to June 30, 2024.
- II. **Amendment of Contract Section 4. Statement of Work and Budget.** Subcontractor shall furnish the necessary personnel, equipment material, and / or services and otherwise do all things necessary for or incidental to the performance of the work set forth in ATTACHEMENT A-1, attached hereto and incorporated herein. ATTACHMENT A of the initial contract remains unchanged.
- III. **Amendment of Contract Section 5. Compensation.** \$26,000 dollars will be added to the total budget for Kitsap County during this agreement for a total compensation of \$52,129.
- IV. **Other Provisions Unchanged.** The other provisions of the Contract remain unchanged.
- V. **Effective Date.** This Amendment is effective July 1, 2023.
- VI. **Authorization.** Each party signing below warrants to the other party that they have the full power and authority to execute this Amendment on behalf of the party for whom they sign.

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

[SIGNATURES FOLLOW ON THE NEXT PAGE]

Dated this \_\_\_\_ day of \_\_\_\_\_, 2023.

**KITSAP PUBLIC  
HEALTH DISTRICT**

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

Dated this \_\_\_\_ day of \_\_\_\_\_, 2023.

**KITSAP COUNTY BOARD OF  
COMMISSIONERS**

\_\_\_\_\_  
**CHARLOTTE GARRIDO, Chair**

\_\_\_\_\_  
**VACANT, Commissioner**

\_\_\_\_\_  
**KATHERINE T. WALTERS, Commissioner**

**ATTEST:**

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

**ATTACHMENT A-1 – SCOPE OF WORK AND BUDGET**  
**Kitsap County Human Services**  
**July 1, 2023 – June 30, 2024**

As a subrecipient of KPHD under the Washington Department of Health funded *Youth Cannabis & Commercial Tobacco Prevention Program (YCCTPP)*, Kitsap County Human Services agrees to the following activities funded in full or part by the associated budget.

<b>Activity</b>	
<b>Planning &amp; Coordination of Regional Network</b>	<p>Coordinate and maintain the Olympic Prevention Partnership steering committee and network.</p> <ul style="list-style-type: none"> <li>• Invite new community partners to join the Olympic Prevention Partnership Steering Committee.</li> <li>• Attend four Regional Networking meetings (July 2023 – June 2024)</li> <li>• Each subcontractor will be responsible for planning one of the above meetings. Refer to the workplan for schedule.</li> </ul>
<b>Implementation</b>	<p><i>2023-2024 Strategies for Youth Cannabis &amp; Commercial Tobacco Prevention:</i></p> <ul style="list-style-type: none"> <li>• <b>Social Norms: Media &amp; Health Communications</b></li> <li>• <b>Youth Empowerment &amp; Engagement</b></li> <li>• <b>Decision-maker Engagement</b></li> <li>• <b>Policy, System, Environmental Changes</b></li> </ul> <p>Specific Kitsap County activities are described in the 2023-2024 YCCTPP workplan. Please refer to the workplan for guidance on which activities fall under each funding source. Workplans are subject to change. Any changes will be approved by both parties.</p>
<b>Monitoring and Reporting</b>	<p>Monitor progress for each activity as appropriate; submit monthly narrative and data reports as requested by KPHD on the 5<sup>th</sup> of every month.</p>
<b>Midterm Evaluation</b>	<p>By February 1, 2024, report progress to CTPP Regional Coordinator. If needed, adjust activities to ensure spend down. Conduct a mid-year workplan re-evaluation.</p>
<b>Calls/Meetings</b>	<p>Participate in monthly conference call with KPHD and attend webinars as scheduled; respond to correspondences related to CTPP from the Department of Health; respond to activity assessments/surveys administered by KPHD as appropriate per scope of work.</p>
<b>Invoicing</b>	<p>Submit monthly invoices by the 20<sup>th</sup> of the month following the month in which costs were incurred, except for the Final Expenditure Report and Request for Reimbursement in each federal fiscal year (due July 1, 2024). Invoices must include supporting documentation such as timecards for staff time and copies of invoices paid for goods and services.</p>

**Budget July 1, 2023 – June 30, 2024**

<i>Cannabis</i>	<i>Cost</i>	<i>Description</i>
Staff Salary	\$11,000	
Benefits	\$3,400	
Indirect	\$1,600	
Goods & Services		
Mileage		
Travel/Training		
<b>Total Kitsap</b>	<b>\$16,000</b>	

<i>Tobacco</i>	<i>Cost</i>	<i>Description</i>
Staff Salary	\$8,000	
Benefits	\$1,000	
Indirect	\$1,000	
Goods & Services		
Mileage		
Travel/Training		
<b>Total Kitsap</b>	<b>\$10,000</b>	

**Funding Source**

<b>Chart of Accounts Program Name or Title</b>	<b>AL#</b>	<b>BARS Code</b>	<b>7/1/23 – 6/30/24</b>
SFY24 Dedicated Cannabis Account (MJ)	n/a	334.04.93	\$16,000
SFY24 Youth Tobacco Vapor Products (YTVP)	n/a	334.04.93	\$10,000
<b>Total to Kitsap</b>			<b>\$26,000</b>

**Subrecipient DUNS Number: 184826790**  
**Subrecipient Indirect Rate: 10%**  
**Research and Development: No**

**INTERLOCAL AGREEMENT  
Agreement No. 20230497**

between

**OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION**

600 Washington Street SE  
PO Box 47200  
Olympia, WA 98504-7200

and

**KITSAP PUBLIC HEALTH DISTRICT**

345 6<sup>th</sup> Street, Suite 300  
Bremerton, WA 98337

Federal Identification #42-1689063  
Unified Business Identifier #601-139-034

**THIS AGREEMENT** is made and entered into by and between the Kitsap Public Health District, hereinafter referred to as "Health District," and the Office of Superintendent of Public Instruction, hereinafter referred to as "OSPI."

**PURPOSE OF THIS AGREEMENT**

This Agreement is necessary for the successful implementation and operation of health and sanitation evaluations of food service management companies (vendors), sponsor food preparation facilities, and feeding sites operating under the U.S. Department of Agriculture (USDA) Summer Food Service Program (SFSP) during the summer of 2023 as required by 7 CFR Part 225 as a condition to the allocation and expenditure of USDA SFSP funding.

**THEREFORE, IT IS MUTUALLY AGREED THAT:**

**STATEMENT OF WORK**

Kitsap Public Health District shall furnish the necessary personnel, equipment, material and/or services and otherwise do all things necessary for or incidental to the performance of the work set forth below:

This Agreement is necessary for the successful implementation and operation of health and sanitation evaluations of food service management companies (vendors), sponsor food preparation facilities, and feeding sites operating under the U.S. Department of Agriculture (USDA) Summer Food Service Program (SFSP) during the summer of 2023 as required by 7 CFR Part 225 as a condition to the allocation and expenditure of USDA SFSP funding.

In accordance with the applicable local Health District, rules and regulations, the Health District agrees to perform periodic health and sanitation evaluations, as determined by the Health District in said Health District's jurisdiction. This shall include forty (40) health inspections.

Entities participating in the Summer Food Service Program will contact the Health District, if they intend to operate the program this year. OSPI will provide the Kitsap Public Health District with a list of approved sponsors no later than July 3, 2023. The Health District shall contact the sponsor(s) for

feeding site and preparation locations prior to inspection. OSPI will report to the Kitsap Public Health District any health-related problems discovered on routine visits conducted by site monitors for Kitsap Public Health District follow-up, if necessary. The Health District shall submit copies of the inspection(s) to both the sponsor and OSPI along with the invoice to OSPI by September 30, 2023.

## **PERIOD OF PERFORMANCE**

Subject to its other provisions, the period of performance of this Agreement shall commence on the date of execution, and be completed on September 30, 2023, unless terminated sooner as provided herein.

## **PAYMENT**

Compensation for the work provided in accordance with this Agreement has been established under the terms of RCW 39.34. The parties have determined that the cost of accomplishing the work herein will not exceed a total of six thousand six hundred dollars (\$6,600). Payment for satisfactory performance of the work shall not exceed this amount unless the parties mutually agree to a higher amount.

- Forty (40) health inspections at a rate of one hundred sixty-five dollars (\$165) per inspection/evaluation.

Funds for the payment of this Contract are provided by federal program Summer Food Service Program (SFSP), Catalog of Federal Domestic Assistance, CFDA #10.559.

## **BILLING PROCEDURE**

Kitsap Public Health District shall submit invoices to the OSPI Contract Manager, Megan Harlan, no later than September 30, 2023, for those inspections/evaluations actually performed for the SFSP. Invoices received after September 30, 2023, WILL NOT BE PAID. The invoice shall include the Agreement number and document to the Contract Manager's satisfaction a description of the work performed, and payment requested. Within approximately thirty (30) calendar days of the Contract Manager receiving and approving the invoice, payment will be mailed or electronically transferred to Health District by Agency Financial Services, OSPI. Upon expiration of the Agreement, any claim for payment not already made shall be submitted within thirty (30) days after the expiration date or the end of the fiscal year, whichever is earlier.

If errors are found in the submitted invoice or supporting documents, the Contract Manager will notify Health District. In order to receive payment, it shall be the responsibility of Health District to make corrections in a timely manner, resubmit the invoice and/or supporting documentation as requested, and notify the Contract Manager.

## **AGREEMENT ALTERATIONS AND AMENDMENTS**

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

## **ASSIGNMENT**

The work to be provided under this Agreement, and any claim arising thereunder, is not assignable or delegable by either party in whole or in part, without the express prior written consent of the other party, which consent shall not be unreasonably withheld.



**CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND INELIGIBILITY**

Health District certifies that neither it nor its principals are debarred, suspended, proposed for debarment, or voluntarily excluded from participation in transactions by any federal department or agency. The Health District further certifies that they will ensure that potential subcontractors or subrecipients or any of their principals are not debarred, suspended, proposed for debarment, or voluntarily excluded from participation in covered transactions by any federal department or agency. Health District may do so by obtaining a certification statement from the potential subcontractor or subrecipient or by checking the “List of Parties Excluded from Federal Procurement and Non-Procurement Programs” provided on-line by the General Services Administration, and Washington State vendor debarment list.

**CONTRACT MANAGEMENT**

The following shall be the contact person for all communications and billings regarding the performance of this contract. Any changes to this information shall be communicated to the other party in writing as soon as reasonably possible.

<b>Kitsap Public Health District</b>	<b>OSPI</b>
Dayna Katula Contract Manager  345 6 <sup>th</sup> Street, Suite 300 Bremerton, WA 98337  Phone: 360-728-2301 Email: dayna.katula@kitsappublichealth.org	Megan Harlan Summer Food Service Programs & Special Projects Lead 600 Washington Street SE PO Box 47200 Olympia, WA 98504-7200 Phone: 360-764-6040 Email: Megan.Harlan@k12.wa.us

**CREATIVE COMMONS ATTRIBUTION LICENSE**

Kitsap Public Health District understands that, except where otherwise agreed to in writing or approved by OSPI or the Contract Manager, all original works of authorship produced under this Agreement shall carry a [Creative Commons Attribution License](#), version 4.0 or later.

All Materials Health District has adapted from others’ existing openly licensed resources must be licensed with the least restrictive open license possible that is not in conflict with existing licenses.

For Materials that are delivered under this Agreement, but that incorporate pre-existing materials not produced under this Agreement, Health District will license the materials to allow others to translate, reproduce, distribute, prepare derivative works, publicly perform, and publicly display. If Health District would like to limit these pre-existing portions of the work to [non-commercial use](#), the [Creative Commons Attribution-NonCommercial-ShareAlike](#) license, version 4.0 or later, is acceptable for these specific sections.

Kitsap Public Health District warrants and represents that Health District has all rights and permissions, including intellectual property rights, moral rights and rights of publicity, necessary to apply such a license.

## **DISPUTES**

In the event that a dispute arises under this Agreement, it shall be determined by a Dispute Board in the following manner: Each party to this Agreement shall appoint one member to the Dispute Board. The members so appointed shall jointly appoint an additional member to the Dispute Board. The Dispute Board shall review the facts, contract terms and applicable statutes and rules and make a determination of the dispute. The determination of the Dispute Board shall be final and binding on the parties hereto.

## **GOVERNANCE**

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

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

- Applicable state and federal statutes and rules
- Attachment A – Intent to Participate
- Attachment B – Federal Grant Terms and Conditions
- Any other provisions of the Agreement, including materials incorporated by reference.

## **INDEPENDENT CAPACITY**

The employees or agents of each party who are engaged in the performance of this Agreement shall continue to be employees or agents of that party and shall not be considered for any purpose to be employees or agents of the other party.

## **RECORDS MAINTENANCE**

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

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

## **RESPONSIBILITIES OF THE PARTIES**

Each party to this Agreement hereby assumes responsibility for claims and/or damages to persons and/or property resulting from any act or omission on the part of itself, its employees, its officers, and its agents. Neither party assumes any responsibility to the other party for the consequences of any claim, act or omission of any person, agency, firm, or corporation not a party to this Agreement.

## **RIGHTS IN DATA**

Copyright in all material created by Health District and paid for by OSPI as part of this Agreement shall be the property of the State of Washington. Both OSPI and Health District may use these materials, and permit others to use them, for any purpose consistent with their respective missions as agencies of the State of Washington. This material includes, but is not limited to: books, computer programs, documents, films, pamphlets, reports, sound reproductions, studies, surveys, tapes, and/or training materials. Material which Health District provides and uses to perform this Agreement but which is not created for or paid for by OSPI shall be owned by Health District or such other party as determined by Copyright Law and/or Health District's internal policies; however, for any such materials, Health District hereby grants (or, if necessary and to the extent reasonably possible, shall obtain and grant) a perpetual, unrestricted, royalty free, non-exclusive license to OSPI to use the material for OSPI internal purposes.

## **SEVERABILITY**

If any provision of this Agreement or any provision of any document incorporated by reference shall be held invalid, such invalidity shall not affect the other provisions of this Agreement which can be given effect without the invalid provision, if such remainder conforms to the requirements of applicable law and the fundamental purpose of this Agreement, and to this end the provisions of this Agreement are declared to be severable.

## **SUBCONTRACTING**

Neither Kitsap Public Health District nor any subcontractor shall enter into subcontracts for any of the work contemplated under this Contract without obtaining prior written approval of OSPI. Health District is responsible to ensure that all terms, conditions, assurances, and certifications set forth in this Agreement are included in any and all subcontracts. In no event shall the existence of the subcontract operate to release or reduce liability of Health District to OSPI for any breach in the performance of Health District duties. This clause does not include contracts of employment between Health District and personnel assigned to work under this Agreement.

If, at any time during the progress of the work, OSPI determines in its sole judgment that any subcontractor is incompetent, OSPI shall notify Health District, and Health District shall take immediate steps to terminate the subcontractor's involvement in the work. The rejection or approval by OSPI of any subcontractor or the termination of a subcontractor shall not relieve Health District of any of its responsibilities under the Agreement, nor be the basis for additional charges to OSPI.

## **TERMINATION**

Either party may terminate this Agreement upon thirty (30) calendar days' prior written notification to the other party. If this Agreement is so terminated, the parties shall be liable only for performance rendered or costs incurred in accordance with the terms of this Agreement prior to the effective date of termination.

## **TERMINATION DUE TO FUNDING LIMITATIONS OR CONTRACT RENEGOTIATION, SUSPENSION**

In the event funding from state, federal, or other sources is withdrawn, reduced, or limited in any way after the effective date of this Agreement and prior to normal completion of this Agreement, with the notice specified below and without liability for damages:

- a. At OSPI's discretion, OSPI may give written notice of intent to renegotiate the Agreement under the revised funding conditions.
- b. At OSPI's discretion, OSPI may give written notice to Kitsap Public Health District to suspend performance when OSPI determines there is reasonable likelihood that the funding insufficiency may be resolved in a timeframe that would allow Health District's performance to be resumed.
  - 1) During the period of suspension of performance, each party will inform the other of any conditions that may reasonably affect the potential for resumption of performance.
  - 2) When OSPI determines that the funding insufficiency is resolved, it will give Health District written notice to resume performance, and Health District shall resume performance.
  - 3) Upon the receipt of notice under b. (2), if Health District is unable to resume performance of this Agreement or if Health District's proposed resumption date is not acceptable to OSPI and an acceptable date cannot be negotiated, OSPI may terminate the Agreement by giving written notice to Health District. The parties agree that the Agreement will be terminated retroactive to the date of the notice of suspension. OSPI shall be liable only for payment in accordance with the terms of this Agreement for services rendered prior to the retroactive date of termination.
- c. OSPI may immediately terminate this Agreement by providing written notice to Kitsap Public Health District. The termination shall be effective on the date specified in the termination notice. OSPI shall be liable only for payment in accordance with the terms of this Agreement for services rendered prior to the effective date of termination. No penalty shall accrue to OSPI in the event the termination option in this section is exercised.
- d. For purposes of this section, "written notice" may include email.

## **TERMINATION FOR CAUSE**

If for any cause, either party does not fulfill in a timely and proper manner its obligations under this Agreement, or if either party violates any of these terms and conditions, the aggrieved party will give the other party written notice of such failure or violation. The responsible party will be given the opportunity to correct the violation or failure within fifteen (15) working days. If failure or violation is not corrected, this Agreement may be terminated immediately by written notice of the aggrieved party to the other.

## TERMINATION PROCEDURE

Upon termination of this Agreement, OSPI, in addition to other rights provided in this Agreement, may require Health District to deliver to OSPI any property specifically produced or acquired for the performance of such part of this Agreement as has been terminated.

OSPI shall pay to Health District the agreed upon price, if separately stated, for completed work and services accepted by OSPI and the amount agreed upon by Health District and OSPI for (a) completed work and services for which no separate price is stated, (b) partially completed work and services, (c) other property or services which are accepted by OSPI, and (d) the protection and preservation of the property, unless the termination is for cause, in which case OSPI shall determine the extent of the liability. Failure to agree with such determination shall be a dispute within the meaning of the "Disputes" clause for this Agreement. OSPI may withhold from any amounts due to Health District such sum as OSPI determines to be necessary to protect OSPI against potential loss or liability.

The rights and remedies of OSPI provided in this section shall not be exclusive and are in addition to any other rights and remedies provided by law under this Agreement.

After receipt of a notice of termination, and except as otherwise directed by OSPI, Kitsap Public Health District shall:

- a. Stop work under this Agreement on the date and to the extent specified, in the notice;
- b. Place no further orders or subcontractors for materials, services, or facilities except as may be necessary for completion of such portion of the work under the Agreement that is not terminated;
- c. Assign to OSPI, in the manner, at the times, and to the extent directed by OSPI, all rights, title, and interest of Health District under the orders and subcontracts in which case OSPI has the right, at its discretion, to settle or pay any or all claims arising out of the termination of such orders and subcontracts;
- d. Settle all outstanding liabilities and all claims arising out of such termination of orders and subcontracts, with the approval or ratification of OSPI to the extent OSPI may require, which approval or ratification shall be final for all the purposes of this clause;
- e. Transfer title to OSPI and deliver, in the manner, at the times and to the extent as directed by OSPI, any property which, if the Agreement had been completed, would have been required to be furnished to OSPI;
- f. Complete performance of such part of the work not terminated by OSPI; and
- g. Take such action as may be necessary, or as OSPI may direct, for the protection and preservation of the property related to this Agreement which, in is in the possession of Health District and in which OSPI has or may acquire an interest.

**WAIVER**

A failure by either party to exercise its rights under this Agreement shall not preclude that party from subsequent exercise of such rights and shall not constitute a waiver of any other rights under this Agreement unless stated to be such in a writing signed by an authorized representative of the party and attached to the original Agreement.

**ALL WRITINGS CONTAINED HEREIN**

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

**IN WITNESS WHEREOF, the parties have executed this Agreement.**

Kitsap Public Health District

Superintendent of Public Instruction  
State of Washington

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Kyla L. Moore, Contracts Administrator

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Who certifies that he/she is the Contractor identified herein, OR a person duly qualified and authorized to bind the Contractor so identified to the foregoing Agreement.

Approved as to FORM ONLY  
by the Assistant Attorney General

### Local Health Jurisdiction Intent to Contract

Organization Name: Kitsap Public Health District  
 Mailing Address: 345 6th Street, Ste. 300 Bremerton, WA 98337  
 Contact Name: Dagna Katula  
 Telephone No.: 360-728-2301 Fax No.: \_\_\_\_\_  
 Email Address: dagna.katula@kitsapublichealth.org Federal ID No: 42-1609063  
(required) (required)

We anticipate being able to conduct the following number of health inspections at the following rate:

Number of Inspections	Cost per Inspection	Total Cost of Inspections
77	\$ 165.00	\$ 12,705.00

- We will conduct health inspections at no charge to OSPI.
- We will not be able to conduct health inspections this summer.

Reason: \_\_\_\_\_

Please submit the Intent to Contract to OSPI Child Nutrition Services no later than **March 31, 2023**, via e-mail, or mail. Email is preferred as most OSPI employees continue to telework.

**Email (Preferred Method):**

[Megan.Harlan@k12.wa.us](mailto:Megan.Harlan@k12.wa.us)

**Mail:**

OSPI, Child Nutrition Services  
 P.O. Box 47200  
 Olympia, WA 98504-7200

## **Attachment B Federal Grant Terms and Conditions**

### **PROHIBITION OF TEXT MESSAGING AND EMAILING WHILE DRIVING DURING OFFICIAL FEDERAL GRANT BUSINESS**

Federal grant recipients, sub recipients and their grant personnel are prohibited from text messaging while driving a government owned vehicle, or while driving their own privately owned vehicle during official grant business, or from using government supplied electronic equipment to text message or email when driving.

Recipients must comply with these conditions under Executive Order 13513, "Federal Leadership on Reducing Text Messaging While Driving," October 1, 2009.

### **MEMORANDUM to ED GRANTEES REGARDING THE USE OF GRANT FUNDS FOR CONFERENCES AND MEETINGS**

You are receiving this memorandum to remind you that grantees must take into account the following factors when considering the use of grant funds for conferences and meetings:

- Before deciding to use grant funds to attend or host a meeting or conference, a grantee should:
  - Ensure that attending or hosting a conference or meeting is consistent with its approved application and is reasonable and necessary to achieve the goals and objectives of the grant;
  - Ensure that the primary purpose of the meeting or conference is to disseminate technical information, (e.g., provide information on specific programmatic requirements, best practices in a particular field, or theoretical, empirical, or methodological advances made in a particular field; conduct training or professional development; plan/coordinate the work being done under the grant); and
  - Consider whether there are more effective or efficient alternatives that can accomplish the desired results at a lower cost, for example, using webinars or video conferencing.
- Grantees must follow all applicable statutory and regulatory requirements in determining whether costs are reasonable and necessary, especially the Cost Principles for Federal grants set out at 2 CFR Part 200 Subpart E of the, "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards." In particular, remember that:
  - Federal grant funds cannot be used to pay for alcoholic beverages; and
  - Federal grant funds cannot be used to pay for entertainment, which includes costs for amusement, diversion, and social activities.
- Grant funds may be used to pay for the costs of attending a conference. Specifically, Federal grant funds may be used to pay for conference fees and travel expenses (transportation, per diem, and lodging) of grantee employees, consultants, or experts to attend a conference or meeting if those expenses are reasonable and necessary to achieve the purposes of the grant.
  - When planning to use grant funds for attending a meeting or conference, grantees should consider how many people should attend the meeting or



conference on their behalf. The number of attendees should be reasonable and necessary to accomplish the goals and objectives of the grant.

- A grantee hosting a meeting or conference may not use grant funds to pay for food for conference attendees unless doing so is necessary to accomplish legitimate meeting or conference business.
  - A working lunch is an example of a cost for food that might be allowable under a Federal grant if attendance at the lunch is needed to ensure the full participation by conference attendees in essential discussions and speeches concerning the purpose of the conference and to achieve the goals and objectives of the project.
- A meeting or conference hosted by a grantee and charged to a Department grant must not be promoted as a U.S. Department of Education conference. This means that the seal of the U.S. Department of Education must not be used on conference materials or signage without Department approval.
  - All meeting or conference materials paid for with grant funds must include appropriate disclaimers, such as the following:  
The contents of this (insert type of publication; e.g., book, report, film) were developed under a grant from the Department of Education. However, those contents do not necessarily represent the policy of the Department of Education, and you should not assume endorsement by the Federal Government.
- Grantees are strongly encouraged to contact their project officer with any questions or concerns about whether using grant funds for a meeting or conference is allowable prior to committing grant funds for such purposes.
  - A short conversation could help avoid a costly and embarrassing mistake.
- Grantees are responsible for the proper use of their grant awards and may have to repay funds to the Department if they violate the rules on the use of grant funds, including the rules for meeting and conference-related expenses.



## CONTRACT INTAKE FORM

All potential consultants/entities seeking a Contract, Agreement, Memorandum of Understanding, etc., with the Office of Superintendent of Public Instruction (OSPI), State Board of Education, or Professional Educator Standards Board, must complete and return this form before a Contract or Agreement will be offered.

<b>1. CONTRACTOR'S NAME (AS LEGALLY REGISTERED WITH THE IRS):</b> <sup>4</sup>		<b>CONTRACTOR'S DBA (DOING BUSINESS AS) NAME:</b>	
Kitsap Public Health District		Kitsap Public Health District	
<b>2. CONTRACTOR'S CONTACT INFORMATION:</b>			
<b>ADDRESS (NUMBER, STREET, AND APT/SUITE)</b> 345 6 <sup>th</sup> St., Ste. 300	<b>CITY</b> Bremerton	<b>STATE</b> WA	<b>ZIP CODE</b> 98337
<b>CONTRACT MANAGER NAME</b> <sup>1</sup> Dayna Katula		<b>CONTRACT MANAGER'S EMAIL ADDRESS</b> dayna.katula@kitsappublichealth.org	
<b>CONTRACT MANAGER'S PHONE NUMBER</b> 360-728-2301			
<b>CONTRACTOR'S SIGNATORY (IF DIFFERENT THAN CONTRACT MANAGER):</b> <sup>2</sup>			
<b>NAME</b> Keith Grellner		<b>EMAIL ADDRESS</b> keith.grellner@kitsappublichealth.org	
<b>ADDITIONAL INDIVIDUALS TO RECEIVE CONTRACT (IF DESIRED):</b> <sup>3</sup>			
<b>NAME(S)</b> April Fisk	<b>EMAIL ADDRESS(ES)</b> april.fisk@kitsappublichealth.org	<b>ACTION REQUIRED (Sign, initial, or courtesy copy)</b> Sign, courtesy copy	
<b>3. BUSINESS INFORMATION:</b>			
<b>TAXPAYER IDENTIFICATION (TIN) NUMBER</b> For individuals, this is your Social Security Number (SSN). For other entities (corporations, school districts, etc.), this is your <a href="#">Employer Identification Number</a> (EIN).  SSN: _____ <b>OR</b> EIN: <b>42-1689063</b>			
<b>STATEWIDE VENDOR (SWV) NUMBER</b> Contractors are <b>required</b> to register as a Statewide Vendor in order to receive payment from the State. Visit the <a href="#">Office of Financial Management</a> for information or to register. To find your existing SWV#, visit OFM's <a href="#">Statewide Vendor Number lookup</a> . SWV: <b>0027359-00</b>			
<b>How is your business organized?</b> Governmental Entity _____ If a Corporation, non-profit, attach a copy of 501(c) status.			
<b>Do you have a current Washington State business license?</b> <sup>4</sup> <input checked="" type="checkbox"/> Yes – Attach a copy or provide UBI#: <b>601139034</b> <input type="checkbox"/> No – Visit the <a href="#">Department of Revenue</a> to review licensing requirements.			
<b>Is your business a small, <a href="#">women-</a>, <a href="#">minority-</a>, or <a href="#">veteran-owned</a> business as defined in <a href="#">Chapter 39.26.010 RCW</a>?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, complete and submit the <a href="#">Business Enterprise Certification Form</a> with this form. If not, visit the sites linked above for information about registration.			

**Have you had any contract to provide services terminated for default?**  Yes  No

If yes, attach a list of each terminated contract with an explanation of the situation.

**4. WASHINGTON STATE EMPLOYMENT (ESDs, School Districts, and State Agencies check N/A):**

**Are you, or any of your business partners, directors, officers, managers, employees, or board members current or former (within the last 24 months) officers or employees of the State of Washington?**

Yes  No  N/A If yes:  Current or  Former

*District and ESD employees are not considered state employees for this purpose. As a reminder, check with your employer regarding their outside work policies.*

If you checked Yes, you may be required to seek guidance from the [Executive Ethics Board](#) before a contract is offered; you may be contacted for clarification about your current/former role.

**Are you, or any of your employees or subcontractors, a retiree who used the 2008 Early Retirement Factors (ERFs) to retire early and is under age 65?** This type of retiree, if under age 65, cannot work *in any capacity* for a DRS-covered employer and continue to receive a DRS benefit.

Yes  No

If you checked Yes, and are under age 65, you cannot work *in any capacity* for a DRS-covered employer and continue to receive a DRS benefit; you may be contacted for clarification about your answer and asked to complete additional documentation.

**5. I certify, under penalty of perjury as provided by the laws of the State of Washington, that all of the foregoing statements are true and correct, and that I will notify the Agency of any changes.**

**CONTRACTOR SIGNATURE**

*Keith Grellner*

**DATE**

3/17/2023

**PRINTED NAME**

Keith Grellner

**TITLE**

Administrator

<sup>1</sup> Contract Manager is the Contractor’s person responsible for all communications and billings regarding the performance of the proposed Contract/Agreement. Depending on your organization’s structure, this may or may not be the same person who will sign the Contract/Agreement. This is NOT the OSPI Contract Manager or contact person.

<sup>2</sup> If the person signing the Contract/Agreement on behalf of the Contractor is different than the Contract Manager, both individuals will receive notices via DocuSign.

<sup>3</sup> You may list additional individuals to sign the Contract/Agreement and/or receive a courtesy copy via DocuSign. If including additional signatories, list them in order they should be received.

<sup>4</sup> For assistance finding your organization’s legal name or UBI number, or if you would like more information about business license requirements, visit the [Department of Revenue](#).

# Agreement KC-228-23

KC-228-23  
0.CFDA#:  
N/A  
DUNS:169167202  
Zip: 98337-0976

\*All references to DSHS are hereby replaced with HCA

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

## I. Purpose

This Agreement is for the appropriation of \$22,610.00 for the purpose of augmenting state and federal funding of evidence-based substance abuse prevention programs and services for the time period of March 27, 2023– June 30, 2023.

## II. Project Description

This contract with Kitsap Public Health District provides \$22,610.00 of Washington State Health Care Authority (HCA) funds for the time period of March 27, 2023 – June 30, 2023.

Delivery of the evidence-based Nurse Family Partnership (NFP) to twelve (12) first-time, low-income moms and their babies by maintaining a 0.5 FTE Nurse Home Visitor. The NFP program is a nationally recognized, evidence-based nurse home visiting program implemented in 2012 through a public/private partnership. Highly trained registered nurses begin visiting early in pregnancy through the child's second birthday. The nurses provide education to promote health and helps build problem-solving skills that promote self-sufficiency and a positive life course.

This project has the goal of preventing mental illness, behavioral problems, and future addiction in young children by intervening with families who either have or are at risk for substance abuse and/or mental health problems. This contract will deliver an evidenced-based nurse home visiting program (Nurse Family Partnership) to twelve (12) first time, low-income moms and their babies.

## III. Project Activities

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

- Maintain 0.5 FTE Nurse Family Partnership (NFP) nurse home visitor.
- NFP staff will participate in ongoing training and education as required by NFP Nursing Services Organization.
- NFP supervisor will participate in ongoing training, education, and consultation as required to support quality, fidelity, and specific population needs.
- This contract will serve twelve (12) families.

- Maintain outreach and referral plan to reach target population and maintain caseload.
- Provide Home Visits for first time, low-income pregnant women, mothers and infants.
- New clients will be enrolled before twenty-eight (28) weeks of pregnancy and receive visits according to NFP guidelines.
- Content and frequency of home visits will be aligned with NFP guidelines.
- Staff who provide home visits will receive individual reflective supervision.
- All staff will participate in reflective case conferences.
- Supervisors and nurse home visitors will review and utilize their data.
- Data will be used for quality and fidelity monitoring and improvement.

#### **IV. Project Design**

This project focuses on serving low-income, first-time moms and continues the Kitsap Nurse Family Partnership (NFP) program to serve twelve (12) families by maintaining a 0.5 FTE nurse home visitor. The NFP assesses for evidence of substance use disorders (SUDs), mental illness, and Adverse Childhood Experiences (ACEs). The NFP program is a nationally recognized, evidence-based nurse home visiting program implemented in 2012 through a public/private partnership. This tier will assist low-income, first time mothers to have healthy birth outcomes and become successful parents. Highly trained registered nurses begin visiting early in pregnancy through the child's second birthday. Nurses visit regularly to build trusting relationships that foster young women's abilities to reach goals and build healthy lifestyles for themselves and their children. The nurse provides education to promote health and helps build problem-solving skills that promote self-sufficiency and a positive life course.

#### **V. Project Outcomes and Measurements**

Measurable outcomes include, but are not limited to, early enrollment in pre-natal care, reduced perinatal substance use/abuse, regular screening for pre and postpartum depression, and referral for treatment.

Nurse Family Partnership moms will complete a pre and post-test that will reflect gains in parenting, problem-solving, and self-sufficiency skills.

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

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

**Objective #1:** Funded case load of twelve (12) mothers and infants will be maintained through June 30, 2023.

**Goal #2:** NFP Public Health Nurses and Community Health Worker maintain high fidelity to NFP evidence-based model.

**Objective #2:** By June 30, 2023, KPHD will maintain required high fidelity to NFP model, as required by the National Service Office.

**VI. Data Collection**

- 1) Participant information sheet and Pre-test delivered to the County within a week of the first meeting.
- 2) Community Health Workers record of meeting with participant to the County weekly.
- 3) Community Health Workers record of Nurse Support Meetings within a week of each meeting.
- 4) Post-test with Mother's name on them to the County by July 6, 2023

**VII. Billing and Payment**

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

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

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

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

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

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

**VIII. Duration**

This agreement is in effect from March 27, 2023 – June 30, 2023.

**IX. Amendments**

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

**X. Attachments**

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

- Attachment A: Special Terms and Conditions
- Attachment B: Budget
- Attachment C: Participant Information Form
- Attachment D: Pre/Post Test
- Attachment E: Certification Regarding Debarment, Suspension, and Other Responsibility Matters
- Attachment F: Certification Regarding Lobbying
- Attachment G: Substance Abuse and Mental Health Services Administration (SAMHSA) Award Terms 1.

This Agreement shall be effective March 27, 2023.

DATED this \_\_\_ day \_\_\_\_\_, 2023. DATED this \_\_\_ day \_\_\_\_\_, 2023.

**KITSAP PUBLIC HEALTH DISTRICT**

**KITSAP COUNTY BOARD OF COMMISSIONERS**

\_\_\_\_\_  
**KEITH GRELLNER**  
Administrator

\_\_\_\_\_  
**CHARLOTTE GARRIDO**, Chair

\_\_\_\_\_  
**KATIE WALTERS**, Commissioner

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

**ATTEST:**

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

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

## ATTACHMENT A: SPECIAL TERMS AND CONDITIONS

### Substance Abuse Prevention

#### SECTION 1. PROGRAM REQUIREMENTS

- 1.1 **Public Records.** All records required to be maintained by this contract or by state law shall be considered to be public records and maintained in accordance with applicable laws.
- 1.2 **Equal Opportunity Notices.**
  - A. Posting. The Contractor agrees to post in conspicuous places available to employees and applicants for employment, notices to be provided by the Department of Social and Health Services setting forth the provision of the Equal Opportunity Clause.
  - B. Collective Bargaining Agreements. The Contractor will send to each labor union or representative of workers with which he has a collective bargaining agreement or other contract or understanding a notice to be provided by the Department of Social and Health Services, advising the labor union or workers' representative of the Contractor's commitments under this Equal Opportunity Clause, and shall post notice in conspicuous places available to employees and applicants for employment.
  - C. Background Checks (RCW 43.43 & 28A.400.322, WAC 388-877 & 388-877B).  
The Contractor shall ensure a criminal background check is conducted for all staff members, case managers, outreach staff members, etc. or volunteers who have unsupervised access to children, adolescents, vulnerable adults, and persons who have developmental disabilities. When providing services to youth, the Contractor shall ensure that requirements of WAC 388-877-0500(1) are met.
- 1.3 **Non-discrimination Notices.** The Contractor will, in all solicitations or advertisements for employees placed by or on behalf of the Contractor, state that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, national origin, creed, marital status, age, Vietnam era or disabled veteran status, or the presence of any sensory, mental, or physical disability.



- 1.4 **Service to Ethnic Minorities.** The Contractor shall provide services designed and delivered in a manner sensitive to the needs of all diverse populations. The Contractor shall initiate actions to ensure or improve access, retention, and cultural relevance of prevention or other appropriate services for ethnic minorities and other diverse populations in need of prevention services.
- 1.5 **Continuing Education.** Ensure that continuing education is provided for employees of any entity providing prevention activities. (42 USC 300x-28(b) and 45 CFR 96.132(b)).
- 1.6. **Liability.** Within ten (10) business days, Business Associate must notify Kitsap County of any complaint, enforcement or compliance action initiated by the Office for Civil Rights based on an allegation of violation of the HIPPA Rules and must inform Kitsap County of the outcome of that action.
- 1.7 **Records.** All fiscal and clinical records pertaining to services delivered under the terms of this contract shall be maintained for a minimum of seven (7) years. The Contractor shall comply with all state and federal requirements regarding the confidentiality of client records including, but not limited to, the Federal Regulations for the Confidentiality of Alcohol and Drug Patient Records, 42 CFR Part 2.
- 1.8 **Termination.** Termination of a contract shall not be grounds for a fair hearing for the service applicant or a grievance for the recipient if similar services are immediately available in the County.
  - A. Service applications and recipients will be informed of their right to a grievance in the case of:
    - 1) Denial or termination of service.
    - 2) Failure to act upon a request for services with reasonable promptness.
    - 3) Audit requirements – OMB 2 CFR, Part 200, Subpart F (A-133) audit requirements if applicable to the subcontractor.
    - 4) Authorizing facility inspection.
    - 5) Conflict of interest.
    - 6) Debarment and suspension certificate.
    - 7) HIPAA business Associate Agreement and Compliance adherence as outlined in the contract.
    - 8) Indemnification.

- 9) Nondiscrimination in employment.
- 10) Nondiscrimination in prevention activities.
- 11) Performance Based Contracts.
- 12) Providing data.
- 13) Records and reports.
- 14) Requirements outlined in the Data Sharing provision in the Contract.
- 15) Services provided in accordance with law and rule and regulation.
- 16) Minerva data input and reconciliation.
- 17) Treatment of assets.
- 18) Unallowable use of federal funds.

1.8 **On-Site Monitoring.** Kitsap County will conduct a review which shall include at least one (1) on-site visit, annually, to each contractor site providing services to monitor fiscal and programmatic compliance with contract performance criteria for the purpose of documenting that the contractors are fulfilling the requirements of the contract.

## **SECTION 2. FISCAL REQUIREMENTS**

2.1 **Withhold Payment.** Failure of the Contractor to comply with terms of this contract shall give the County the right to withhold payment of any further funds under this contract.

2.2 **Reimbursement.** In the event that it is determined that any funds were disbursed under color of this contract, which violate the terms and conditions herein, such sums shall be reimbursed to the County upon written demand. Neither payment of any funds under color of this contract, nor any other action of the County or its agents or employees, prior to the discovery of the violation, shall constitute a waiver thereof.

2.3 **Distribution by County Treasurer.** In the event of dissolution of the private non-profit corporation or arm thereof named herein as Contractor for services, or termination of contractual agreement for any reason named herein, or elimination of program elements by the Board of County Commissioners, or transference of program elements, then in that event any monies and/or funds and fees generated by Contractor by virtue of the existence of the services outlined herein, shall, after all legal and accountable liabilities have been duly

satisfied, revert to the Kitsap County Treasurer for distribution by the Board of County Commissioners.

2.4 **Right to Hearing.** All notices shall be given in writing specifying the reasons for such demands, reimbursement, termination, or amendment of such other actions contemplated in this Contract and the Contractor shall have the right to a hearing within ten (10) days from such determination before the County Commissioners for determination of the action and prior to commencement of any civil litigation by the Contractor.

2.5 **Unallowable Costs.** Unless an explicit and specific federal waiver is obtained, the following costs are **not** allowable under any contract that includes federal funds:

- A. Cost of hospital inpatient services.
- B. Cash payments to departmental clients.
- C. Cost of purchase or permanent improvement of land or facilities, other than minor remodeling.
- D. Cost of purchase of major medical equipment with an acquisition cost in excess of \$5,000.00.
- E. Costs used as cost-sharing or matching for other federal funds requiring non-federal matching funds.
- F. Cost of financial assistance for any entity which is not either public or non-profit.
- G. Carry out any program of distributing sterile needles for the hypodermic injection of any illegal drug or distributing bleach for the purpose of cleansing needles for such hypodermic injection.
- H. Carry out any testing for the etiologic agent for acquired immune deficiency syndrome (AIDS), unless such testing is accompanied by appropriate pre-test counseling and appropriate post-test counseling.
- I. "EXCESS SALARY: The salary of an individual at a rate in excess of \$120,000 per year pursuant to Section 213 of P.L. 101.517."
- J. Any food expenses.

### **SECTION 3 CORRECTIVE ACTION PROCESS**

3.1. **Process.** If the Contract Administrator finds indications of potential non-compliance during the contract review or audit process or learns that the Contractor or its subcontractors are out of compliance with any of the terms or conditions of this Contract, the following process will be pursued:

- A. Informal Meeting. Informal process wherein the Regional Administrator alerts the appropriate Contractor's staff of the potential non-compliance and an agreeable solution is reached.

- B. Official Verbal Notification. If the informal meeting does not result in resolution, the County will contact the Contractor for the purpose of official verbal notification of possible non-compliance to establish a date when representatives of the County and the Contractor shall meet and discuss areas of contention and attempt to resolve the issues.
- C. Written Summary. Within five (5) working days of such verbal notification, the County will provide the Contractor representative a written summary of the areas of non-compliance or potential non-compliance by certified mail. Notice shall be sent to the individual identified in the General Agreement.
- D. Discussion. Within twenty (20) days of the date of the written notification, a discussion between County and Contractor staff shall be conducted to address areas of non-compliance or potential non-compliance.
- E. Withhold Payments. If the County and the Contractor cannot agree upon a resolution within ten (10) working days of the discussion described in the previous paragraph, the County shall withhold contract payments related to the area(s) of non-compliance or potential non-compliance, unless a written, time-limited extension of the period to agree upon corrective action is issued by the County.
- F. Audit. Nothing in this section shall preclude audits by other duly authorized Representatives of the County, Department of Social and Health Services or state government, nor shall it preclude the recoupment of overpayments identified through those audit procedures.

#### **SECTION 4. REPORTING REQUIREMENTS**

- 4.1 All reports shall be submitted to the Contract Administrator to request payment for contracted services delivered during the previous month.
- 4.2 **Monthly Reports**. The requests are to be submitted to the Contract Administrator to request payment for contracted services delivered during the previous month. All requests must contain the following information:
  - A. County contract number.
  - B. Total dollar amount of contract.
  - C. Total payments year-to-date.
  - D. Payment requested this month.
  - E. Balance outstanding after payment.
  - F. Name and mailing address of Contractor.
  - G. All requests must be signed by the director of the Contractor and must be on the County reimbursement form.

4.3 **Audit Requirements.** Independent Audits will be submitted annually to the Contract Administrator in the following manner:

The Contractor shall acquire a financial audit by an independent auditing firm to determine at a minimum the fiscal integrity of the financial transaction and reports of the Contractor. Copies of the audit and management letter shall be submitted to the Kitsap County Human Services Department within 9 months of the end of the Contractor's fiscal year.

The Contractor shall provide an independent audit of the entire organization which:

- A. In performed by an independent Certified Public Accountant, the Washington State Auditor's Office, or another entity, which the County and Contractor mutually agree will produce and audit which meets the requirements described in items B and C below.
- B. Provides statements consistent with the guidelines of AICPA SOP 78-10, Reporting for Other Non-Profit Organizations.
- C. Is performed in accordance with generally accepted auditing standards and with Federal Standards for Audit of Governmental Organizations, Programs, Activities and Functions, and meeting all requirements of OMB Circular A-133 as applicable for agencies receiving federal funding in the amount of \$750,000 or more during their fiscal year.
- D. The Contractor shall submit two (2) copies of the audit and the management letter directly to the County immediately upon completion. The audit must be accompanied by documentation indicating the Contractor's Board of Directors has reviewed the audit.

4.4 **Suspension, Debarment, and Lobbying.** The Contractor shall certify, on a separate form (Attachment E), that it is not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency. Also, the Contractor, on a separate form (Attachment F), will certify that it does not use Federal funds for lobbying purposes. Both forms are attached to this Contract.

4.5 **CFR §200.112 Conflict of interest.**

The Federal awarding agency must establish conflict of interest policies for Federal awards. The non-Federal entity must disclose in writing any potential conflict of interest to the Federal awarding agency or pass-through entity in accordance with applicable Federal awarding agency policy.

4.6 **Comply with Omnibus Crime Control and Safe Streets Act of 1968**

Comply with the Omnibus Crime Control and Safe Streets Act of 1968; Title VI of the Civil Rights Act of 1964; Section 504 of the Rehabilitation Act of 1973; Title II of the Americans with Disabilities Act of 1990; Title IX of the Education Amendments of 1972; The Age Discrimination Act of 1975; and The Department of Justice Non-Discrimination Regulations at 28 CFR Part 42, Subparts C,D,E, and G, and 28 CFR Parts 35 and 39. (go to [www.oip.usdoj.gov/ocr/](http://www.oip.usdoj.gov/ocr/).)

4.7 **HIPAA Compliance**

## HIPAA Compliance

Preamble: This section of the Contract is the Business Associate Agreement as required by HIPAA.

### 14. Definitions.

- a. "Business Associate," as used in this Contract, means the "Contractor" and generally has the same meaning as the term "business associate" at 45 CFR 160.103. Any reference to Business Associate in this Contract includes Business Associate's employees, agents, officers, Subcontractors, third party contractors, volunteers, or directors.
- b. "Business Associate Agreement" means this HIPAA Compliance section of the Contract and includes the Business Associate provisions required by the U.S. Department of Health and Human Services, Office for Civil Rights.
- c. "Breach" means the acquisition, access, use, or disclosure of Protected Health Information in a manner not permitted under the HIPAA Privacy Rule which compromises the security or privacy of the Protected Health Information, with the exclusions and exceptions listed in 45 CFR 164.402.
- d. "Covered Entity" means DSHS, a Covered Entity as defined at 45 CFR 160.103, in its conduct of covered functions by its health care components.
- e. "Designated Record Set" means a group of records maintained by or for a Covered Entity, that is: the medical and billing records about Individuals maintained by or for a covered health care provider; the enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for a health plan; or Used in whole or part by or for the Covered Entity to make decisions about Individuals.
- f. "Electronic Protected Health Information (EPHI)" means Protected Health Information that is transmitted by electronic media or maintained in any medium described in the definition of electronic media at 45 CFR 160.103.
- g. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996, Pub. L. 104-191, as modified by the American Recovery and Reinvestment Act of 2009 ("ARRA"), Sec. 13400 - 13424, H.R. 1 (2009) (HITECH Act).
- h. "HIPAA Rules" means the Privacy, Security, Breach Notification, and Enforcement Rules at 45 CFR Parts 160 and Part 164.
- i. "Individual(s)" means the person(s) who is the subject of PHI and includes a person who qualifies as a personal representative in accordance with 45 CFR 164.502(9).
- j. "Minimum Necessary" means the least amount of PHI necessary to accomplish the purpose for which the PHI is needed.
- k. "Protected Health Information (PHI)" means individually identifiable health information created, received, maintained or transmitted by Business Associate on behalf of a health care component of the Covered Entity that relates to the provision of health care to an Individual; the past, present, or future physical or mental health or condition of an Individual; or the past, present, or future payment for provision of health care to an Individual. 45 CFR 160.103. PHI includes demographic information that identifies the Individual or about which there is reasonable basis to believe can be used to identify the Individual. 45 CFR 160.103. PHI is information transmitted or held in any form or medium and includes EPHI. 45 CFR 160.103. PHI does not include education records covered by the Family Educational Rights and Privacy Act, as amended, 20 USCA 1232g(a)(4)(B)(iv) or

employment records held by a Covered Entity in its role as employer.

- l. "Security Incident" means the attempted or successful unauthorized access, use, disclosure, modification or destruction of information or interference with system operations in an information system.
  - m. "Subcontractor" as used in this HIPAA Compliance section of the Contract (in addition to its definition in the General Terms and Conditions) means a Business Associate that creates, receives, maintains, or transmits Protected Health Information on behalf of another Business Associate.
  - n. "Use" includes the sharing, employment, application, utilization, examination, or analysis, of PHI within an entity that maintains such information.
- 15. Compliance.** Business Associate shall perform all Contract duties, activities and tasks in compliance with HIPAA, the HIPAA Rules, and all attendant regulations as promulgated by the U.S. Department of Health and Human Services, Office of Civil Rights.
- 16. Use and Disclosure of PHI.** Business Associate is limited to the following permitted and required uses or disclosures of PHI:
- a. **Duty to Protect PHI.** Business Associate shall protect PHI from, and shall use appropriate safeguards, and comply with Subpart C of 45 CFR Part 164 (Security Standards for the Protection of Electronic Protected Health Information) with respect to EPHI, to prevent the unauthorized Use or disclosure of PHI other than as provided for in this Contract or as required by law, for as long as the PHI is within its possession and control, even after the termination or expiration of this Contract.
  - b. **Minimum Necessary Standard.** Business Associate shall apply the HIPAA Minimum Necessary standard to any Use or disclosure of PHI necessary to achieve the purposes of this Contract. See 45 CFR 164.514 (d)(2) through (d)(5).
  - c. **Disclosure as Part of the Provision of Services.** Business Associate shall only Use or disclose PHI as necessary to perform the services specified in this Contract or as required by law, and shall not Use or disclose such PHI in any manner that would violate Subpart E of 45 CFR Part 164 (Privacy of Individually Identifiable Health Information) if done by Covered Entity, except for the specific uses and disclosures set forth below.
  - d. **Use for Proper Management and Administration.** Business Associate may Use PHI for the proper management and administration of the Business Associate or to carry out the legal responsibilities of the Business Associate.
  - e. **Disclosure for Proper Management and Administration.** Business Associate may disclose PHI for the proper management and administration of Business Associate or to carry out the legal responsibilities of the Business Associate, provided the disclosures are required by law, or Business Associate obtains reasonable assurances from the person to whom the information is disclosed that the information will remain confidential and used or further disclosed only as required by law or for the purposes for which it was disclosed to the person, and the person notifies the Business Associate of any instances of which it is aware in which the confidentiality of the information has been Breached.
  - f. **Impermissible Use or Disclosure of PHI.** Business Associate shall report to DSHS in writing all Uses or disclosures of PHI not provided for by this Contract within one (1) business day of becoming aware of the unauthorized Use or disclosure of PHI, including Breaches of unsecured PHI as required at 45 CFR 164.410 (Notification by a Business Associate), as well as any Security Incident of which it becomes aware. Upon request by DSHS, Business Associate shall mitigate, to



the extent practicable, any harmful effect resulting from the impermissible Use or disclosure.

- g. Failure to Cure. If DSHS learns of a pattern or practice of the Business Associate that constitutes a violation of the Business Associate's obligations under the terms of this Contract and reasonable steps by DSHS do not end the violation, DSHS shall terminate this Contract, if feasible. In addition, If Business Associate learns of a pattern or practice of its Subcontractors that constitutes a violation of the Business Associate's obligations under the terms of their contract and reasonable steps by the Business Associate do not end the violation, Business Associate shall terminate the Subcontract, if feasible.
- h. Termination for Cause. Business Associate authorizes immediate termination of this Contract by DSHS, if DSHS determines that Business Associate has violated a material term of this Business Associate Agreement. DSHS may, at its sole option, offer Business Associate an opportunity to cure a violation of this Business Associate Agreement before exercising a termination for cause.
- i. Consent to Audit. Business Associate shall give reasonable access to PHI, its internal practices, records, books, documents, electronic data and/or all other business information received from, or created or received by Business Associate on behalf of DSHS, to the Secretary of DHHS and/or to DSHS for use in determining compliance with HIPAA privacy requirements.
- j. Obligations of Business Associate Upon Expiration or Termination. Upon expiration or termination of this Contract for any reason, with respect to PHI received from DSHS, or created, maintained, or received by Business Associate, or any Subcontractors, on behalf of DSHS, Business Associate shall:
  - (1) Retain only that PHI which is necessary for Business Associate to continue its proper management and administration or to carry out its legal responsibilities;
  - (2) Return to DSHS or destroy the remaining PHI that the Business Associate or any Subcontractors still maintain in any form;
  - (3) Continue to use appropriate safeguards and comply with Subpart C of 45 CFR Part 164 (Security Standards for the Protection of Electronic Protected Health Information) with respect to Electronic Protected Health Information to prevent Use or disclosure of the PHI, other than as provided for in this Section, for as long as Business Associate or any Subcontractors retain the PHI;
  - (4) Not Use or disclose the PHI retained by Business Associate or any Subcontractors other than for the purposes for which such PHI was retained and subject to the same conditions set out in the "Use and Disclosure of PHI" section of this Contract which applied prior to termination; and
  - (5) Return to DSHS or destroy the PHI retained by Business Associate, or any Subcontractors, when it is no longer needed by Business Associate for its proper management and administration or to carry out its legal responsibilities.
- k. Survival. The obligations of the Business Associate under this section shall survive the termination or expiration of this Contract.

**17. Individual Rights.**

- a. Accounting of Disclosures.
  - (1) Business Associate shall document all disclosures, except those disclosures that are exempt under 45 CFR 164.528, of PHI and information related to such disclosures.

- (2) Within ten (10) business days of a request from DSHS, Business Associate shall make available to DSHS the information in Business Associate's possession that is necessary for DSHS to respond in a timely manner to a request for an accounting of disclosures of PHI by the Business Associate. See 45 CFR 164.504(e)(2)(ii)(G) and 164.528(b)(1).
- (3) At the request of DSHS or in response to a request made directly to the Business Associate by an Individual, Business Associate shall respond, in a timely manner and in accordance with HIPAA and the HIPAA Rules, to requests by Individuals for an accounting of disclosures of PHI.
- (4) Business Associate record keeping procedures shall be sufficient to respond to a request for an accounting under this section for the six (6) years prior to the date on which the accounting was requested.

b. Access

- (1) Business Associate shall make available PHI that it holds that is part of a Designated Record Set when requested by DSHS or the Individual as necessary to satisfy DSHS's obligations under 45 CFR 164.524 (Access of Individuals to Protected Health Information).
- (2) When the request is made by the Individual to the Business Associate or if DSHS asks the Business Associate to respond to a request, the Business Associate shall comply with requirements in 45 CFR 164.524 (Access of Individuals to Protected Health Information) on form, time and manner of access. When the request is made by DSHS, the Business Associate shall provide the records to DSHS within ten (10) business days.

c. Amendment.

- (1) If DSHS amends, in whole or in part, a record or PHI contained in an Individual's Designated Record Set and DSHS has previously provided the PHI or record that is the subject of the amendment to Business Associate, then DSHS will inform Business Associate of the amendment pursuant to 45 CFR 164.526(c)(3) (Amendment of Protected Health Information).
- (2) Business Associate shall make any amendments to PHI in a Designated Record Set as directed by DSHS or as necessary to satisfy DSHS's obligations under 45 CFR 164.526 (Amendment of Protected Health Information).

**18. Subcontracts and other Third Party Agreements.** In accordance with 45 CFR 164.502(e)(1)(ii), 164.504(e)(1)(i), and 164.308(b)(2), Business Associate shall ensure that any agents, Subcontractors, independent contractors or other third parties that create, receive, maintain, or transmit PHI on Business Associate's behalf, enter into a written contract that contains the same terms, restrictions, requirements, and conditions as the HIPAA compliance provisions in this Contract with respect to such PHI. The same provisions must also be included in any contracts by a Business Associate's Subcontractor with its own business associates as required by 45 CFR 164.314(a)(2)(b) and 164.504(e)(5) .

**19. Obligations.** To the extent the Business Associate is to carry out one or more of DSHS's obligation(s) under Subpart E of 45 CFR Part 164 (Privacy of Individually Identifiable Health Information), Business Associate shall comply with all requirements that would apply to DSHS in the performance of such obligation(s).

**20. Liability.** Within ten (10) business days, Business Associate must notify DSHS of any complaint, enforcement or compliance action initiated by the Office for Civil Rights based on an allegation of violation of the HIPAA Rules and must inform DSHS of the outcome of that action. Business Associate bears all responsibility for any penalties, fines or sanctions imposed against the Business Associate for

violations of the HIPAA Rules and for any imposed against its Subcontractors or agents for which it is found liable.

**21. Breach Notification.**

- a. In the event of a Breach of unsecured PHI or disclosure that compromises the privacy or security of PHI obtained from DSHS or involving DSHS clients, Business Associate will take all measures required by state or federal law.
- b. Business Associate will notify DSHS within one (1) business day by telephone and in writing of any acquisition, access, Use or disclosure of PHI not allowed by the provisions of this Contract or not authorized by HIPAA Rules or required by law of which it becomes aware which potentially compromises the security or privacy of the Protected Health Information as defined in 45 CFR 164.402 (Definitions).
- c. Business Associate will notify the DSHS Contact shown on the cover page of this Contract within one (1) business day by telephone or e-mail of any potential Breach of security or privacy of PHI by the Business Associate or its Subcontractors or agents. Business Associate will follow telephone or e-mail notification with a faxed or other written explanation of the Breach, to include the following: date and time of the Breach, date Breach was discovered, location and nature of the PHI, type of Breach, origination and destination of PHI, Business Associate unit and personnel associated with the Breach, detailed description of the Breach, anticipated mitigation steps, and the name, address, telephone number, fax number, and e-mail of the individual who is responsible as the primary point of contact. Business Associate will address communications to the DSHS Contact. Business Associate will coordinate and cooperate with DSHS to provide a copy of its investigation and other information requested by DSHS, including advance copies of any notifications required for DSHS review before disseminating and verification of the dates notifications were sent.
- d. If DSHS determines that Business Associate or its Subcontractor(s) or agent(s) is responsible for a Breach of unsecured PHI:
  - (1) requiring notification of Individuals under 45 CFR § 164.404 (Notification to Individuals), Business Associate bears the responsibility and costs for notifying the affected Individuals and receiving and responding to those Individuals' questions or requests for additional information;
  - (2) requiring notification of the media under 45 CFR § 164.406 (Notification to the media), Business Associate bears the responsibility and costs for notifying the media and receiving and responding to media questions or requests for additional information;
  - (3) requiring notification of the U.S. Department of Health and Human Services Secretary under 45 CFR § 164.408 (Notification to the Secretary), Business Associate bears the responsibility and costs for notifying the Secretary and receiving and responding to the Secretary's questions or requests for additional information; and
  - (4) DSHS will take appropriate remedial measures up to termination of this Contract.

**22. Miscellaneous Provisions.**

- a. Regulatory References. A reference in this Contract to a section in the HIPAA Rules means the section as in effect or amended.
- b. Interpretation. Any ambiguity in this Contract shall be interpreted to permit compliance with the HIPAA Rules.

## Exhibit A - Data Security Requirements

1. **Definitions.** The words and phrases listed below, as used in this Exhibit, shall each have the following definitions:
  - a. "Authorized User(s)" means an individual or individuals with an authorized business requirement to access DSHS Confidential Information.
  - b. "Hardened Password" means a string of at least eight characters containing at least one alphabetic character, at least one number and at least one special character such as an asterisk, ampersand or exclamation point.
  - c. "Unique User ID" means a string of characters that identifies a specific user and which, in conjunction with a password, passphrase or other mechanism, authenticates a user to an information system.
2. **Data Transport.** When transporting DSHS Confidential Information electronically, including via email, the Data will be protected by:
  - a. Transporting the Data within the (State Governmental Network) SGN or Contractor's internal network, or;
  - b. Encrypting any Data that will be in transit outside the SGN or Contractor's internal network. This includes transit over the public Internet.
3. **Protection of Data.** The Contractor agrees to store Data on one or more of the following media and protect the Data as described:
  - a. **Hard disk drives.** Data stored on local workstation hard disks. Access to the Data will be restricted to Authorized User(s) by requiring logon to the local workstation using a Unique User ID and Hardened Password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards.
  - b. **Network server disks.** Data stored on hard disks mounted on network servers and made available through shared folders. Access to the Data will be restricted to Authorized Users through the use of access control lists which will grant access only after the Authorized User has authenticated to the network using a Unique User ID and Hardened Password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Data on disks mounted to such servers must be located in an area which is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism.

For DSHS Confidential Information stored on these disks, deleting unneeded Data is sufficient as long as the disks remain in a Secured Area and otherwise meet the requirements listed in the above paragraph. Destruction of the Data as outlined in Section 5. Data Disposition may be deferred until the disks are retired, replaced, or otherwise taken out of the Secured Area.
  - c. **Optical discs (CDs or DVDs) in local workstation optical disc drives.** Data provided by DSHS on optical discs which will be used in local workstation optical disc drives and which will not be transported out of a Secured Area. When not in use for the contracted purpose, such discs must be locked in a drawer, cabinet or other container to which only Authorized Users have the key, combination or mechanism required to access the contents of the container. Workstations which access DSHS Data on optical discs must be located in an area which is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism.

- d. **Optical discs (CDs or DVDs) in drives or jukeboxes attached to servers.** Data provided by DSHS on optical discs which will be attached to network servers and which will not be transported out of a Secured Area. Access to Data on these discs will be restricted to Authorized Users through the use of access control lists which will grant access only after the Authorized User has authenticated to the network using a Unique User ID and Hardened Password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Data on discs attached to such servers must be located in an area which is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism.
- e. **Paper documents.** Any paper records must be protected by storing the records in a Secured Area which is only accessible to authorized personnel. When not in use, such records must be stored in a locked container, such as a file cabinet, locking drawer, or safe, to which only authorized persons have access.
- f. **Remote Access.** Access to and use of the Data over the State Governmental Network (SGN) or Secure Access Washington (SAW) will be controlled by DSHS staff who will issue authentication credentials (e.g. a Unique User ID and Hardened Password) to Authorized Users on Contractor staff. Contractor will notify DSHS staff immediately whenever an Authorized User in possession of such credentials is terminated or otherwise leaves the employ of the Contractor, and whenever an Authorized User's duties change such that the Authorized User no longer requires access to perform work for this Contract.
- g. **Data storage on portable devices or media.**
  - (1) Except where otherwise specified herein, DSHS Data shall not be stored by the Contractor on portable devices or media unless specifically authorized within the terms and conditions of the Contract. If so authorized, the Data shall be given the following protections:
    - (a) Encrypt the Data with a key length of at least 128 bits
    - (b) Control access to devices with a Unique User ID and Hardened Password or stronger authentication method such as a physical token or biometrics.
    - (c) Manually lock devices whenever they are left unattended and set devices to lock automatically after a period of inactivity, if this feature is available. Maximum period of inactivity is 20 minutes.Physically Secure the portable device(s) and/or media by
    - (d) Keeping them in locked storage when not in use
    - (e) Using check-in/check-out procedures when they are shared, and
    - (f) Taking frequent inventories
  - (2) When being transported outside of a Secured Area, portable devices and media with DSHS Confidential Information must be under the physical control of Contractor staff with authorization to access the Data.
  - (3) Portable devices include, but are not limited to; smart phones, tablets, flash memory devices (e.g. USB flash drives, personal media players), portable hard disks, and laptop/notebook/netbook computers if those computers may be transported outside of a Secured Area.

- (4) Portable media includes, but is not limited to; optical media (e.g. CDs, DVDs), magnetic media (e.g. floppy disks, tape), or flash media (e.g. CompactFlash, SD, MMC).

**h. Data stored for backup purposes.**

- (1) DSHS data may be stored on portable media as part of a Contractor's existing, documented backup process for business continuity or disaster recovery purposes. Such storage is authorized until such time as that media would be reused during the course of normal backup operations. If backup media is retired while DSHS Confidential Information still exists upon it, such media will be destroyed at that time in accordance with the disposition requirements in Section 5. Data Disposition
- (2) DSHS Data may be stored on non-portable media (e.g. Storage Area Network drives, virtual media, etc.) as part of a Contractor's existing, documented backup process for business continuity or disaster recovery purposes. If so, such media will be protected as otherwise described in this exhibit. If this media is retired while DSHS Confidential Information still exists upon it, the data will be destroyed at that time in accordance with the disposition requirements in Section 5. Data Disposition.

**4. Data Segregation.**

- a. DSHS Data must be segregated or otherwise distinguishable from non-DSHS data. This is to ensure that when no longer needed by the Contractor, all DSHS Data can be identified for return or destruction. It also aids in determining whether DSHS Data has or may have been compromised in the event of a security breach. As such, one or more of the following methods will be used for data segregation.
- b. DSHS Data will be kept on media (e.g. hard disk, optical disc, tape, etc.) which will contain no non-DSHS data. And/or,
- c. DSHS Data will be stored in a logical container on electronic media, such as a partition or folder dedicated to DSHS Data. And/or,
- d. DSHS Data will be stored in a database which will contain no non-DSHS data. And/or,
- e. DSHS Data will be stored within a database and will be distinguishable from non-DSHS data by the value of a specific field or fields within database records.
- f. When stored as physical paper documents, DSHS Data will be physically segregated from non-DSHS data in a drawer, folder, or other container.
- g. When it is not feasible or practical to segregate DSHS Data from non-DSHS data, then both the DSHS Data and the non-DSHS data with which it is commingled must be protected as described in this exhibit.

- 5. Data Disposition.** When the contracted work has been completed or when no longer needed, except as noted in Section 3. Protection of Data b. Network Server Disks above, Data shall be returned to DSHS or destroyed. Media on which Data may be stored and associated acceptable methods of destruction are as follows:

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<b>Data stored on:</b>	<b>Will be destroyed by:</b>
------------------------	------------------------------

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Server or workstation hard disks, or  Removable media (e.g. floppies, USB flash drives, portable hard disks) excluding optical discs	Using a "wipe" utility which will overwrite the Data at least three (3) times using either random or single character data, or  Degaussing sufficiently to ensure that the Data cannot be reconstructed, or  Physically destroying the disk
Paper documents with sensitive or Confidential Information	Recycling through a contracted firm provided the contract with the recycler assures that the confidentiality of Data will be protected.
Paper documents containing Confidential Information requiring special handling (e.g. protected health information)	On-site shredding, pulping, or incineration
Optical discs (e.g. CDs or DVDs)	Incineration, shredding, or completely defacing the readable surface with a coarse abrasive
Magnetic tape	Degaussing, incinerating or crosscut shredding

- 6. Notification of Compromise or Potential Compromise.** The compromise or potential compromise of DSHS shared Data must be reported to the DSHS Contact designated in the Contract within one (1) business day of discovery. If no DSHS Contact is designated in the Contract, then the notification must be reported to the DSHS Privacy Officer at [dshsprivacyofficer@dshs.wa.gov](mailto:dshsprivacyofficer@dshs.wa.gov). Contractor must also take actions to mitigate the risk of loss and comply with any notification or other requirements imposed by law or DSHS.
- 7. Data shared with Subcontractors.** If DSHS Data provided under this Contract is to be shared with a subcontractor, the Contract with the subcontractor must include all of the data security provisions within this Contract and within any amendments, attachments, or exhibits within this Contract. If the Contractor cannot protect the Data as articulated within this Contract, then the contract with the subcontractor must be submitted to the DSHS Contact specified for this contract for review and approval.

**ATTACHMENT B: BUDGET SUMMARY**

<b>Kitsap Public Health District KC-228-23 3/27/23 – 6/30/23</b>					
<b>Expenditure Cost</b>	<b>Fund Source</b>	<b>Time Period</b>	<b>Previous Budget</b>	<b>Changes this Contract</b>	<b>Current Budget</b>
Nurse-Family Partnership Program Staff hours	WA State Dedicated Marijuana Funds	3/27/23-6/30/23	0		22,610.00
<b>Total</b>			<b>0.00</b>	<b>0.00</b>	<b>\$22,610.00</b>



# ATTACHMENT C: PARTICIPANT INFORMATION FORM

## Participant Information Form

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*For Official Use Only*

**Program Name:** \_\_\_\_\_

**Activity Log:** \_\_\_\_\_

**Date Collected:** \_\_\_\_\_

**General Participant Type:** (please choose one)\*  Individual  Mentor  Mentee

**1. Participant Status:** (please choose one)\*  Active  Inactive  Withdrawn  Completed

**Instructions:** Please fill in the following information for each participant receiving services. (\* indicates the field is required)

**2. First Name:\*** \_\_\_\_\_

**3. Last Name:\*** \_\_\_\_\_

**4. Date of Birth:** (mm/dd/yyyy)\* \_\_\_\_\_

**5. Address:** \_\_\_\_\_

**6. Address 2:** \_\_\_\_\_

**7. City:\*** \_\_\_\_\_ **8. State:\*** \_\_\_\_\_ **9. Zip Code:\*** \_\_\_\_\_

**10. Gender:\***(please choose one)  Male  Female  Unknown/Refused to state

**11. Age at first service:\*** \_\_\_\_\_

**12. Race:\*** (please choose one)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> American Indian<br>Alaskan Native | <input type="checkbox"/> Asian – Japanese   | <input type="checkbox"/> Native Hawaiian/Other Pacific<br>Islander – Guamanian or<br>Chamorro |
| <input type="checkbox"/> Asian – Asian Indian              | <input type="checkbox"/> Asian – Korean     | <input type="checkbox"/> White  |
| <input type="checkbox"/> Asian – Chinese                   | <input type="checkbox"/> Asian – Vietnamese | <input type="checkbox"/> Two or more races  |
| <input type="checkbox"/> Asian – Filipino                  | <input type="checkbox"/> Asian – Other      | <input type="checkbox"/> Other race   |
|  | <input type="checkbox"/> Black              |   |

## Participant Information Form

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13. **Hispanic, Latino/Latina or Spanish national origin:** (please choose one)\*

Not Hispanic, Latino(a) or Spanish

Cuban

Mexican, Mexican American or Chicano

Other Hispanic, Latino, or Spanish Origin

Hispanic Ethnicity Unknown

Puerto Rican

14. **Transgender:** (please choose one)

Transgender

Not transgender

15. **Sexual Orientation:** (please choose one)

Straight

Queer

Gay/Lesbian

Gender Neutral

Bisexual

Two-spirit

Questioning

Choose not to identify

16. **Primary language spoken at this person's home:** (please choose one)

English

Spanish

Other

Unknown

17. **If English is the primary language spoken at this participants home, indicate how well spoken:**  
(please choose one)\*

Very well

Not at all

Well

Unknown

Not well

18. **Living in poverty?** (please choose one)

Yes

No

Unknown

19. **Does participant (or if child/dependent does the parent/guardian) serve in the military?**

Currently serve in the armed forces

Served in the past, but not currently

Currently serve in the reserves

Never served in Armed Forces, Reserves, or National Guard

Currently serve in the National Guard

Military status unknown

**ATTACHMENT D: PRE/POST TEST**

**Parent Index Survey**

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

Name/Code: \_\_\_\_\_

**INSTRUCTIONS: Please answer the following questions to the best of your ability, reflecting your perception of where you are now.**

<b>How true are the following statements?</b>	<b>Not True</b>	<b>Mostly Not True</b>	<b>Somewhat True</b>	<b>Mostly True</b>	<b>Very True</b>
<b>3</b> Children can learn good behavior without being spanked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>8</b> A parent's use of alcohol and drugs has no impact on a child's ability to learn and make normal progress.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>9</b> A child may believe a separation from a parent is the child's own fault.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>10</b> Separation, grief and loss can keep a child from making normal progress.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>16</b> If I am worried or unhappy, I should be able to count on my child to make me feel better.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**21 Which of the following are TRUE statements when parents use Time Out with children?**

	<b>TRUE</b>	<b>FALSE</b>
a. Children realize parents will pay more attention to them when they misbehave.	<input type="checkbox"/>	<input type="checkbox"/>
b. It gives parents and children a chance to "cool off."	<input type="checkbox"/>	<input type="checkbox"/>
c. It is a form of punishment for children that makes them think about how bad they've been.	<input type="checkbox"/>	<input type="checkbox"/>
d. It teaches children the consequences of bad behavior.	<input type="checkbox"/>	<input type="checkbox"/>
e. It gives parents time to think of other ways to prevent or solve the problem in the future.	<input type="checkbox"/>	<input type="checkbox"/>
f. It can be helpful when a parent sits quietly with a young child in time out.	<input type="checkbox"/>	<input type="checkbox"/>

***THANK YOU FOR COMPLETING THIS SURVEY!***

**ATTACHMENT E: CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS**

Primary Covered Transactions 45 CFR 76

1. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principles:
  - a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;
  - b. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connections with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statement, or receiving stolen property;
  - c. Are not presently indicted for or otherwise criminally or civilly charges by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph 1.b. of this certification; and
  - d. Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
  
2. Where the prospective primary participants are unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

This Certification is executed by the person(s) signing below who warrant they have authority to execute this Certification.

**CONTRACTOR: KITSAP PUBLIC HEALTH DISTRICT**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

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

**ATTACHMENT F: CERTIFICATION REGARDING LOBBYING**

The undersigned certifies, to the best of his or her knowledge and believe, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

**KITSAP PUBLIC HEALTH DISTRICT**

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Contractor Organization

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Signature of Certifying Official

Date

## **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 sub-recipients (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

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)).



# Hood Canal Coordinating Council

Jefferson, Kitsap & Mason Counties; Port Gamble S'Klallam & Skokomish Tribes

17791 Fjord Drive NE, Suite 118, Poulsbo, WA 98370

## PROFESSIONAL SERVICES CONTRACT AGREEMENT BETWEEN HOOD CANAL COORDINATING COUNCIL AND KITSAP PUBLIC HEALTH DISTRICT

THIS AGREEMENT is a subaward and is between Hood Canal Coordinating Council (HCCC), located at 17791 Fjord Drive, NE, Suite 118, Poulsbo, WA 98370, and Kitsap Public Health District (Consultant), with an address of 345 6<sup>th</sup> Street, Suite 300, Bremerton, WA 98337-1866, and is made effective as of the date signed by the last party. HCCC and Consultant are also referred to as the “Parties” and each as a “Party.”

The Parties to this Agreement agree as follows:

- 1) **DEFINITIONS**. For purposes of this Agreement, the term:
  - a) “Hood Canal Coordinating Council” means Hood Canal Coordinating Council, also referred to as HCCC, a Washington Corporation, and its members, directors, officers, employees, and agents;
  - b) “Consultant” means the Consultant and its directors, officers, employees, agents, and subcontractors; and
  - c) “Contract Representative” means the person designated below and incorporated by reference, to serve as representative of HCCC and the Consultant for purposes of administration of this Agreement.
- 2) **SERVICES TO BE PERFORMED AND DELIVERABLES**. The Consultant agrees to provide services to HCCC, in accordance with applicable professional standards, as described in Exhibit A and the Funding Source Programmatic Conditions (if any), as described in Exhibit A. No work shall commence under this Agreement until it is fully executed by both Parties.
- 3) **COMPENSATION**.
  - a) Except as provided herein, HCCC agrees to pay Consultant on a monthly basis following receipt of an invoice documenting services rendered and costs incurred, in a manner and amount stipulated in Exhibit A.
  - b) Consultant shall submit the final invoice, or any claims for payments not already made, no later than 30 days from the expiration or termination of the agreement, or as otherwise stated in Exhibit A.
    - i) HCCC may, at its sole discretion, retain up to 10 percent of the amount otherwise due and owing under each invoice until Consultant completes all work described in



Exhibit A, or otherwise authorized by HCCC. HCCC shall notify Consultant of the amount retained and deposit the retained amount in an interest-bearing account. HCCC shall release the amount retained, together with earned interest, not later than 30 days after receipt of a final invoice and acceptance of HCCC of all work authorized.

- ii) HCCC may, at its sole discretion, retain an amount otherwise due and owing under each invoice until Consultant provides HCCC with evidence that the Consultant has paid industrial insurance premiums for its employees and/or is in compliance with state industrial insurance requirements.

c) **Allowable Costs.**

- i) **Travel Expenses.** HCCC agrees to reimburse Consultant up to the amount stipulated in Exhibit A for travel expenses (including per diem) from Consultant's home or principal place of business to meeting sites. HCCC shall reimburse Consultant for travel expenses in accordance with federal travel regulations. Payment for expenses over the category amount will not be honored without prior approval of HCCC's Contract Representative. International travel requires advance pre-approval.
- ii) **Other Expenses.** HCCC agrees to reimburse Consultant for miscellaneous expenses specified in Exhibit A, provided those costs are allowable under the Federal Cost Principles set forth in the OMB Uniform Guidance, 2 CFR Part 200. Any request over the category amount will not be honored without prior approval by HCCC's Contract Representative.

d) **Unallowable Costs.**

- i) Management fees or similar charges in excess of the direct costs are not allowable.
- ii) If Consultant expends more than the amount of its approved budget in anticipation of receiving additional funds, it does so at its own risk. HCCC is not legally obligated to reimburse Consultant for costs incurred in excess of the approved budget.

- e) **Invoice.** Consultant's invoice shall indicate dates of service, a description of work performed, and time spent on that date in providing service under this Agreement. The invoice shall include travel claims for travel expenses incurred by Consultant in connection with performance under this Agreement. The invoice shall provide a progress report describing all activities accomplished for the period being invoiced.

- i) Invoices should be sent to the Accountant at the HCCC address listed below via U.S. Postal Service or email (not both).
- ii) Invoices must be submitted by a representative of the Consultant who has the Consultant's full authority to render such reports and requests for payment and certify to the following at time of submission:  
*By signing this payment request, I certify to the best of my knowledge and belief that the payment request is true, complete, and accurate. The expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the*

*terms and conditions of the Agreement. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. 18 USC 1001 and 31 USC 3729-3730 and 3801-3812.*

- 4) **TERM.** The term of this Agreement commences on the effective date, the date the agreement is signed by the HCCC Executive Director below, and continues until ~~December 31, 2022~~ **September 30, 2023** as stipulated in Exhibit A, or until terminated by the Parties. In the event funding from state, federal, or other sources is withdrawn, reduced, or limited in any way after the effective date of this contract and prior to normal completion, HCCC may terminate the contract under the “Term” clause without a notice requirement.
- 5) **SUBCONTRACTING.** Consultant may not subcontract without prior written approval by the HCCC. Additionally, the Consultant is responsible for ensuring that all terms, conditions, assurances and certifications set forth in this contract are carried forward to any subcontracts.
- 6) **TRAINING.** Consultant acknowledges that no training will be provided to Consultant under this Agreement. Consultant warrants and represents that its personnel are fully trained to perform services required under this Agreement and that additional training provided by HCCC will be unnecessary.
- 7) **BUSINESS LICENSES AND TAXES.**
  - a) Consultant shall, at its own expense, secure and maintain in full force and effect during the term of this Agreement all required licenses, permits, and similar legal authorization, and comply with all applicable Federal, State and local regulations.
  - b) Consultant shall be responsible for payment of taxes, insurance and other obligations relating to its performance of services under this Agreement. Consultant shall provide HCCC with verification of its:
    - i) Unified business identifier number from the State of Washington and that its business license is in good standing;
    - ii) Washington State Department of Revenue account and that the account is in good standing;
    - iii) Washington State Labor and Industries account and that the account is in good standing or that the Consultant is exempt from the state’s industrial insurance requirements;
    - iv) Data Universal Numbering System (DUNS) number; and
    - v) Central Contractor Registry (CCR) through SAM.gov.
  - c) All other necessary licenses and permits to perform the work specified in Exhibit B.
- 8) **INDEPENDENT CONSULTANT STATUS.**
  - a) Consultant shall act as an independent Consultant, and in no way shall be considered an employee of HCCC. Consultant is not required to report to HCCC’s offices at any specific

time, except as requested for occasional consultations. HCCC does not have the right to assign any additional projects to Consultant. Consultant shall choose the time and manner for performing each part of the services described in Exhibit A according to its own routines and schedules, independent from HCCC's normal business operations.

- b) Consultant acknowledges that Consultant will not qualify for benefits which may be available if classified as an employee. In the event that the Internal Revenue Service (IRS) successfully asserts that Consultant is not or was not an independent Consultant for any period during the term of this Agreement and reclassifies Consultant as an employee, Consultant agrees to complete, sign and deliver IRS Form 4669 (Employee Wage Statement) to HCCC for any tax period affected. HCCC shall then file the Form 4669 with the IRS (along with IRS Form 4670 "Request for Relief From Payment of Income Tax Withholding") to offset against HCCC's withholding obligation.
  - c) Consultant acknowledges that it will be liable to HCCC for any industrial insurance premiums or any other premiums or fees that HCCC is required to pay on its behalf under RCW 51.12.070, or any other applicable statute, regulation or ordinance, to the State of Washington or local jurisdiction.
- 9) **NON-EXCLUSIVE CONTRACT.** This Agreement is non-exclusive. Consultant reserves the right to perform services for others during the term of the Agreement.
- 10) **MATERIALS AND EQUIPMENT.** Consultant shall provide all materials and equipment necessary to perform its obligations under this Agreement: Provided, however, that Consultant may use office equipment located in the offices of HCCC, as available, and provided however, that if "Other Expenses" have been awarded as part of this agreement, HCCC may purchase said supplies and services on behalf of the Consultant as part of this Agreement. Materials and equipment includes but is not limited to, appropriate safety plans and providing personal protective equipment to employees to address continued performance under the contract where such continued performance can be done in compliance with Federal, State or County Emergency Orders despite the presence of such causes. Any materials and equipment will be indicated in Exhibit A - Scope of Services.
- 11) **INDEMNIFICATION.**
- a) To the fullest extent permitted by law, Consultant hereby indemnifies and holds HCCC harmless from any and all loss, damage, suits, liability, claims, demands or costs, whatsoever, whether arising at law or in equity, or sounding in tort, contract or other causes of action arising from any claim or liability resulting from Consultant's performance of services described in Exhibit A under this Agreement, except to the extent caused by the negligence of HCCC.
  - b) Consultant hereby indemnifies and holds HCCC harmless from any additional taxes, interest and penalties due from Consultant or HCCC resulting from reclassification in the event the IRS or any state or local taxing authority successfully asserts that Consultant is not or was not an independent Consultant for any period during the term of this Agreement and reclassifies Consultant as an employee.

- 12) **INSURANCE.** Consultant shall provide HCCC with a certificate of insurance for each insurance provision required in this section. The certificate of insurance shall be effective during the duration of this agreement. HCCC may require that the certificate of insurance name HCCC as an additional insured party. Consultant shall also require all of its subcontractors to maintain the same type and level of insurance as required in this section and provide certificates of insurance to HCCC as required in this section. Consultant shall, at its own expense, acquire and maintain the following insurance throughout the term of the Agreement:
- a) Commercial Automobile Liability Insurance covering all owned, non-owned and hired automobiles, trucks and trailers. Such insured shall provide the Standard Comprehensive Automobile Liability policy in limits not less than \$1,000,000 Combined Single Limit;
  - b) Commercial General Liability Coverage Insurance, with not less than the following limits: \$1,000,000 for each occurrence limit, \$1,000,000 for personal injury limit, \$2,000,000 general aggregate limit;
  - c) Professional Liability Insurance in an amount not less than \$1,000,000 per claim and in the aggregate; and
  - d) Workers' Compensation and Employer Defense Insurance as required by statute and employer liability coverage, with not less than the following limits: \$1,000,000 each accident for bodily injury by accident, \$1,000,000 each employee for bodily injury by disease and \$1,000,000 policy limit for bodily injury by disease.
  - e) Notwithstanding the forgoing, Contractor maintains a system for self-insurance that meets the requirements of this section 12.
- 13) **CONFIDENTIALITY.** Information produced or made available to the Consultant shall not be disclosed to others or used for any other purpose, except as required under this contract or by law, without prior written approval by HCCC.
- 14) **OWNERSHIP OF PRODUCTS PRODUCED UNDER THIS CONTRACT.** All data and products developed under this contract, excluding copyrighted material used with permission, or other public data that cannot be copyrighted, shall become the sole property of HCCC and its assigns. Permission for its subsequent use must be obtained from HCCC prior to that use. Any alteration of the data by HCCC for purposes other than those intended by this Agreement shall be at HCCC's sole risk and without legal liability upon the Consultant.
- 15) **PUBLICITY AND ACKNOWLEDGEMENT OF SUPPORT.**
- a) Consultant gives HCCC the right and authority to publicize HCCC's financial support for this Agreement and the Project in press releases, publications and other public communications. Consultant agrees to: (i) give appropriate credit to HCCC and any Funding Sources identified in this Agreement for their financial support in any and all press releases, publications, annual reports, signage, video credits, dedications, and other public communications regarding this Agreement or any of the project deliverables associated with this Agreement, subject to any terms and conditions below;

and (ii) include the disclaimer provided for in (b). Consultant must obtain prior HCCC approval for the use relating to this Agreement of the HCCC logo or the logo of any Funding Source.

- b) **Disclaimers.** Payments made under this Agreement do not by direct reference or implication convey HCCC’s endorsement nor the endorsement by any other entity that provides funds through this Agreement, including the U.S. Government, as applicable, for the Project. All information submitted for publication or other public releases of information regarding this Agreement shall carry the following disclaimer:
- i) For Projects funded in whole or part with Federal funds: “The views and conclusions contained in this document are those of the authors and should not be interpreted as representing the opinions or policies of the U.S. Government or the Hood Canal Coordinating Council and its funding sources. Mention of trade names or commercial products does not constitute their endorsement by the U.S. Government, or the Hood Canal Coordinating Council or its funding sources.”
  - ii) For Projects not funded with Federal funds: “The views and conclusions contained in this document are those of the authors and should not be interpreted as representing the opinions of the Hood Canal Coordinating Council or its funding sources. Mention of trade names or commercial products does not constitute their endorsement by the Hood Canal Coordinating Council or its funding sources.”
- 16) **INSPECTION AND RETENTION OF RECORDS.** The Consultant shall make all applicable financial records, supporting documents, and all other pertinent records related to this Project available to HCCC, the State of Washington, the U.S. Government, or any of their duly authorized representatives for inspection. Records shall be retained until the Term date of this Agreement and then submitted to the Project Manager for retention until required by law.
- 17) **NONDISCRIMINATION.** By signing this Agreement, the Consultant certifies that it is an Equal Opportunity Employer and in compliance with all state and federal nondiscrimination requirements. The Consultant agrees to continue to be in compliance with all state and federal nondiscrimination requirements. Consultant agrees to comply fully with applicable civil rights statutes and regulations, including Title IV of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and the American Disabilities Act.
- 18) **COMPLIANCE WITH COPELAND “ANTI-KICKBACK” ACT.** Consultant is prohibited from inducing, by any means, any person employed in the construction, completion, or repair of public work, to give up any part of the compensation to which he is otherwise entitled and remain in compliance with 18 U.S.C. 874 and 40 U.S.C. 276c.
- 19) **PREVAILING WAGE.** The Consultant agrees to pay the prevailing rate of wage to all workers, laborers, or mechanics employed in the performance of any part of this contract when required by state law to do so, and to comply with provisions of the Davis-Bacon Act (40 USC 3141–3148), Contract Work Hours and Safety Standards Act (40 USC 3701-3708),

other federal laws and Chapter 39.12 RCW, as amended, and the rules and regulations of the Department of Labor and Industries.

- 20) **APPLICABLE LAW.** This Agreement shall be construed and enforced under the laws of the State of Washington, irrespective of the fact that any one of the Parties is now or may become a resident of another state. Venue for any action under this Agreement shall lie in Kitsap County, Washington.
- 21) **MODIFICATION.** This Agreement may not be waived, discharged or modified in any manner other than by written agreement of the Parties.
- 22) **SEVERABILITY.** No provision of this Agreement is severable from any and all other provisions of this Agreement. Should any provision or provisions of this Agreement be unenforceable for any reason, the party finding itself unable to enforce said provision(s) may, at its sole discretion, declare this entire Agreement to be null and void.
- 23) **FORCE MAJEURE.** Each Party shall be excused from liability for the failure or delay in performance of any obligation under this Agreement if the failure to perform the contract arises from causes beyond the control and without the fault or negligence of the Party. Examples of such causes include (1) acts of God or of the public enemy, (2) acts of the Government in either its sovereign or contractual capacity, (3) fires, (4) floods, (5) epidemics, (6) quarantine restrictions, (7) strikes, (8) freight embargoes, and (9) unusually severe weather. In each instance the failure to perform must be beyond the control and without the fault or negligence of the Contractor. Such excuse from liability shall be effective only to the extent and duration of the event(s) causing the failure or delay in performance and provided that the Party has not caused such event(s) to occur and continues to use diligent, good faith efforts to avoid the effects of such event and to perform the obligation. Notice of a Party's failure or delay in performance due to force majeure must be given to the unaffected Party promptly thereafter but no later than five (5) days after its occurrence which notice shall describe the force majeure event and the actions taken to minimize the impact thereof. All delivery dates under this Agreement that have been affected by force majeure shall be tolled for the duration of such force majeure. In no event shall any Party be required to prevent or settle any labor disturbance or dispute. Notwithstanding the foregoing, should the event(s) of force majeure suffered by a Party extend beyond a six-month period, the other Party may then terminate this Agreement by written notice to the non-performing Party, with the consequences of such termination as if this Agreement had expired (and was not terminated) in accordance with other provisions herein.
- 24) **TERMINATION.** Either party may terminate this Agreement with 30 days written notification to the other party. If this Agreement is so terminated, the Parties shall be liable only for performance rendered or costs incurred in accordance with the terms of this Agreement prior to the effective date of termination. If for any cause, either party does not fulfill in a timely and proper manner its obligations under this Agreement, or if either party violates any of these terms and conditions, the aggrieved party will give the other party written notice of such failure or violation. The responsible party will be given the

opportunity to correct the violation or failure within 15 working days. If the failure or violation is not corrected, this Agreement may be terminated immediately by written notice of the aggrieved party to the other. HCCC shall have the right to terminate this Agreement in whole or in part at any time, if the Funding Source issues an early termination under the funding agreement(s) covering all or part of the Project at issue hereunder.

- 25) **WAIVER.** If either party fails to exercise its rights under this Agreement, it shall not be precluded from subsequent exercise of its rights. A failure to exercise rights shall not constitute a waiver of any other rights under this Agreement, unless stated in a letter signed by authorized representative of the party and attached to the original agreement.
- 26) **COSTS AND ATTORNEYS FEES.** If either party brings any action against the other for relief, declaratory or otherwise, arising out of this Agreement, the prevailing party shall recover against the other party all costs and reasonable attorneys' fees, including costs and reasonable attorneys' fees incurred to enforce any judgment rendered pursuant to this Agreement.
- 27) **CERTIFICATIONS AND ASSURANCES RELATING TO FEDERAL FUNDS (if applicable).** If the Funding Source, including any secondary funding source, is paid with federal funds, the Consultant must comply with the following.
- a) **Uniform Guidance.** Consultant must comply with the Uniform Guidance (2 CFR Part 200) to the extent applicable to Consultant as a non-Federal entity receiving a federal award. With respect to cost principles: Non-Profit Organizations, Institution of Higher Education, State, Local or Tribal Government, must comply with the Cost Principles of the Uniform Guidance, 2 CFR Part 200; and Commercial (for-profit) organizations must comply with Title 48 Chapter 1 Subchapter E Part 31. No funds provided pursuant to this Agreement may be used to support any activities not authorized under this Agreement or allowable under the Federal Cost Principles set forth in the OMB Uniform Guidance.
  - b) **Audit Requirements.** Consultant may be required to comply with the Federal Audit Requirements found in 2 CFR 200.500 (formerly OMB Circular A-133).
  - c) **Lobbying and Litigation (2 CFR 200.450).**
    - i) No funds under the Agreement may be used to engage in lobbying of the Federal Government or in litigation against the U.S. unless authorized under existing law.
    - ii) **New Restrictions on Lobbying.** In any subcontract over \$100,000, Consultant shall require that subcontractors submit certification and disclosure forms in accordance with the Byrd Anti-Lobbying Amendment, 31 USC 1352. Any consultant who makes a prohibited expenditure or fails to file the required certification or lobbying forms shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such expenditure.
  - d) **Debarment and Suspensions.** Unless Consultant has submitted a written justification fourteen (14) days prior to execution of this Contract, stating the reason that this term does not apply, which has been expressly accepted and approved by HCCC prior to

execution, by signing this Agreement, Consultant warrants and represents its initial and continued compliance that it is not listed on the General Services Administration's, government-wide System for Award Management Exclusions (SAM Exclusions), in accordance with the OMB guidelines at 2 C.F.R Part 180 that implement E.O.s 12549 (3 C.F.R., 1986 Comp., p. 189) and 12689 (3 C.F.R., 1989 Comp., p. 235), "Debarment and Suspension." The Consultant further provides that it shall not enter into any subaward, contract or other Contract using funds provided by HCCC with any party listed on the SAM Exclusions in accordance with Executive Orders 12549 and 12689. The SAM Exclusions can be found at SAM.gov.

- e) **Drug-Free Workplace Certification.** Consultant shall make an ongoing, good faith effort to maintain a drug-free workplace pursuant to the specific requirements set forth in CFR Part 1536 Subpart B. Consultant shall identify all known workplaces under this Agreement, and keep this information on file during the performance of the Agreement. Consultants who are individuals must comply with the drug-free provisions set forth in 2 CFR Part 1536 Subpart C. The consequences for violating this condition are detailed under 2 CFR Part 1536 Subpart E.
- f) **Trafficking in Persons.** You as the sub-recipient, your employees, sub-awardees under this award, and sub-awardees' employees may not engage in severe forms of trafficking in persons during the period of time that the award is in effect; procure a commercial sex act during the period of time that the award is in effect; or use forced labor in the performance of the award or sub-awards under this Award and must inform HCCC immediately of any information you receive for any source alleging a violation of this prohibition during the term of the agreement.
- g) **Reducing Text Messaging while Driving, Executive Order 13513.** Consultant is encouraged to adopt and enforce policies that ban text messaging while driving, including conducting initiatives of the type described in section 3(a) of the order.
- h) **Disadvantaged Business Enterprise.** Consultant agrees to good faith efforts whenever procuring construction, equipment, services and supplies in compliance with the requirements of EPA's Program of Utilization of Small, Minority and Women's Business Enterprise (MBE/WBE). 40 CFR 33. Consultant must receive permission from HCCC to sub-contract with another entity.
- i) **Additional Responsibility Matters.** By signing this Agreement, Consultant warrants and represents that it is not subject to the below circumstance.
  - i) Was convicted (or had an officer or agent of such corporation acting on behalf of the corporation convicted) of a felony criminal violation under any Federal or State law within the preceding 24 months, where the awarding agency is aware of the conviction, unless the agency has considered suspension or debarment of the corporation and made a determination that this further action is not necessary to protect the interests of the Government.



- j) **Certification and Representation.** Consultant must submit those certifications and representations required by Federal statutes, or regulations to HCCC on an annual basis. Submission may be required more frequently if the Consultant entity fails to meet a requirement of a Federal award.

28) **COUNTERPARTS AND ELECTRONIC SIGNATURES.** This Agreement may be executed in counterparts, after execution by all Parties hereto, shall together constitute the Agreement. The parties acknowledge that a signature in electronic form has the same legal effect and validity as a handwritten signature.

IN WITNESS WHEREOF, the Parties hereto have executed this Agreement effective as of the day and year below.

**Hood Canal Coordinating Council**

**For Kitsap Public Health District**

\_\_\_\_\_  
Scott Brewer, Executive Director

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

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

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

This Agreement is made effective as of the date when the agreement is signed by the last party.

## **EXHIBIT A Independent Consultant Scope of Services**

### **Hood Canal Regional Pollution Identification and Correction Program – Phase 4**

#### **CONSULTANT: KITSAP PUBLIC HEALTH DISTRICT**

#### **Description of Services**

Kitsap Public Health District (KPHD) will provide services to support the implementation of the Hood Canal Regional Pollution Identification and Correction (HCRPIC) Program’s Phase 4, as described below.

PIC projects rely on field work (parcel surveys and investigations) to identify On-Site Sewage Systems (OSS) failures. This Agreement may require modification based on circumstances beyond the control of HCCC and KPHD. The Parties recognize that field work timelines will need to be flexible due to any safety limitations and available staff resources.

The following project information is excerpted from HCCC’s base agreement scope of work with WA State Department of Health:

Contract number: CBO24134

Subrecipient Organization: Hood Canal Coordinating Council

Subrecipient Contact: Haley Harguth, Watershed Program Manager, [hharguth@hccc.wa.gov](mailto:hharguth@hccc.wa.gov), 360.328.4625; Scott Brewer, Executive Director, [sbrewer@hccc.wa.gov](mailto:sbrewer@hccc.wa.gov), 360.531.0575

DUNS #: 620533930

CPAR Info (Statewide Vendor #, UBI, Federal Tax ID, etc.): 0011386-00, 602-080-310, 91-2085994

DOH Contract Manager: Megan Schell [megan.schell@doh.wa.gov](mailto:megan.schell@doh.wa.gov) 360.236.3307

Federally Approved Indirect Rate: 10% (de minimis)

Period of Performance: DOE - Sep 30, 2023.

#### **NOTE: EPA stretch goals are to spend awarded funds within 2 years**

**Project Description:** This project funds pollution identification and correction activities to protect and improve Hood Canal water quality to safeguard public and ecosystem health and keep shellfish growing areas and recreational beaches open by preventing bacterial pollution flowing into surface waters. The Hood Canal Regional Pollution Identification and Correction Program brings together local health jurisdictions and tribal partners across the Hood Canal region to coordinate water quality protection actions. This unique regional structure enables cross-jurisdictional sharing of resources and expertise to solve water quality challenges threatening Hood Canal’s community and ecosystem health.

Not to exceed: **\$11,230**

Near Term Action ID: 2018-0639

## OVERVIEW

The Hood Canal Regional Pollution Identification and Correction Program (HCRPIC) core partners will work collaboratively to implement prioritized Pollution Identification and Correction (PIC) work throughout Hood Canal to help reduce bacterial pollution and increase harvestable shellfish acres. HCRPIC core members include Jefferson, Kitsap, and Mason Counties, the Port Gamble S'Klallam and Skokomish Tribes; other partners include the county conservation districts, Hood Canal Salmon Enhancement Group, and WSU Extension.

There are eighteen shellfish growing areas in the Hood Canal Action Area. As of 2019, the Hood Canal Action Area had 29,766 acres of approved growing areas, 1,515 acres with conditional approval, and about 3,144 acres of prohibited or restricted growing area. Washington State Department of Health (DOH) has identified several emergency closure zones, threatened areas, and areas of concern based on marine water quality data. There are close to 30,000 onsite sewage systems (OSS) in the project area, many in close proximity to waterbodies and approximately one third of the systems are over 30 years old. PIC programs have been essential to maintain and improve water quality and will continue to be vital for the health of Hood Canal and its communities.

The project will primarily address fecal pollution and associated pathogens. As fecal pollution sources are corrected, less nutrients and organic materials, associated with human and animal waste, will enter Hood Canal. That will result in less oxygen demand to break down algae blooms resulting from excess nutrients and the organic materials in waste. Hood Canal Regional PIC Program implementation will identify and correct pathogen sources. The resulting water quality improvements will help achieve the Puget Sound Partnership's Vital Sign recovery target to increase harvestable shellfish acreage.

Phase 1 of the HCRPIC program developed a coordinated PIC monitoring plan with the goal to upgrade shellfish harvest areas and prevent future downgrades in Hood Canal priority areas. In the Phase 2 and 3 implementation phases, priority shoreline areas were determined by HCRPIC members using current water quality monitoring information to identify the most important shoreline areas to survey. The prioritization of shoreline areas will be updated annually as new data emerges. Phase 3 ended in August 2019, collectively resulting in 66 shoreline miles monitored, 380 site inspections completed, 55 OSS failures identified, with 28 OSS repairs completed and the rest in progress. The incomplete OSS repairs will continue to be tracked in Phase 4. Phase 4 builds off of previous implementation phases but with a reduced scope of work due to funding limitations. HCRPIC Program - Phase 4 components include: shoreline surveys in priority Hood Canal shoreline areas, pollution hotspot investigation and correction, updated GIS mapping of OSS in Hood Canal, outreach and education to Hood Canal OSS property owners and decision makers, OSS maintenance rebates, ambient stream water quality monitoring, and regional inter-jurisdictional coordination.

The Phase 4 work plan will be developed in consultation with DOH and will include:

- Remaining Phase 3 priority hotspots and work areas including Hoodsport, Union, Big Bend, Alderbrook, and Annas Bay, and
- Other areas with urgent public health or emerging water quality concerns.

## GOALS & MEASURABLE OBJECTIVES

Description (e.g., “shellfish beds reopened”)	Units (e.g. “acres”)	Targets (“number”)
Upgrade 50 acres from prohibited to approved in Hoodsport area of Hood Canal 6	Acres	50
Reopen all closed parcels due to elevated bacteria in drainages or due to failing onsite septic systems	Parcels	20
Number of hotspots identified in Mason County	Hotspots	Unknown (will be reported quarterly)
Number of site inspections completed in Mason County	Site Inspections	75
Number of OSS failures identified in Mason County	OSS Failures	5
Number of OSS failures corrected in Mason County	OSS Corrections	5
Area of shoreline surveys conducted in priority areas	Miles	3
Number of ambient freshwater samples collected	Samples	100

## KPHD’S HCRPIC PHASE 4 TASKS

The following are the tasks, deliverables, and deadlines associated with this subaward. Task numbering aligns with the task numbers in HCCC’s base grant with DOH.

### TASK 3. HOOD CANAL REGIONAL POLLUTION IDENTIFICATION AND CORRECTION PROGRAM PHASE 4 IMPLEMENTATION

#### 3.1 HCRPIC PROGRAM COORDINATION:

Support HCRPIC Program coordination, providing technical expertise and advice as needed.

This task includes: collaboration with program partners to reinforce shared protocols and clarify work flows, prepare the Phase 4 Workplan and track progress, preparation of invoices and progress reports for project coordinators, coordination of County staff working toward Phase 4 objectives, coordination with landowners within the project area, upkeep and quality assurance of program data, data reporting, and contributions to program deliverables, including quarterly

and final reports, sustainable funding efforts, and outreach materials.

**Project Coordination:** Coordinate implementation of HCRPIC in your jurisdiction following HCRPIC protocols described in the HCRPIC Guidance Document and the project QAPP. Monitor spending and progress toward deliverables.

Submit monthly invoices and progress reports (using HCRPIC Program templates) **by the 15<sup>th</sup> of the following month**. Communicate any concerns to HCRPIC Coordinator that progress is not on track.

Invoices will be reimbursed upon satisfactory progress and reporting on the deliverables within each payment period.

- Send invoices via e-mail to HCCC accountant, Terry Fischer ([tfischer@hccc.wa.gov](mailto:tfischer@hccc.wa.gov))
- Send progress reports via email to Haley Harguth ([hharguth@hccc.wa.gov](mailto:hharguth@hccc.wa.gov))

**HCRPIC Ph. 4 Workplan:** HCRPIC partners will work collaboratively to develop the HCRPIC Phase 4 Workplan, which will establish priority areas for shoreline and ambient freshwater stream monitoring and property surveys, targeting areas of known pollution hotspots, or facing shellfish growing area downgrades. The Phase 4 Workplan will be informed by data from the HCRPIC Program Phase 3 results and GIS analysis, current water quality information gathered from county health jurisdictions and tribes, and monitoring data and recommendations from Washington State Department of Health technical staff. It will outline tasks to build upon supporting work conducted in Phase 3. The Phase 4 Workplan will outline any changes to HCRPIC Program procedures for data collection, PIC hotspot investigations, and reporting, including the enforcement process and timeline, and protocol for communication of public health risks. *Field work activities cannot begin until the HCRPIC Phase 4 Workplan is completed and the QAPP is approved.*

**Data Collection & Reporting:** Submit field work data to project coordinators every quarter using the HCRPIC cumulative data report template. Data reported to the HCRPIC Program should include all PIC field work performed in Hood Canal funded by the HCRPIC Program grant, as well as other funding sources, in order to provide a comprehensive report of all Hood Canal PIC efforts across jurisdictions. Data is expected to be thoroughly reviewed by the submitter for quality assurance and quality control and entered into Kitsap Health's cloud-based water quality database, prior to it being submitted. Final Cumulative Data Reports will be submitted to project coordinators after field work is completed to prepare for analysis, mapping, and EPA WQX data entry. All data collected that is paid by this grant must be shared with state and federal agencies upon request.

**HCRPIC Guidance Group Meetings:** HCRPIC partners will share information and ideas, make collaborative decisions, and help guide HCRPIC Program's direction. The Guidance Group provides oversight, guidance, shared learning, and structure for consistent procedures across the PIC program. Guidance Group meetings with project partners will be held quarterly or as needed to advance collaborative work in the PIC project area. At Guidance Group meetings,

partners will:

- Report on Ph 4 Workplan implementation, including current progress updates including: progress on priority hotspot and water quality investigations, surveys completed, FC sources identified, progress of FC source correction, success stories, lessons learned, requests for advice and assistance, next steps, upcoming events, etc.
- Present hotspots for consideration of elimination following hotspot closure protocol described in HCRPIC Guidance Document. This information will be included in the HCRPIC Ph. 4 final report.
- Provide updates on sustainable funding efforts.

**Strategic Planning/Sustainable Funding:** Strategic planning efforts will be conducted to develop and implement a plan to enhance the HCRPIC Program’s efforts to reduce bacterial contamination in the shellfish growing areas of Jefferson, Kitsap, and Mason Counties. HCRPIC partners will work with program coordinators to develop a strategic plan, which addresses the key elements in the Pollution Identification and Correction Program Draft Protocols Recommendations provided by the Departments of Health and Ecology. The Guidance Group will determine objectives and scope of activities, which may include hiring an outreach consultant to support the development of a sustainable funding outreach campaign, outreach products, and presentations to decision-makers on water quality protection, program successes and sustainable funding. HCRPIC partners will provide updates of sustainable funding efforts at Guidance Group meetings.

**Training/Workshops:** Assist project coordinators in preparing and leading HCRPIC Field Training Workshop. The HCRPIC members will participate in a field training and data reporting workshop addressing HCRPIC protocols and procedures. The workshop will be held in the first quarter after contract agreements are in place. Local Health Jurisdiction Project coordinator and at least one field staff participating in HCRPIC Program field activities must attend the training.

Project partners may participate in DOH-sponsored PIC workshops and other trainings/events (subject to grant coordinator approval), as funds allow. Maximum of two events per sub-recipient, or two people may attend a single event.

### 3.3 ONSITE SEPTIC SYSTEM MAINTENANCE REBATES

Homeowner rebates for onsite septic system maintenance will be provided to priority parcels by local health jurisdictions. These rebates were very successful in Phases 2 and 3 to incentivize homeowners to properly operate and maintain their septic systems. In Phase 4, HCRPIC partners will offer rebate vouchers up to \$500 per OSS, to reimburse costs for OSS inspections and pumping, and small tank repairs.

Rebate notices will be distributed to residences using a consistent format across jurisdictions. The criteria for rebate recipients will be determined by the Guidance Group and approved by DOH. In past phases, criteria were set to include homeowners who had not previously received a voucher, located in priority areas, or had missing or overdue maintenance records.

Local Health Jurisdictions will track and analyze data summarizing rebate recipients and services

reimbursed to evaluate the effectiveness of the rebate program as a behavior change tool and inform future phases.

**DELIVERABLES**

<b>Task</b>	<b>Deliverable Description</b>	<b>Due Date</b>
<b>3.1</b>	<p><b>Program Coordination</b></p> <p>Describe coordination activities in monthly progress reports.</p> <p>Report on workplan implementation progress at quarterly Guidance Group meetings.</p> <p>Submit PIC field work data quarterly using HCRPIC Cumulative Data Report spreadsheet</p>	<p>Ongoing, Monthly</p> <p>At quarterly Guidance Group meetings</p> <p>One week prior to Guidance Group meetings</p>
<b>3.3</b>	<p><b>OSS Maintenance Rebates</b></p> <p>Report number of rebates processed in monthly progress reports and in final reporting with specific selection criteria and outcomes (length of time since last inspection, tanks more than ½ full of solids, and any deficiencies identified and/or corrected</p>	<p>Ongoing, complete by Sep 30, 2023</p>

**PROJECT BUDGET**

<b>HCRPIC Program Ph. 4 Budget – KPHD</b>		
<b>Task 3: HCRPIC Program Implementation</b>		
<b>Personnel</b>		
Senior Environmental Health Specialist (Task 3.1 PIC Coordination)	82 hours @ \$64.40 per hour	\$5,281
<b>Other Costs</b>		
OSS O&M Rebates		\$3,950
Indirect Costs (Task 3.1)	36.00%	\$1,901
<b>Subtotals</b>		
Personnel Total		\$5,281
Other Costs Total	OSS Rebate Vouchers	\$3,950
Travel Total		
Indirect Costs	36.00%	\$1,901
<b>Grand Total</b>		<b>\$11,132</b>

**Compensation:** The Consultant shall be compensated under this agreement in an amount not

to exceed: **\$11,230**. Hourly composite rates and indirect rates will be billed based on actual rates at the time of service. If hourly composite rates and indirect rates differ from those listed in this contract, then the consultant will send an email with their invoice to the HCCC Accountant documenting these changes. The consultant will ensure that any rate changes do not result in an increase that exceeds the total budget. Submit monthly invoices to the Accountant by the 15th of the following month. Expenses are payable with prior authorization from HCCC project manager, and contingent upon satisfactory progress reporting toward completion of project deliverables. Consultant shall submit the final invoice, or any claims for payments not already made, no later than 30 days from the expiration or termination of the agreement.

**Progress Reporting:** Consultant will submit progress reports each month by the 15th of the following month to accompany invoices. A progress report template will be provided. Submit progress reports to the project manager.

**Travel:** If claiming mileage Consultant will submit a mileage Report for reimbursement with invoice. Mileage and travel costs will be reimbursed at current federal rates or allowances.

**Contract Duration Date:** The effective date is the date the contract is signed by all parties and ends **Sep 30, 2023**.

**Consultant Checklist:** Consultant will complete and provide requested information on Exhibit B.

**Contract Representatives:**

Scott Brewer, Executive Director  
Hood Canal Coordinating Council  
17791 Fjord Drive, NE Suite 118  
Poulsbo, WA 98370-8430  
[sbrewer@hccc.wa.gov](mailto:sbrewer@hccc.wa.gov)  
(360) 531-0575

Haley Harguth, Watershed Program Manager  
Hood Canal Coordinating Council  
17791 Fjord Drive, NE Suite 118  
Poulsbo, WA 98370-8430  
[hharguth@hccc.wa.gov](mailto:hharguth@hccc.wa.gov)  
(360) 328-4625

Terry Fischer, Accountant  
Hood Canal Coordinating Council  
17791 Fjord Drive, NE Suite 118  
Poulsbo, WA 98370-8430  
[tfischer@hccc.wa.gov](mailto:tfischer@hccc.wa.gov)  
(360) 536-1338



**Consultant Representative(s):**

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

Project Manager:  
Grant Holdcroft, Water Pollution Identification and Correction Manager  
Kitsap Public Health District  
345 6<sup>th</sup> Street, Suite 300  
[grant.holdcroft@kitsappublichealth.org](mailto:grant.holdcroft@kitsappublichealth.org)  
(360) 728-2228

Leslie Banigan, Senior Environmental Health Specialist  
Kitsap Public Health District  
345 6<sup>th</sup> Street, Suite 300  
[leslie.banigan@kitsappublichealth.org](mailto:leslie.banigan@kitsappublichealth.org)  
(360) 728-2243

**EXHIBIT B**  
**PROFESSIONAL SERVICES CONTRACT**  
**CONSULTANT CHECKLIST**

**Consultant is a Subrecipient or a Contractor (Consultant):** According to GSA-CX-1.8: Subrecipient and Contractor Determination guidelines, HCCC has determined that you are a Contractor, aka Consultant.

**UBI No.** 601 139 034

**Federal Tax ID No.** 42-1689063

**Provide Data Universal Numbering Systems (DUNS) Number:** 169167202

**Consultant Type:** Local government

**FEDERAL/STATE PASS-THROUGH INFORMATION**

Refer also to information in Exhibit A.

**Project Name:** Hood Canal Shellfish Strategic Initiative, Hood Canal Regional Pollution and Identification Correction Program Phase 4

**Funding Sources:** Environmental Protection Agency (passed through) Washington State Department of Health

**CFDA Program Title:** Puget Sound Action Agenda: Technical Investigations and Implementation Assistance Program

**Funding Source Award Date:** Amendment 5 dated November 30, 2022

**Funding Source Number (Federal Award Identification No):** PC-01J18001-4

**Catalog of Federal Domestic Assistance No. (CFDA):** 66.123

**Note:** This award is not for R&D (research and development).

**Complete Cyber Certification (if contract involves Collecting and Managing Data in federal system).** N/A

HCCC will provide Consultant with Exhibit A-1 WA DOH Agreement CBO24134 subrecipient Statement of Work Programmatic Conditions.

In accordance with 40 CFR 33.106 and its Appendix A, the contractor shall not discriminate on the basis of race, color, national origin or sex in the performance of this contract. The contractor administration shall carry out application requirements of 40 CFR part 33 in the award of contract awarded under EPA financial assistance agreements. Failure by the contractor to carry out these requirements is a material breach of this contract which may result in the termination of this contract or other legally available remedies.

**If grant is over \$100,000 complete/sign restrictions on Lobbying Certification 40 CFR Part 34 (and disclosure if applicable):** N/A

## Certifications

### **Consultant DBE Program Reporting** (indicate as appropriate):

Owned and Managed as Disadvantaged Business: N/A

- Women Owned Business Enterprise
- Minority Owner Business Enterprise
- Veteran Owned Business Enterprise
- Community Based Organization

If certified by Washington State's Office of Minority and Women Owned Business Enterprise (OMWBE) [www.omwbe.wa.gov](http://www.omwbe.wa.gov) or Department of Veterans Affairs (DVA), enter the certification number: No active certifications

**WA Dept. of Revenue Account.** UBI/Excise tax account registered.

**WA Labor & Industries Account status or Exemption (if no employees):** (320,175-00) Account is current; Workers' Compensation Premium Account is Current.

**Debarment:** No debarments.

**Insurance (as applicable):** Renew during term of contract

- Commercial Auto Liability (if claiming mileage included in Exhibit A tasks, use HCCC Report)
- Commercial General Liability (naming HCCC as additional insured)
- Professional Liability Insurance
- Workers' Compensation and Employer Defense Insurance

**Notice:** The Hood Canal Coordinating Council as an equal opportunity employer will not discriminate on the basis of race, creed, color, national origin, ancestry, sex, marital status, gender, sexual orientation, age, maternity, and childbirth, honorably discharged veteran or military status, disability, genetics, HIV and/or Hepatitis C status, use of a trained guide dog or service animal by a person with a disability, or other protected class under federal, state or local law. Persons requiring reasonable accommodation or requiring any information in an alternative format may contact 360-394-0046. Inquiries about the HCCC's compliance may be directed to Scott Brewer, Executive Director.

New or Renewed Contracts for the Period of 04/01/2023 through 04/30/2023

KPHD Contract ID	KPHD Program	Contract Type	Contract Length	KPHB Approved	Contract Amount	Signed Date	Start Date	End Date	Client Contract ID
<b>Active (2 contracts)</b>									
<b>Kitsap County Jail</b>									
ID: 2324	Clinical Services, Kesley Stedman	MOU/MOA	Closed		\$0.00	04/10/23	04/02/23	03/31/24	KC-137-23
<i>Description: For the purpose of storing 1-3 doses of bicillin (for syphilis treatment) on-site at the jail. This would be bicillin we get through DOH via 340B pricing. DOH has told us what we need to do to stay in compliance.</i>									
ID: 2325	Clinical Services, Kelsey Stedman	MOU/MOA	Closed		\$0.00	04/24/23	04/02/23	03/31/24	KC-170-23
<i>Description: A pilot testing project where we will offer HIV/HCV/SYPH testing to incarcerated individuals. Gib will be ordering provider, we will go on-site to perform the testing, and work with the jail for treatment in people who test positive for any of these diseases.</i>									

**Kitsap Public Health Board Meeting**

**Date: June 06, 2023**

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

**Approvals:**

	Signature	Date
Administrator	<i>Keith Grillner</i>	5/30/2023
Finance Manager	<i>Melissa Laird</i>	5/30/2023

**Recommended Motion:** Approval

**Items:**

Type	Warrant/EFT Date	Total Amount
Accounts Payable	4/6/2023	\$ 42,899.05
Accounts Payable	4/13/2023	62,302.84
Accounts Payable	4/20/2023	19,978.49
Accounts Payable	4/27/2023	216,809.39
Vital Stats Transfer	4/20/2023	28,059.00
Accounts Payable Total		\$ 370,048.77
Payroll	4/30/2023	549,113.57
Payroll Taxes	4/28/2023	208,604.99
Payroll PERS Payment	4/14/2023	135,955.87
Payroll Total		\$ 893,674.43
<b>Grand Total</b>		<b>\$ 1,263,723.20</b>

**Kitsap Public Health Board Action:**

- Approve
- Deny
- Table / Continue

	Signature	Date
Kitsap Public Health Board Chair		



## View Settlement Run

Settlement Run Information	
<b>Settlement Run</b>	STL-00002059
<b>Name</b>	Kitsap Public Health District HH
<b>Number</b>	STL-00002059
<b>Status</b>	Complete
<b>Date</b>	04/06/2023
<b>Include Payments On Behalf Of</b>	No
<b>Exclude Negative Payments</b>	Yes
<b>Express Settlement</b>	No

Additional Information	
<b>Organization</b>	Kitsap Public Health District
<b>Currency</b>	USD
<b>Filters Used</b>	

Payment Information	
<b>Display Currency</b>	USD
<b>Outbound Total</b>	42,899.05
<b>Inbound Total</b>	0.00
<b>Expense Report Count</b>	13
<b>Miscellaneous Payment Request Count</b>	3
<b>Supplier Invoice Count</b>	14

Payment Groups									
Payment Groups									
View	Category	Bank Account	Payment Type	Date	Payments	Amount	Currency	Business Process	Status
Expense Payment(Check) for Kitsap County Claims Fund Warrant Account	Expense Payment	Kitsap County Claims Fund Warrant Account	Check	04/06/2023	1	85.81	USD	Print Checks: Kitsap County Claims Fund Warrant Account for Expense Payment (Check) on 04/06/2023	Successfully Completed
Expense Payment(Direct Deposit) for Treasurer's Main account	Expense Payment	Treasurer's Main account	Direct Deposit	04/06/2023	12	2,575.65	USD	Payment Message: ID 1614 for Kitsap Public Health District on 04/06/2023	Successfully Completed
Miscellaneous Payment(Check) for Kitsap County Claims Fund Warrant Account	Miscellaneous Payment	Kitsap County Claims Fund Warrant Account	Check	04/06/2023	3	950.00	USD	Print Checks: Kitsap County Claims Fund Warrant Account for Miscellaneous Payment (Check) on 04/06/2023	Successfully Completed



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View	Category	Bank Account	Payment Type	Date	Payments	Amount	Currency	Business Process	Status
Supplier Payment(Check) for Kitsap County Claims Fund Warrant Account	Supplier Payment	Kitsap County Claims Fund Warrant Account	Check	04/06/2023	9	30,045.34	USD	Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 04/06/2023	Successfully Completed
Supplier Payment(EFT) for Treasurer's Main account	Supplier Payment	Treasurer's Main account	EFT	04/06/2023	5	9,242.25	USD	Payment Message: ID 1613 for Kitsap Public Health District on 04/06/2023	Successfully Completed

## Expense Reports

Expense Report	Company	Pay To	Type	Document Number	Expense Report Date	Memo	Reimbursable Amount	Currency
Expense Report: EXP-0004937	Kitsap Public Health District	Xinia Ebbay (434566)	Employee	EXP-0004937	03/30/2023	Mileage 0228-031423, Supplies 022823	46.00	USD
Expense Report: EXP-0004938	Kitsap Public Health District	Kimberly Jones (358933)	Employee	EXP-0004938	03/30/2023	Mileage 0228-032423	100.87	USD
Expense Report: EXP-0004939	Kitsap Public Health District	Sarah Kinnear (434099)	Employee	EXP-0004939	03/30/2023	Mileage 031323	30.46	USD
Expense Report: EXP-0004940	Kitsap Public Health District	Siri Kushner (327580)	Employee	EXP-0004940	03/30/2023	Registration 0814-081523	325.00	USD
Expense Report: EXP-0004941	Kitsap Public Health District	Alexandra Moore (434254)	Employee	EXP-0004941	03/30/2023	Mileage 0215-032423	315.06	USD
Expense Report: EXP-0004942	Kitsap Public Health District	Sydney Perales (434396)	Employee	EXP-0004942	03/30/2023	Mileage 0307-031523	54.50	USD
Expense Report: EXP-0004943	Kitsap Public Health District	Alena Schroeder (434395)	Employee	EXP-0004943	03/30/2023	Mileage 0316-032323, KPHD Logowear	353.09	USD
Expense Report: EXP-0004947	Kitsap Public Health District	Nolan Simmons (434365)	Employee	EXP-0004947	03/30/2023	03/17-032023, Training 03/01/23	99.36	USD
Expense Report: EXP-0004948	Kitsap Public Health District	Tobbi Stewart (423168)	Employee	EXP-0004948	03/30/2023	Training & Supplies 032423	481.49	USD
Expense Report: EXP-0004949	Kitsap Public Health District	Layken Winchester (431493)	Employee	EXP-0004949	03/30/2023	Mileage 0306-031423	90.91	USD
Expense Report: EXP-0004966	Kitsap Public Health District	Paul Giuntoli (337331)	Employee	EXP-0004966	03/31/2023	Mileage 0315-032223	85.81	USD
Expense Report: EXP-0004967	Kitsap Public Health District	Rosalie Howarth (434500)	Employee	EXP-0004967	03/31/2023	Mileage 0322-032423	20.50	USD
Expense Report: EXP-0004970	Kitsap Public Health District	Harrison Forte (434150)	Employee	EXP-0004970	03/31/2023	MILEAGE 0103-032223	658.41	USD

## Miscellaneous Payment Requests

Miscellaneous Payment Request	Company	Payee	Document Number	Payment Type	Request Category	Document Date	Payment Amount	Currency
MPR-09179	Kitsap Public Health District	CHRISTOPHER RODRIGUES (Inactive)	MPR-09179	Check	POS Customer Refund	03/30/2023	40.00	USD



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Miscellaneous Payment Request	Company	Payee	Document Number	Payment Type	Request Category	Document Date	Payment Amount	Currency
MPR-09195	Kitsap Public Health District	MICHAEL SKINNER (Inactive)	MPR-09195	Check	POS Customer Refund	03/31/2023	710.00	USD
MPR-09196	Kitsap Public Health District	DANA DANUBIO (Inactive)	MPR-09196	Check	POS Customer Refund	03/31/2023	200.00	USD

## Supplier Invoices

Supplier Invoice	Company	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
Supplier Invoice: SINV-2023-64276	Kitsap Public Health District	American Water Works Assoc PacNW	DESEAMUS, D	American Water Works Assoc PacNW	Net 30	SINV-2023-64276	03/30/2023		04/29/2023	0.00	0.00	240.00	USD
Supplier Invoice: SINV-2023-64278	Kitsap Public Health District	Dell Marketing L.P.	INVOICE # 10660434142	Dell Marketing L.P.	Net 30	SINV-2023-64278	03/22/2023		04/21/2023	0.00	0.00	4,593.30	USD
Supplier Invoice: SINV-2023-64279	Kitsap Public Health District	FedEx	INVOICE # 8-078-75659/ ACCOUNT # 1888-3436-1	FedEx - Remit-To: PO Box 371461 Pittsburgh	Net 30	SINV-2023-64279	03/30/2023		04/29/2023	0.00	0.00	22.00	USD
Supplier Invoice: SINV-2023-64283	Kitsap Public Health District	Iron Mountain	Invoice # 202633953	Iron Mountain - Remit-To: PO Box 601002	Net 30	SINV-2023-64283	10/31/2022		11/30/2022	0.00	0.00	177.47	USD
Supplier Invoice: SINV-2023-64284	Kitsap Public Health District	Olympic Ambulance	Ride#22-244186, 22-245076, 22-242948	Olympic Ambulance - Remit-To: 609 NW Coast St	Net 30	SINV-2023-64284	03/30/2023		04/29/2023	0.00	0.00	870.00	USD
Supplier Invoice: SINV-2023-64286	Kitsap Public Health District	Quest Diagnostics	Invoice # T 1460543	Quest Diagnostics	Net 30	SINV-2023-64286	02/17/2023		03/19/2023	0.00	0.00	187.77	USD
Supplier Invoice: SINV-2023-64389	Kitsap Public Health District	Staples	Invoice # 3533170439	Staples - Remit-To: Staples	Net 30	SINV-2023-64389	03/16/2023		04/15/2023	0.00	0.00	277.34	USD
Supplier Invoice: SINV-2023-64391	Kitsap Public Health District	Stericycle Inc	Invoice # 3006386866/ Customer # 6029865	Stericycle Inc - Remit-To: Stericycle Inc	Net 30	SINV-2023-64391	03/31/2023		04/30/2023	0.00	0.00	523.37	USD
Supplier Invoice: SINV-2023-64393	Kitsap Public Health District	US Bank National Association	Acct# 4246-0445-5568-8591 (March 27th '23 Invoice)	US Bank National Association - Remit-To: US Bank Junior Dist's Only	Net 30	SINV-2023-64393	03/27/2023		04/26/2023	0.00	0.00	20,591.80	USD





View Settlement Run

Supplier Invoice	Company	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
Supplier Invoice: SINV-2023-64394	Kitsap Public Health District	United Business Machines Of Wa	Invoice # 492770	United Business Machines Of Wa	Net 30	SINV-2023-64394	03/27/2023		04/26/2023	0.00	0.00	1,218.61	USD
Supplier Invoice: SINV-2023-64395	Kitsap Public Health District	Washington State University	Invoice C10002866, C100029251	Washington State University	Net 30	SINV-2023-64395	03/31/2023		04/30/2023	0.00	0.00	6,608.27	USD
Supplier Invoice: SINV-2023-64400	Kitsap Public Health District	Wa State Dept Of Enterprise Services	Invoice # 71141528	Wa State Dept Of Enterprise Services - Remit-To: Seattle Po Box 84857	Net 30	SINV-2023-64400	03/23/2023		04/22/2023	0.00	0.00	385.00	USD
Supplier Invoice: SINV-2023-64407	Kitsap Public Health District	WA State Environmental Health Assoc	Membership-Simmons, Nolan	WA State Environmental Health Assoc	Net 30	SINV-2023-64407	03/31/2023		04/30/2023	0.00	0.00	50.00	USD
Supplier Invoice: SINV-2023-64423	Kitsap Public Health District	Village Reach	Invoice # 11010-002	Village Reach	Net 30	SINV-2023-64423	03/31/2023		04/30/2023	0.00	0.00	3,542.66	USD

Process History  
Settlement Run Process History

Process	Step	Status	Completed On	Due Date	Person (Up to 5)	All Persons	Comment
Settlement Run Event	Settlement Run Event	Step Completed	04/06/2023 10:15:56 AM		Heather Hunsaker (434069)	1	
Settlement Run Event	To Do: Settlement Run has Payment Handling Instruction	Not Required				0	
Settlement Run Event	To Do: AP Wire was Settled	Not Required				0	
Settlement Run Event	To Do: Wire Payment Settled	Not Required				0	

Related Business Processes History

Business Process	Status
Payment Message: ID 1613 for Kitsap Public Health District on 04/06/2023	Successfully Completed
Payment Message: ID 1614 for Kitsap Public Health District on 04/06/2023	Successfully Completed
Print Checks: Kitsap County Claims Fund Warrant Account for Miscellaneous Payment (Check) on 04/06/2023	Successfully Completed
Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 04/06/2023	Successfully Completed
Print Checks: Kitsap County Claims Fund Warrant Account for Expense Payment (Check) on 04/06/2023	Successfully Completed
Remittance File: For United Business Machines Of Wa on 04/06/2023	Successfully Completed
Remittance File: For Olympic Ambulance - Remit-To: 609 NW Coast St on 04/06/2023	Successfully Completed



### View Settlement Run

Business Process	Status
Remittance File: For Washington State University on 04/06/2023	Successfully Completed
Remittance File: For FedEx - Remit-To: PO Box 371461 Pittsburgh on 04/06/2023	Successfully Completed
Remittance File: For Stericycle Inc - Remit-To: Stericycle Inc on 04/06/2023	Successfully Completed

#### Background Processes

Created Date and Time	Started Date and Time	Process Type	Process	Request	Status	Total Processing Time	Submitted by	Errors & Warnings
04/06/2023 10:15 AM	04/06/2023 10:15 AM	Job	Settlement Run Complete	Settlement Run Complete for STL-00002059	Completed	00:00:06	Heather Hunsaker	



## View Settlement Run

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## Settlement Run Information

**Settlement Run** STL-00002080  
**Name** Kitsap Public Health District HH  
**Number** STL-00002080  
**Status** Complete  
**Date** 04/13/2023  
**Include Payments On Behalf Of** No  
**Exclude Negative Payments** Yes  
**Express Settlement** No

## Additional Information

**Organization** Kitsap Public Health District  
**Currency** USD  
**Filters Used**

## Payment Information

**Display Currency** USD  
**Outbound Total** 62,302.84  
**Inbound Total** 0.00  
**Expense Report Count** 10  
**Supplier Invoice Count** 15

## Payment Groups

## Payment Groups

View	Category	Bank Account	Payment Type	Date	Payments	Amount	Currency	Business Process	Status
Expense Payment(Direct Deposit) for Treasurer's Main account	Expense Payment	Treasurer's Main account	Direct Deposit	04/13/2023	10	2,029.59	USD	Payment Message: ID 1633 for Kitsap Public Health District on 04/13/2023	Successfully Completed
Supplier Payment(Check) for Kitsap County Claims Fund Warrant Account	Supplier Payment	Kitsap County Claims Fund Warrant Account	Check	04/13/2023	11	16,925.87	USD	Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 04/13/2023	Successfully Completed
Supplier Payment(EFT) for Treasurer's Main account	Supplier Payment	Treasurer's Main account	EFT	04/13/2023	2	43,347.38	USD	Payment Message: ID 1634 for Kitsap Public Health District on 04/13/2023	Successfully Completed

## Expense Reports



## View Settlement Run

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Expense Report	Company	Pay To	Type	Document Number	Expense Report Date	Memo	Reimbursable Amount	Currency
Expense Report: EXP-0005025	Kitsap Public Health District	Sam Ader (413193)	Employee	EXP-0005025	04/06/2023	Mileage 0201-032923	408.72	USD
Expense Report: EXP-0005026	Kitsap Public Health District	Jami Armstrong (434291)	Employee	EXP-0005026	04/06/2023	Mileage 0302-032823	99.17	USD
Expense Report: EXP-0005027	Kitsap Public Health District	Talia Humphrey (434383)	Employee	EXP-0005027	04/06/2023	Mileage 0201-031423	243.33	USD
Expense Report: EXP-0005028	Kitsap Public Health District	Thomas Jury (434709)	Employee	EXP-0005028	04/06/2023	Mileage 0315-033123	310.27	USD
Expense Report: EXP-0005029	Kitsap Public Health District	Brandon Kindschy (421430)	Employee	EXP-0005029	04/06/2023	Mileage 0306-033023	58.16	USD
Expense Report: EXP-0005030	Kitsap Public Health District	Ross Lytle (285038)	Employee	EXP-0005030	04/06/2023	Mileage 0321-032823	72.05	USD
Expense Report: EXP-0005031	Kitsap Public Health District	Crystal Nuno (405301)	Employee	EXP-0005031	04/06/2023	Mileage 0301-032223	611.12	USD
Expense Report: EXP-0005032	Kitsap Public Health District	Kayla Petersen (434695)	Employee	EXP-0005032	04/06/2023	Mileage 0302-032023	106.44	USD
Expense Report: EXP-0005033	Kitsap Public Health District	Nolan Simmons (434365)	Employee	EXP-0005033	04/06/2023	Mileage 0327-032823	80.96	USD
Expense Report: EXP-0005034	Kitsap Public Health District	Janet Wyatt (434415)	Employee	EXP-0005034	04/06/2023	Mileage 0215-022123	39.37	USD

## Supplier Invoices

Supplier Invoice	Company	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
Supplier Invoice: SINV-2023-62295	Kitsap Public Health District	Silverdale Home Associates	April 2023	Silverdale Home Associates	Net 30	SINV-2023-62295	03/15/2023		04/14/2023	0.00	0.00	1,214.00	USD
Supplier Invoice: SINV-2023-65035	Kitsap Public Health District	Comcast	8498 36 002 1685177- 8498 36 002 1644737 April 2023	Comcast - Remit-To: PO Box 60533	Net 30	SINV-2023-65035	04/06/2023		05/06/2023	0.00	0.00	846.29	USD
Supplier Invoice: SINV-2023-65036	Kitsap Public Health District	Jefferson County	February 2023 (Contract billing)	Jefferson County - Remit-To: Health/Human Svc	Net 30	SINV-2023-65036	04/01/2023		05/01/2023	0.00	0.00	42,417.38	USD
Supplier Invoice: SINV-2023-65038	Kitsap Public Health District	Teleguage LLC	TL320000922	Teleguage LLC	Net 30	SINV-2023-65038	04/01/2023		05/01/2023	0.00	0.00	320.10	USD
Supplier Invoice: SINV-2023-65039	Kitsap Public Health District	WA State Environmental Health Assoc	MOEN, ANNE-SPLIT PAYMENT	WA State Environmental Health Assoc	Net 30	SINV-2023-65039	04/01/2023		05/01/2023	0.00	0.00	270.00	USD



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Supplier Invoice	Company	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
Supplier Invoice: SINV-2023-65040	Kitsap Public Health District	Microsoft Corporation	INVOICE # E0600MT7DN	Microsoft Corporation - Remit-To: Microsoft Services Po Box 842103	Net 30	SINV-2023-65040	04/02/2023		05/02/2023	0.00	0.00	3,931.46	USD
Supplier Invoice: SINV-2023-65042	Kitsap Public Health District	WA State Environmental Health Assoc	INVOICE # 1124	WA State Environmental Health Assoc	Net 30	SINV-2023-65042	04/02/2023		05/02/2023	0.00	0.00	4,630.00	USD
Supplier Invoice: SINV-2023-65043	Kitsap Public Health District	Staples	INVOICE # 3534012934	Staples - Remit-To: Staples	Net 30	SINV-2023-65043	03/28/2023		04/27/2023	0.00	0.00	139.02	USD
Supplier Invoice: SINV-2023-65047	Kitsap Public Health District	Griffin Glen Apartments LLC	MAY 2023	Griffin Glen Apartments LLC	Net 30	SINV-2023-65047	04/06/2023		05/06/2023	0.00	0.00	1,260.00	USD
Supplier Invoice: SINV-2023-65048	Kitsap Public Health District	The Heights at Sheridan Road	MAY 2023	The Heights at Sheridan Road	Net 30	SINV-2023-65048	04/06/2023		05/06/2023	0.00	0.00	661.00	USD
Supplier Invoice: SINV-2023-65049	Kitsap Public Health District	Indigo Apartments	MAY 2023	Indigo Apartments	Net 30	SINV-2023-65049	04/06/2023		05/06/2023	0.00	0.00	1,100.00	USD
Supplier Invoice: SINV-2023-65050	Kitsap Public Health District	Kania, Sharon Faye	MAY 2023	Kania, Sharon Faye	Net 30	SINV-2023-65050	04/06/2023		05/06/2023	0.00	0.00	635.00	USD
Supplier Invoice: SINV-2023-65051	Kitsap Public Health District	Silverdale Home Associates	May 2023	Silverdale Home Associates	Net 30	SINV-2023-65051	04/06/2023		05/06/2023	0.00	0.00	1,214.00	USD
Supplier Invoice: SINV-2023-65053	Kitsap Public Health District	Washington Home Solutions	MAY 2023	Washington Home Solutions	Net 30	SINV-2023-65053	04/06/2023		05/06/2023	0.00	0.00	705.00	USD
Supplier Invoice: SINV-2023-65054	Kitsap Public Health District	David Turnquist	MAY 2023	David Turnquist	Net 30	SINV-2023-65054	04/06/2023		05/06/2023	0.00	0.00	930.00	USD

Process History  
Settlement Run Process History



### View Settlement Run

Process	Step	Status	Completed On	Due Date	Person (Up to 5)	All Persons	Comment
Settlement Run Event	Settlement Run Event	Step Completed	04/13/2023 09:30:38 AM		Heather Hunsaker (434069)	1	
Settlement Run Event	To Do: Settlement Run has Payment Handling Instruction	Not Required				0	
Settlement Run Event	To Do: AP Wire was Settled	Not Required				0	
Settlement Run Event	To Do: Wire Payment Settled	Not Required				0	

**Related Business Processes History**

Business Process	Status
Payment Message: ID 1634 for Kitsap Public Health District on 04/13/2023	Successfully Completed
Payment Message: ID 1633 for Kitsap Public Health District on 04/13/2023	Successfully Completed
Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 04/13/2023	Successfully Completed
Remittance File: For Jefferson County - Remit-To: Health/Human Svc on 04/13/2023	Successfully Completed
Remittance File: For David Turnquist on 04/13/2023	Successfully Completed

**Background Processes**

Created Date and Time	Started Date and Time	Process Type	Process	Request	Status	Total Processing Time	Submitted by	Errors & Warnings
04/13/2023 09:30 AM	04/13/2023 09:30 AM	Job	Settlement Run Complete	Settlement Run Complete for STL-00002080	Completed	00:00:06	Heather Hunsaker	



## View Settlement Run

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## Settlement Run Information

**Settlement Run** STL-00002104  
**Name** Kitsap Public Health District HH  
**Number** STL-00002104  
**Status** Complete  
**Date** 04/20/2023  
**Include Payments On Behalf Of** No  
**Exclude Negative Payments** Yes  
**Express Settlement** No

## Additional Information

**Organization** Kitsap Public Health District  
**Currency** USD  
**Filters Used**

## Payment Information

**Display Currency** USD  
**Outbound Total** 19,978.49  
**Inbound Total** 0.00  
**Expense Report Count** 13  
**Supplier Invoice Count** 18

## Payment Groups

## Payment Groups

View	Category	Bank Account	Payment Type	Date	Payments	Amount	Currency	Business Process	Status
Expense Payment(Check) for Kitsap County Claims Fund Warrant Account	Expense Payment	Kitsap County Claims Fund Warrant Account	Check	04/20/2023	1	131.66	USD	Print Checks: Kitsap County Claims Fund Warrant Account for Expense Payment (Check) on 04/20/2023	Successfully Completed
Expense Payment(Direct Deposit) for Treasurer's Main account	Expense Payment	Treasurer's Main account	Direct Deposit	04/20/2023	12	2,203.27	USD	Payment Message: ID 1654 for Kitsap Public Health District on 04/20/2023	Successfully Completed
Supplier Payment(Check) for Kitsap County Claims Fund Warrant Account	Supplier Payment	Kitsap County Claims Fund Warrant Account	Check	04/20/2023	13	13,623.66	USD	Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 04/20/2023	Successfully Completed



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View	Category	Bank Account	Payment Type	Date	Payments	Amount	Currency	Business Process	Status
Supplier Payment(EFT) for Treasurer's Main account	Supplier Payment	Treasurer's Main account	EFT	04/20/2023	3	4,019.90	USD	Payment Message: ID 1655 for Kitsap Public Health District on 04/20/2023	Successfully Completed

## Expense Reports

Expense Report	Company	Pay To	Type	Document Number	Expense Report Date	Memo	Reimbursable Amount	Currency
Expense Report: EXP-0005075	Kitsap Public Health District	Sam Ader (413193)	Employee	EXP-0005075	04/12/2023	2023 Insp. License, RS Renewal	246.00	USD
Expense Report: EXP-0005076	Kitsap Public Health District	Rudy Baum (434397)	Employee	EXP-0005076	04/12/2023	Mileage 0227-03312023	251.45	USD
Expense Report: EXP-0005077	Kitsap Public Health District	Brian Burchett (409212)	Employee	EXP-0005077	04/12/2023	Mileage 0131-033123, On-Site exam fee	493.99	USD
Expense Report: EXP-0005078	Kitsap Public Health District	George Fine (421693)	Employee	EXP-0005078	04/12/2023	Mileage 0202-03102023	32.23	USD
Expense Report: EXP-0005079	Kitsap Public Health District	Paul Giuntoli (337331)	Employee	EXP-0005079	04/12/2023	Mileage 0323-04072023	131.66	USD
Expense Report: EXP-0005080	Kitsap Public Health District	Yaneisy Griego (410072)	Employee	EXP-0005080	04/12/2023	Mileage 0308-03302023	73.36	USD
Expense Report: EXP-0005081	Kitsap Public Health District	Jakob Hughes (434256)	Employee	EXP-0005081	04/12/2023	Mileage 0310-03312023	232.46	USD
Expense Report: EXP-0005082	Kitsap Public Health District	Victoria Lehto (Terminated) (434317)	Employee	EXP-0005082	04/12/2023	Mileage 0302-03312023	166.44	USD
Expense Report: EXP-0005083	Kitsap Public Health District	Loan Nguyen (295033)	Employee	EXP-0005083	04/12/2023	KPHD Logowear	50.00	USD
Expense Report: EXP-0005084	Kitsap Public Health District	Tameka Phelps (434295)	Employee	EXP-0005084	04/12/2023	Mileage 0314-032823,, KPHD Logowear	116.18	USD
Expense Report: EXP-0005085	Kitsap Public Health District	Talia Humphrey (434383)	Employee	EXP-0005085	04/12/2023	Mileage 0301-03312023	330.25	USD
Expense Report: EXP-0005086	Kitsap Public Health District	Tobbi Stewart (423168)	Employee	EXP-0005086	04/12/2023	Mileage 0302-032723	32.75	USD
Expense Report: EXP-0005087	Kitsap Public Health District	Laura Westervelt (434382)	Employee	EXP-0005087	04/12/2023	MILEAGE 0303-032123	178.16	USD

## Supplier Invoices

Supplier Invoice	Company	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
Supplier Invoice: SINV-2023-65864	Kitsap Public Health District	A.W. Rehn & Associates, Inc	Invoice # 12397	A.W. Rehn & Associates, Inc	Net 30	SINV-2023-65864	04/05/2023		05/05/2023	0.00	0.00	80.75	USD





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Supplier Invoice	Company	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
Supplier Invoice: SINV-2023-65867	Kitsap Public Health District	Acranet Cbs Branch	Invoice # 22881	Acranet Cbs Branch	Net 30	SINV-2023-65867	04/13/2023		05/13/2023	0.00	0.00	115.75	USD
Supplier Invoice: SINV-2023-65870	Kitsap Public Health District	City of Bremerton	Invoice # BKAT000743	City of Bremerton - Remit-To: Finance Dept BKAT	Net 30	SINV-2023-65870	04/03/2023		05/03/2023	0.00	0.00	487.83	USD
Supplier Invoice: SINV-2023-65877	Kitsap Public Health District	Comcast	Acct# 8498 36 002 0701975 (APRIL 2023)	Comcast - Remit-To: PO Box 60533	Net 30	SINV-2023-65877	04/10/2023		05/10/2023	0.00	0.00	257.90	USD
Supplier Invoice: SINV-2023-65878	Kitsap Public Health District	Dell Marketing L.P.	Invoice # 10662886936	Dell Marketing L.P.	Net 30	SINV-2023-65878	04/01/2023		05/01/2023	0.00	0.00	1,434.03	USD
Supplier Invoice: SINV-2023-65879	Kitsap Public Health District	Griffen Caldwell, Inc	May 2023	Griffen Caldwell, Inc	Net 30	SINV-2023-65879	04/06/2023		05/06/2023	0.00	0.00	1,060.00	USD
Supplier Invoice: SINV-2023-65880	Kitsap Public Health District	Kitsap County	January-February 2023	Kitsap County - Remit-To: KC Human Services	Net 30	SINV-2023-65880	04/13/2023		05/13/2023	0.00	0.00	4,696.30	USD
Supplier Invoice: SINV-2023-65886	Kitsap Public Health District	Mckesson Medical Surgical	Invoice # 20511043/2064678	Mckesson Medical Surgical	Net 30	SINV-2023-65886	04/13/2023		05/13/2023	0.00	0.00	1,077.90	USD
Supplier Invoice: SINV-2023-65888	Kitsap Public Health District	Mckesson Medical Surgical	Invoice # 20408531	Mckesson Medical Surgical	Net 30	SINV-2023-65888	04/01/2023		05/01/2023	0.00	0.00	1,645.29	USD
Supplier Invoice: SINV-2023-65889	Kitsap Public Health District	ODP Business Solutions, LLC	Invoice # 305211378001	ODP Business Solutions, LLC	Net 30	SINV-2023-65889	04/13/2023		05/13/2023	0.00	0.00	87.44	USD
Supplier Invoice: SINV-2023-65891	Kitsap Public Health District	Telelanguage LLC	Invoice # 0310070123	Telelanguage LLC	Net 30	SINV-2023-65891	04/13/2023		05/13/2023	0.00	0.00	511.50	USD
Supplier Invoice: SINV-2023-65892	Kitsap Public Health District	Paul Simmons	May 2023	Paul Simmons	Net 30	SINV-2023-65892	04/13/2023		05/13/2023	0.00	0.00	900.00	USD



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Supplier Invoice	Company	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
Supplier Invoice: SINV-2023-65893	Kitsap Public Health District	Staples	Invoice # 3535338876	Staples - Remit-To: Staples	Net 30	SINV-2023-65893	04/13/2023		05/13/2023	0.00	0.00	457.13	USD
Supplier Invoice: SINV-2023-65895	Kitsap Public Health District	Staples	Invoice # 353145867	Staples - Remit-To: Staples	Net 30	SINV-2023-65895	04/13/2023		05/13/2023	0.00	0.00	415.71	USD
Supplier Invoice: SINV-2023-65898	Kitsap Public Health District	United Business Machines Of Wa	Invoice # 493108	United Business Machines Of Wa	Net 30	SINV-2023-65898	04/13/2023		05/13/2023	0.00	0.00	598.68	USD
Supplier Invoice: SINV-2023-65903	Kitsap Public Health District	Washington State University	Invoice # C100030440	Washington State University	Net 30	SINV-2023-65903	04/13/2023		05/13/2023	0.00	0.00	3,305.47	USD
Supplier Invoice: SINV-2023-65904	Kitsap Public Health District	Wex Bank	Invoice # 88439387	Wex Bank	Net 30	SINV-2023-65904	04/13/2023		05/13/2023	0.00	0.00	499.89	USD
Supplier Invoice: SINV-2023-65948	Kitsap Public Health District	Lingo	Inv# 33309426	Lingo - Remit-To: PO Box 660344	Net 30	SINV-2023-65948	04/11/2023		05/11/2023	0.00	0.00	11.99	USD

Process History  
Settlement Run Process History

Process	Step	Status	Completed On	Due Date	Person (Up to 5)	All Persons	Comment
Settlement Run Event	Settlement Run Event	Step Completed	04/20/2023 09:49:25 AM		Heather Hunsaker (434069)	1	
Settlement Run Event	To Do: Settlement Run has Payment Handling Instruction	Not Required				0	
Settlement Run Event	To Do: AP Wire was Settled	Not Required				0	
Settlement Run Event	To Do: Wire Payment Settled	Not Required				0	

Related Business Processes History

Business Process	Status
Payment Message: ID 1654 for Kitsap Public Health District on 04/20/2023	Successfully Completed
Payment Message: ID 1655 for Kitsap Public Health District on 04/20/2023	Successfully Completed
Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 04/20/2023	Successfully Completed
Print Checks: Kitsap County Claims Fund Warrant Account for Expense Payment (Check) on 04/20/2023	Successfully Completed



## View Settlement Run

Business Process	Status
Remittance File: For Acranet Cbs Branch on 04/20/2023	Successfully Completed
Remittance File: For United Business Machines Of Wa on 04/20/2023	Successfully Completed
Remittance File: For Washington State University on 04/20/2023	Successfully Completed

### Background Processes

Created Date and Time	Started Date and Time	Process Type	Process	Request	Status	Total Processing Time	Submitted by	Errors & Warnings
04/20/2023 09:49 AM	04/20/2023 09:49 AM	Job	Settlement Run Complete	Settlement Run Complete for STL-00002104	Completed	00:00:06	Heather Hunsaker	



View Settlement Run

<b>Settlement Run Information</b>	
<b>Settlement Run</b>	STL-00002129
<b>Name</b>	Kitsap Public Health District HH
<b>Number</b>	STL-00002129
<b>Status</b>	Complete
<b>Date</b>	04/27/2023
<b>Include Payments On Behalf Of</b>	No
<b>Exclude Negative Payments</b>	Yes
<b>Express Settlement</b>	No

<b>Additional Information</b>	
<b>Organization</b>	Kitsap Public Health District
<b>Currency</b>	USD
<b>Filters Used</b>	

<b>Payment Information</b>	
<b>Display Currency</b>	USD
<b>Outbound Total</b>	216,809.39
<b>Inbound Total</b>	0.00
<b>Expense Report Count</b>	16
<b>Supplier Invoice Count</b>	36

<b>Payment Groups</b>									
<b>Payment Groups</b>									
View	Category	Bank Account	Payment Type	Date	Payments	Amount	Currency	Business Process	Status
Expense Payment(Check) for Kitsap County Claims Fund Warrant Account	Expense Payment	Kitsap County Claims Fund Warrant Account	Check	04/27/2023	1	11.00	USD	Print Checks: Kitsap County Claims Fund Warrant Account for Expense Payment (Check) on 04/27/2023	Successfully Completed
Expense Payment(Direct Deposit) for Treasurer's Main account	Expense Payment	Treasurer's Main account	Direct Deposit	04/27/2023	15	2,504.89	USD	Payment Message: ID 1674 for Kitsap Public Health District on 04/27/2023	Successfully Completed
Supplier Payment(Check) for Kitsap County Claims Fund Warrant Account	Supplier Payment	Kitsap County Claims Fund Warrant Account	Check	04/27/2023	31	208,245.57	USD	Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 04/27/2023	Successfully Completed



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View	Category	Bank Account	Payment Type	Date	Payments	Amount	Currency	Business Process	Status
Supplier Payment(EFT) for Treasurer's Main account	Supplier Payment	Treasurer's Main account	EFT	04/27/2023	3	6,047.93	USD	Payment Message: ID 1673 for Kitsap Public Health District on 04/27/2023	Successfully Completed

## Expense Reports

Expense Report	Company	Pay To	Type	Document Number	Expense Report Date	Memo	Reimbursable Amount	Currency
Expense Report: EXP-0005124	Kitsap Public Health District	Richard Bazzell (328436)	Employee	EXP-0005124	04/19/2023	Mileage 0315-032923	244.32	USD
Expense Report: EXP-0005125	Kitsap Public Health District	Dana Bierman (404611)	Employee	EXP-0005125	04/19/2023	Mileage 0329-033023	98.19	USD
Expense Report: EXP-0005126	Kitsap Public Health District	Christine Bronder (434436)	Employee	EXP-0005126	04/19/2023	Mileage 0301-032923	276.41	USD
Expense Report: EXP-0005127	Kitsap Public Health District	Anne Burns (434416)	Employee	EXP-0005127	04/19/2023	Mileage 0322-040423	61.31	USD
Expense Report: EXP-0005128	Kitsap Public Health District	Dara Deseamus (434593)	Employee	EXP-0005128	04/19/2023	Mileage 0314-040623	290.49	USD
Expense Report: EXP-0005129	Kitsap Public Health District	Xinia Ebbay (434566)	Employee	EXP-0005129	04/19/2023	Mileage 0321-041023, Supplies 041123	80.81	USD
Expense Report: EXP-0005130	Kitsap Public Health District	Melissa Laird (416539)	Employee	EXP-0005130	04/19/2023	MRSC Basic Training	140.00	USD
Expense Report: EXP-0005131	Kitsap Public Health District	Ross Lytle (285038)	Employee	EXP-0005131	04/19/2023	Mileage 0329-041123,/ NEHA Membership	205.46	USD
Expense Report: EXP-0005132	Kitsap Public Health District	Paul Giuntoli (337331)	Employee	EXP-0005132	04/19/2023	Tolls 30123 & 031523	11.00	USD
Expense Report: EXP-0005133	Kitsap Public Health District	Rosalie Howarth (434500)	Employee	EXP-0005133	04/19/2023	Mileage 0327-041223	40.28	USD
Expense Report: EXP-0005134	Kitsap Public Health District	Nolan Simmons (434365)	Employee	EXP-0005134	04/19/2023	Mileage 0329-041423	182.68	USD
Expense Report: EXP-0005135	Kitsap Public Health District	Kelsey Stedman (347366)	Employee	EXP-0005135	04/19/2023	Supplies 0315-032923	257.97	USD
Expense Report: EXP-0005136	Kitsap Public Health District	Susan Van Ort (392243)	Employee	EXP-0005136	04/19/2023	Mileage 0303-033023	383.18	USD
Expense Report: EXP-0005137	Kitsap Public Health District	Lisa Warren (434273)	Employee	EXP-0005137	04/19/2023	Mileage 0126-0031523	126.15	USD
Expense Report: EXP-0005138	Kitsap Public Health District	Erica White (434641)	Employee	EXP-0005138	04/19/2023	Mileage 0407-041023	32.36	USD
Expense Report: EXP-0005139	Kitsap Public Health District	Layken Winchester (431493)	Employee	EXP-0005139	04/19/2023	Mileage 0317-040923	85.28	USD

## Supplier Invoices



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Supplier Invoice	Company	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
Supplier Invoice: SINV-2023-66654	Kitsap Public Health District	Blue Sky Printing	Invoice 13007/ 13123	Blue Sky Printing	Net 30	SINV-2023-66654	04/12/2023		05/12/2023	0.00	0.00	563.90	USD
Supplier Invoice: SINV-2023-66655	Kitsap Public Health District	Dell Marketing L.P.	Invoice# 10664309372	Dell Marketing L.P.	Net 30	SINV-2023-66655	04/08/2023		05/08/2023	0.00	0.00	1,434.03	USD
Supplier Invoice: SINV-2023-66656	Kitsap Public Health District	FedEx	Invoice # 8-092-90424/ Acct# 1888-3436-1	FedEx - Remit-To: PO Box 371461 Pittsburgh	Net 30	SINV-2023-66656	04/07/2023		05/07/2023	0.00	0.00	10.98	USD
Supplier Invoice: SINV-2023-66657	Kitsap Public Health District	Allison Hicks	Service Month: April 2023	Allison Hicks	Net 30	SINV-2023-66657	04/04/2023		05/04/2023	0.00	0.00	1,000.00	USD
Supplier Invoice: SINV-2023-66658	Kitsap Public Health District	Kitsap County	Account# 33777101	Kitsap County - Remit-To: KC Public Works Sewer Payments	Net 30	SINV-2023-66658	04/19/2023		05/19/2023	0.00	0.00	378.67	USD
Supplier Invoice: SINV-2023-66659	Kitsap Public Health District	Laboratory Corporation of America	Invoice # 76159761	Laboratory Corporation of America	Net 30	SINV-2023-66659	04/01/2023		05/01/2023	0.00	0.00	198.45	USD
Supplier Invoice: SINV-2023-66660	Kitsap Public Health District	Loomis	Invoice # 13214018	Loomis - Remit-To: Palatine, IL	Net 30	SINV-2023-66660	04/01/2023		05/01/2023	0.00	0.00	582.00	USD
Supplier Invoice: SINV-2023-66661	Kitsap Public Health District	Manchester Water District (Wtr Paymts)	Acct# 2503	Manchester Water District (Wtr Paymts)	Net 30	SINV-2023-66661	04/14/2023		05/14/2023	0.00	0.00	301.27	USD
Supplier Invoice: SINV-2023-66662	Kitsap Public Health District	Pacific Printing, Inc.	Invoice # 27890	Pacific Printing, Inc.	Net 30	SINV-2023-66662	04/01/2023		05/01/2023	0.00	0.00	211.85	USD
Supplier Invoice: SINV-2023-66663	Kitsap Public Health District	Puget Sound Energy	Account # 220010983959	Puget Sound Energy	Net 30	SINV-2023-66663	04/19/2023		05/19/2023	0.00	0.00	181.28	USD
Supplier Invoice: SINV-2023-66664	Kitsap Public Health District	Quest Diagnostics	Invoice T1463606	Quest Diagnostics	Net 30	SINV-2023-66664	04/01/2023		05/01/2023	0.00	0.00	187.77	USD



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Supplier Invoice	Company	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
Supplier Invoice: SINV-2023-66665	Kitsap Public Health District	Quill Corporation	Invoice # 31792152	Quill Corporation	Net 30	SINV-2023-66665	04/05/2023		05/05/2023	0.00	0.00	215.07	USD
Supplier Invoice: SINV-2023-66666	Kitsap Public Health District	Spectra Laboratories - Kitsap, LLC	Mar 01-Mar 31,2023	Spectra Laboratories - Kitsap, LLC - Remit-To: 2221 Ross Way Tacoma	Net 30	SINV-2023-66666	04/01/2023		05/01/2023	0.00	0.00	5,825.10	USD
Supplier Invoice: SINV-2023-66667	Kitsap Public Health District	Staples	Invoice # 3535472986	Staples - Remit-To: Staples	Net 30	SINV-2023-66667	04/19/2023		05/19/2023	0.00	0.00	555.81	USD
Supplier Invoice: SINV-2023-66668	Kitsap Public Health District	Staples	Invoice # 3535606190	Staples - Remit-To: Staples	Net 30	SINV-2023-66668	04/19/2023		05/19/2023	0.00	0.00	143.60	USD
Supplier Invoice: SINV-2023-66669	Kitsap Public Health District	Stericycle Inc	Invoice # 8003620251	Stericycle Inc - Remit-To: Shred-It C/O Stericycle Inc	Net 30	SINV-2023-66669	04/01/2023		05/01/2023	0.00	0.00	201.58	USD
Supplier Invoice: SINV-2023-66670	Kitsap Public Health District	Toyota Financial Services	Account # 03-0322-CU922/ APRIL 2023	Toyota Financial Services	Net 30	SINV-2023-66670	04/19/2023		05/19/2023	0.00	0.00	460.71	USD
Supplier Invoice: SINV-2023-66672	Kitsap Public Health District	Verizon Wireless	INVOICE # 9932298067	Verizon Wireless - Remit-To: Treasurer - PO Box 660108	Net 30	SINV-2023-66672	04/10/2023		05/10/2023	0.00	0.00	6,263.56	USD
Supplier Invoice: SINV-2023-66673	Kitsap Public Health District	Wash State Dept Of Retirement	Invoice # 1556493/ OASI 2022 Tax Year	Wash State Dept Of Retirement	Net 30	SINV-2023-66673	04/04/2023		05/04/2023	0.00	0.00	50.38	USD
Supplier Invoice: SINV-2023-66674	Kitsap Public Health District	WA State Dept of Revenue	1st Qtr 2023- Use Tax	WA State Dept of Revenue - Remit-To: General PO Box 47464	Net 30	SINV-2023-66674	04/19/2023		05/19/2023	0.00	0.00	574.81	USD
Supplier Invoice: SINV-2023-66675	Kitsap Public Health District	Uptown Auto Body Rebuild Inc.	Voucher # 2021-2023.1/ April 2023	Uptown Auto Body Rebuild Inc.	Net 30	SINV-2023-66675	04/17/2023		05/17/2023	0.00	0.00	366.65	USD
Supplier Invoice: SINV-2023-66867	Kitsap Public Health District	American Family Life Assurance Company	PAYROLL BENEFITS APRIL 2023	American Family Life Assurance Company	Net 30	SINV-2023-66867	04/27/2023		05/27/2023	0.00	0.00	2,485.38	USD



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Supplier Invoice	Company	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
Supplier Invoice: SINV-2023-66868	Kitsap Public Health District	WA State Employment Security	PAYROLL BENEFITS APRIL 2023	WA State Employment Security	Net 30	SINV-2023-66868	04/27/2023		05/27/2023	0.00	0.00	6,423.84	USD
Supplier Invoice: SINV-2023-66870	Kitsap Public Health District	Health Equity	PAYROLL BENEFITS APRIL 2023	Health Equity	Net 30	SINV-2023-66870	04/27/2023		05/27/2023	0.00	0.00	1,060.00	USD
Supplier Invoice: SINV-2023-66871	Kitsap Public Health District	Hra Veba Trust	PAYROLL BENEFITS APRIL 2023	Hra Veba Trust	Net 30	SINV-2023-66871	04/27/2023		05/27/2023	0.00	0.00	8,390.43	USD
Supplier Invoice: SINV-2023-66872	Kitsap Public Health District	Nationwide Retirement Solutions	PAYROLL BENEFITS APRIL 2023	Nationwide Retirement Solutions	Net 30	SINV-2023-66872	04/21/2023		05/21/2023	0.00	0.00	6,570.00	USD
Supplier Invoice: SINV-2023-66873	Kitsap Public Health District	A.W. Rehn & Associates, Inc	PAYROLL BENEFITS APRIL 2023 (PARKING))	A.W. Rehn & Associates, Inc	Net 30	SINV-2023-66873	04/27/2023		05/27/2023	0.00	0.00	852.00	USD
Supplier Invoice: SINV-2023-66874	Kitsap Public Health District	A.W. Rehn & Associates, Inc	PAYROLL BENEFITS APRIL 2023 (DCFSA)	A.W. Rehn & Associates, Inc	Net 30	SINV-2023-66874	04/27/2023		05/27/2023	0.00	0.00	225.00	USD
Supplier Invoice: SINV-2023-66879	Kitsap Public Health District	Prof & Technical Eng XPH	PAYROLL BENEFITS APRIL 2023	Prof & Technical Eng XPH - Remit-To: Local Union 17	Net 30	SINV-2023-66879	04/27/2023		05/27/2023	0.00	0.00	3,655.82	USD
Supplier Invoice: SINV-2023-66880	Kitsap Public Health District	Prof & Technical Eng XPH	PAYROLL BENEFITS APRIL 2023 *	Prof & Technical Eng XPH - Remit-To: Local 17 Union/PAC	Net 30	SINV-2023-66880	04/27/2023		05/27/2023	0.00	0.00	31.00	USD
Supplier Invoice: SINV-2023-66882	Kitsap Public Health District	Voya Institutional Trust Company	PAYROLL BENEFITS APRIL 2023	Voya Institutional Trust Company - Remit-To: Voya Institutional Trust Co (South Kitsap Fire Payroll)	Net 30	SINV-2023-66882	04/27/2023		05/27/2023	0.00	0.00	375.00	USD
Supplier Invoice: SINV-2023-66884	Kitsap Public Health District	WA State Dept of Labor & Industries	PAYROLL BENEFITS APRIL 2023	WA State Dept of Labor & Industries - Remit-To: Industrial Insurance Po Box 34022	Net 30	SINV-2023-66884	04/27/2023		05/27/2023	0.00	0.00	5,320.70	USD





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Supplier Invoice	Company	Supplier	Supplier's Invoice Number	Payee	Payment Terms	Document Number	Invoice Date	Discount Date	Due Date	Discount Taken	Withheld Tax Amount	Amount to Pay	Currency
Supplier Invoice: SINV-2023-66892	Kitsap Public Health District	Wash State Dept Of Retirement	PAYROLL BENEFITS APRIL 2023	Wash State Dept Of Retirement	Net 30	SINV-2023-66892	04/27/2023		05/27/2023	0.00	0.00	14,964.76	USD
Supplier Invoice: SINV-2023-66894	Kitsap Public Health District	Wa Health Care Authority - Uniform	PAYROLL BENEFITS APRIL 2023	Wa Health Care Authority - Uniform	Net 30	SINV-2023-66894	04/27/2023		05/27/2023	0.00	0.00	127,322.90	USD
Supplier Invoice: SINV-2023-66895	Kitsap Public Health District	Vimly Benefit Solutions Inc	PAYROLL BENEFITS APRIL 2023	Vimly Benefit Solutions Inc	Net 30	SINV-2023-66895	04/27/2023		05/27/2023	0.00	0.00	5,701.76	USD
Supplier Invoice: SINV-2023-66896	Kitsap Public Health District	Whit-Delta Dental Of Washington	PAYROLL BENEFITS APRIL 2023	Whit-Delta Dental Of Washington	Net 30	SINV-2023-66896	04/27/2023		05/27/2023	0.00	0.00	11,207.44	USD

Process History  
Settlement Run Process History

Process	Step	Status	Completed On	Due Date	Person (Up to 5)	All Persons	Comment
Settlement Run Event	Settlement Run Event	Step Completed	04/27/2023 09:23:55 AM		Heather Hunsaker (434069)	1	
Settlement Run Event	To Do: Settlement Run has Payment Handling Instruction	Not Required				0	
Settlement Run Event	To Do: AP Wire was Settled	Not Required				0	
Settlement Run Event	To Do: Wire Payment Settled	Not Required				0	

Related Business Processes History

Business Process	Status
Payment Message: ID 1674 for Kitsap Public Health District on 04/27/2023	Successfully Completed
Payment Message: ID 1673 for Kitsap Public Health District on 04/27/2023	Successfully Completed
Print Checks: Kitsap County Claims Fund Warrant Account for Supplier Payment (Check) on 04/27/2023	Successfully Completed
Print Checks: Kitsap County Claims Fund Warrant Account for Expense Payment (Check) on 04/27/2023	Successfully Completed
Remittance File: For Spectra Laboratories - Kitsap, LLC - Remit-To: 2221 Ross Way Tacoma on 04/27/2023	Successfully Completed
Remittance File: For FedEx - Remit-To: PO Box 371461 Pittsburgh on 04/27/2023	Successfully Completed
Remittance File: For Pacific Printing, Inc. on 04/27/2023	Successfully Completed

Background Processes



## View Settlement Run

Created Date and Time	Started Date and Time	Process Type	Process	Request	Status	Total Processing Time	Submitted by	Errors & Warnings
04/27/2023 09:23 AM	04/27/2023 09:23 AM	Job	Settlement Run Complete	Settlement Run Complete for STL-00002129	Completed	00:00:07	Heather Hunsaker	

**TREAS RPT - Detail Cash Report - Cash**

5/3/2023

Treasurer's Detail Report

For 2023 - Apr

**Fund: FD00969 Kitsap Public Health General**

<u>Ledger Account</u>	<u>Revenue or Spend Category</u>	<u>Journal</u>	<u>Posting Date</u>	<u>Debit</u>	<u>Credit</u>	<u>Balance</u>
	3860 - Agency Deposits	JE-00032798 - Kitsap Public Health District - 04/20/2023 - Public Health monthly vital stats transfer	4/20/2023	0.00	28,059.00	-28,059.00
<b>3800:Other Increases in Fu</b>						

-28,059.00

Kitsap Public Health District -  
04/01/2023 - 04/30/2023

Name	Hours	Gross Pay	Net Pay
Abazi (427227) Ornela	173.33	\$5,711.00	\$4,277.21
Abney (4563) Beverly	173.33	\$5,493.00	\$3,775.41
Acosta (278956) Nancy	173.33	\$9,453.00	\$5,872.11
Ader (413193) Sam	173.33	\$5,818.00	\$3,959.07
Ahlin (434420) Zachary	173.33	\$5,125.36	\$3,869.85
Anderson (419470) Amy	173.33	\$6,827.00	\$4,516.66
Archer (434384) James	173.33	\$4,311.00	\$3,262.88
Arias (433900) Jordan	48.43	\$1,720.72	\$1,522.42
Armstrong (434291) Jami	173.33	\$5,978.00	\$4,235.10
Atisme-Bevins (433909)		\$0.00	\$0.00
Banigan (215189) Leslie	173.33	\$7,464.00	\$5,378.01
Baum (434397) Rudy	173.33	\$5,614.44	\$4,130.54
Bazzell (328436) Richard	173.33	\$7,464.00	\$5,249.91
Begin (434753) Michael	59.25	\$2,087.97	\$1,679.78
Bell (419805) Gus	160.49	\$7,168.51	\$4,915.14
Berger (407902) Angeline	173.33	\$5,866.00	\$4,186.28
Bierman (404611) Dana	156.00	\$8,103.00	\$5,955.98
Borja (426250) Windie	173.33	\$5,986.00	\$4,394.46
Boysen-Knapp (2058)	156.00	\$6,144.00	\$4,072.39
Bronder (434436) Christine	173.33	\$4,787.00	\$3,644.30
Brown (271677) Steven	173.33	\$9,453.00	\$5,635.94
Burchett (409212) Brian	173.33	\$5,541.00	\$4,071.82
Burke (434463) Lenore	173.33	\$4,495.00	\$3,235.41
Burns (434416) Anne	141.48	\$6,042.45	\$4,484.73
Burton (434296) Callie	173.58	\$4,416.26	\$3,318.54
Byrd (434085) Stephanie	173.33	\$4,155.76	\$3,404.86
Calderon (434768) Brenda	173.33	\$4,219.00	\$3,195.65
Camarena (434536) Daniel	173.33	\$5,378.00	\$3,675.45
Chang (411387) Margo	173.33	\$4,827.00	\$3,441.12
Ciulla (400655) Laura	86.67	\$3,872.00	\$2,063.85
Collins (434101) Lori	173.33	\$6,863.00	\$5,004.07
Crow (433648) Kayla	112.00	\$3,093.44	\$2,423.51
Davis (433997) Elizabeth	173.33	\$8,574.00	\$6,010.49
Deseamus (434593) Dara	173.33	\$4,342.00	\$3,301.97
Dowless (340919) Kelly	173.33	\$7,487.00	\$5,190.02
Duren (430735) Ashley	174.58	\$6,042.67	\$4,440.96
Ebbay (434566) Xinia	138.67	\$5,238.00	\$3,840.23
Evans (4565) Eric	173.33	\$11,543.00	\$3,134.66
Fergus (434648) Maria	173.33	\$4,785.00	\$2,996.31
Fine (421693) George	86.67	\$2,243.00	\$1,748.09
Fisk (321284) April	173.33	\$8,667.00	\$5,040.76
Fong (356883) Yolanda	173.33	\$11,490.00	\$7,681.72
Forte (434150) Harrison	173.33	\$5,673.61	\$3,829.52
Giuntoli (337331) Paul	173.33	\$7,464.00	\$4,571.89
Grellner (1264) Keith	173.33	\$13,685.00	\$8,629.41
Griego (410072) Yaneisy	156.00	\$4,737.00	\$3,692.27
Guidry (355732) Jessica	173.33	\$9,853.00	\$6,944.65
Hadly (434294) Gabrielle	173.33	\$9,453.00	\$6,486.72
Hartman (434642) Melissa	173.33	\$5,670.00	\$4,309.85
Holdcroft (270783) Jodie	43.00	\$1,851.58	\$1,561.32
Holdcroft (4579) Grant	173.33	\$9,453.00	\$5,472.03
Holt (2726) Karen	173.33	\$10,422.00	\$6,817.18
Howard Lindquist (434057)	173.33	\$5,561.00	\$4,368.63
Howarth (434500) Rosalie	173.33	\$5,277.00	\$3,866.99
Hughes (434256) Jakob	173.33	\$5,277.00	\$3,925.08
Humphrey (434383) Talia	173.33	\$5,143.00	\$3,980.50
Hunter (409213) Kari	173.33	\$9,453.00	\$6,118.06
Inga Dominguez (434769)	213.33	\$5,192.60	\$3,876.62
Inouye (434255) Wendy	173.33	\$8,988.90	\$6,151.41
Jenkins (434053) Andrea	173.33	\$4,495.00	\$3,424.53
Johanson (400651) Krista	173.33	\$4,982.00	\$3,723.82
Jones (358933) Kimberly	173.33	\$9,453.00	\$6,392.08
Jury (434709) Thomas	173.33	\$5,277.00	\$4,049.33
Katula (393427) Dayna	173.33	\$8,574.00	\$5,225.99
Kench (245476) Donald	173.33	\$4,393.00	\$2,737.71
Kiess (250913) John	173.33	\$11,490.00	\$8,704.86
Kindschy (421430) Brandon	173.33	\$6,109.00	\$4,322.04
Kinnear (434099) Sarah	173.33	\$5,897.00	\$4,542.43
Knoop (16125) Melina	173.33	\$8,064.00	\$5,497.63

Kitsap Public Health District -  
04/01/2023 - 04/30/2023

Name	Hours	Gross Pay	Net Pay
Koch (434710) Crystal	173.33	\$5,897.00	\$4,310.73
Kruse (243184) Charles	173.33	\$7,566.00	\$4,938.55
Kushner (327580) Siri	173.33	\$11,490.00	\$6,970.85
Laird (416539) Melissa	173.33	\$10,422.00	\$6,285.70
Lehto (434317) Victoria	74.12	\$2,149.48	\$1,750.56
Lytle (285038) Ross	173.33	\$7,464.00	\$5,011.19
Madden (434318) Shannon	173.33	\$4,495.00	\$3,304.53
May (434674) Martha	173.33	\$4,606.00	\$3,315.00
Mazur (388104) Karina	173.33	\$8,400.00	\$5,499.05
McMillan (434052) Michelle	173.33	\$5,587.00	\$4,058.46
Moen (279971) Anne	173.33	\$6,827.00	\$4,687.93
Moontree (406607) Kaela	173.33	\$5,561.00	\$3,939.52
Moore (421227) Megan	156.00	\$6,324.00	\$4,321.81
Moore (434254) Alexandra	173.33	\$5,154.98	\$3,751.72
Morris (312378) Dawn	173.33	\$7,054.00	\$4,954.51
Morris (434567) Amanda	173.33	\$4,495.00	\$3,575.85
Morrow (433895) Nathan	173.33	\$16,876.00	\$8,632.37
Nguyen (295033) Loan	173.33	\$5,231.00	\$3,796.98
Nguyen (434026) Kevin	173.33	\$4,804.00	\$3,313.21
Nielson (434638) Brian	149.33	\$4,791.08	\$3,518.79
Noble (3128) Gregoria	173.33	\$6,141.00	\$4,090.76
North (22459) Edwin	173.33	\$10,422.00	\$550.93
Nuno (405301) Crystal	173.33	\$7,072.00	\$3,688.79
O'Brien (433907) Melissa		\$0.00	\$0.00
Onarheim (426938) Carin	173.33	\$5,446.00	\$3,884.01
Pandino (419118) Linda	173.33	\$4,982.00	\$3,740.55
Perales (434396) Sydney	173.33	\$5,143.00	\$4,010.60
Perry (306605) Rachel	173.33	\$4,519.00	\$3,357.90
Petersen (434695) Kayla	149.33	\$3,740.80	\$2,846.35
Phelps (434295) Tameka	173.33	\$6,430.52	\$4,628.77
Plemmons (433994)	62.25	\$3,401.96	\$2,514.26
Power (434293) Allison	173.33	\$7,813.00	\$5,509.43
Preston (434195) Anne-Lisa	173.33	\$6,467.00	\$4,819.94
Quist-Therson (419860) Nii	173.33	\$8,341.00	\$5,987.94
Rhea (324654) Susan	173.33	\$4,919.00	\$3,777.59
Rork (404613) Ian	173.33	\$6,414.00	\$4,445.87
Schroeder (434395) Alena	173.33	\$4,858.53	\$3,696.74
Shelby (434658) Emmy	156.00	\$6,605.00	\$5,474.18
Shuhler (425553) Yana	173.33	\$4,466.00	\$3,269.39
Simmons (434365) Nolan	173.33	\$5,277.00	\$4,033.12
Smith (361388) Terri	173.33	\$8,341.00	\$5,828.92
Sooter (427776) Thaddeus	173.33	\$8,667.00	\$6,102.26
Stedman (347366) Kelsey	173.33	\$9,453.00	\$6,274.19
Stewart (423168) Tobbi	173.33	\$6,109.00	\$4,322.15
Tiemeyer (433908)	173.33	\$7,580.00	\$5,307.90
Tjemsland (433192)	173.33	\$7,130.00	\$5,010.43
Tonti (434149) Mindy		\$0.00	\$0.00
Tran (434316) Meghan	80.00	\$2,238.24	\$1,903.59
Turner (1682) Denise	173.33	\$5,493.00	\$3,334.63
Van Ort (392243) Susan	173.33	\$7,464.00	\$5,095.44
Wagner (426251) Mary	121.34	\$3,013.00	\$2,169.84
Warren (434273) Lisa	173.33	\$7,693.68	\$6,153.73
Wellborn (14545) Brian	148.00	\$3,751.12	\$2,390.18
Wendt (397255) Jan	173.33	\$7,580.00	\$5,658.62
Westervelt (434382) Laura	173.33	\$6,224.73	\$4,362.44
White (434641) Erica	173.33	\$5,897.00	\$4,574.29
Whitford (434292) Tiffany	173.33	\$4,099.00	\$3,026.94
Wickhamshire (434070)	86.67	\$2,203.58	\$1,763.65
Winchester (431493)	173.33	\$5,277.00	\$3,825.59
Winters (426939)	119.97	\$3,848.64	\$3,183.82
Wyatt (434415) Janet	173.33	\$7,580.00	\$5,100.32
	20,715.49	<b>\$803,074.61</b>	<b>\$549,113.57</b>

**TREAS RPT - Detail Cash Report - Cash**

5/3/2023

Treasurer's Detail Report

For 2023 - Apr

**Fund: FD00969 Kitsap Public Health General**

<u>Ledger Account</u>	<u>Revenue or Spend Category</u>	<u>Journal</u>	<u>Posting Date</u>	<u>Debit</u>	<u>Credit</u>	<u>Balance</u>
		Operational Journal: Kitsap Public Health District - 04/28/2023	4/28/2023	0.00	208,604.99	-208,604.99

**2317:Payroll Tax Payable**-208,604.99

**TREAS RPT - Detail Cash Report - Cash**

5/3/2023

Treasurer's Detail Report  
For 2023 - Apr**Fund: FD00969 Kitsap Public Health General**

<u>Ledger Account</u>	<u>Revenue or Spend Category</u>	<u>Journal</u>	<u>Posting Date</u>	<u>Debit</u>	<u>Credit</u>	<u>Balance</u>
		Operational Journal: Kitsap Public Health District - 04/14/2023	4/14/2023	0.00	135,955.87	-135,955.87

**2315:Employee Benefits Payable**-135,955.87