KITSAP PUBLIC HEALTH DISTRICT
2022-2024 CONSOLIDATED CONTRACT

CONTRACT NUMBER: CLH31014 AMENDMENT NUMBER: 4

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:
   - Adds Statements of Work for the following programs:
   - Removes Statements of Work for the following programs:
   - COVID-19 Mass Vaccination-FEMA - Effective January 1, 2022
   - DCHS-ELC COVID-19 Response - Effective January 1, 2022
   - HIV Client Services-HOPWA CARES - Effective January 1, 2022
   - HIV Client Services-HOPWA - Effective January 1, 2022
   - Maternal & Child Health Block Grant - Effective January 1, 2022
   - Supplemental Nutrition Assistance Program-Education - Effective January 1, 2022

2. Exhibit B-4 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-3 Allocations as follows:
   - Increase of $71,499 for a revised maximum consideration of $9,463,408.
   - Decrease of for a revised maximum consideration of .
   - No change in the maximum consideration of .

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.

<table>
<thead>
<tr>
<th>KITSAP PUBLIC HEALTH DISTRICT</th>
<th>STATE OF WASHINGTON DEPARTMENT OF HEALTH</th>
</tr>
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<tbody>
<tr>
<td>Signature:</td>
<td>Signature:</td>
</tr>
<tr>
<td>Keith Fuller</td>
<td>Brenda Vickers</td>
</tr>
<tr>
<td>Date:</td>
<td>Date:</td>
</tr>
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<td>May 4, 2022</td>
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APPROVED AS TO FORM ONLY
Assistant Attorney General
## Kitsap Public Health District

**Allocations Contract Number:** CLH31014  
**Contract Term:** 2022-2024  
**Date:** April 1, 2022

Indirect Rate as of January 1, 2022: 31.80% Admin & Fac.; 31.80% Community Hlth Pgm (inc. Admin) & 37.71% Environmental Hlth Pgm (inc. Admin)

### BARS Funding Chart of Accounts

<table>
<thead>
<tr>
<th>Chart of Accounts Program Title</th>
<th>Federal Award Identification #</th>
<th>Amend #</th>
<th>Assist List #</th>
<th>BARS Revenue Code</th>
<th>Statement of Work LHJ Funding Period</th>
<th>DOH Use Only Chart of Accounts Funding Period</th>
<th>Amount</th>
<th>Funding Period Subtotal</th>
<th>Chart of Accounts Total</th>
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## Kitsap Public Health District
### ALLOCATIONS
#### Contract Term: 2022-2024

**Indirect Rate as of January 1, 2022**: 31.80% Admin & Fac.; 31.80% Community Hlth Prgms (inc. Admin) & 37.71% Environmental Hlth Prgms (inc. Admin)

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<th>Statement of Work LHIJ Funding Period Start Date</th>
<th>End Date</th>
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<th>End Date</th>
<th>Amount</th>
<th>SubTotal</th>
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*Catalog of Federal Domestic Assistance

**Federal revenue codes begin with "333". State revenue codes begin with "334".*
DOH Program Name or Title: COVID-19 Mass Vaccination-FEMA - Effective January 1, 2022

Local Health Jurisdiction Name: Kitsap Public Health District

Contract Number: CLH31014

Period of Performance: January 1, 2022 through July 1, 2022

Statement of Work Purpose: The purpose of this statement of work is to establish the task activities, funding period, and billing details for cost reimbursement of FEMA-funded mass vaccination clinics in Washington state.

Revision Purpose: The purpose of this revision is to revise activity language in Task 1 and 1A.

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<th>Activity</th>
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<th>Payment Information and/or Amount</th>
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<tr>
<td>1.</td>
<td>*NOTE: Task activities for Mass Vaccination Clinics in this statement of work are NOT CONSIDERED SUBRECIPIENT but are as a CONTRACTOR of DOH. DOH reimbursement provided for local mass vaccination clinic (see definition below) planning, implementation and operations in coordination between Unified Command and the Regional Incident Management Team (IMT) to administer the vaccine efficiently, quickly, equitably, and safely in all regions of Washington State. State Supported, Regionally Coordinated, Locally Implemented. The Local Health Jurisdiction submitted a Mass Vaccination plan to the Department of Health for approval.</td>
<td></td>
<td></td>
<td>*Reimbursement of eligible costs. MASS VACCINATION FEMA 100% Funding (MI 934V0200) (See Program Specific Requirements below)</td>
</tr>
<tr>
<td>Task #</td>
<td>Activity</td>
<td>Deliverables/Outcomes</td>
<td>Due Date/Time Frame</td>
<td>Payment Information and/or Amount</td>
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<tr>
<td>1A</td>
<td>The Department of Health contracted with regional incident management teams and/or regional incident management organizations and works in close coordination and cooperation with Local health jurisdiction (LHJ) to support the COVID-19 Mass Vaccination efforts. The LHJ meets with the contract manager at the department a minimum of once a month and has ongoing conversations around planning and scheduling of mass vaccination efforts as needed. DOH will coordinate with the LHJ and regional IMT/IMO around planning and implementation of mass vaccination clinics/sites provided within the county(s) with a regional incident management team/organization as approved by DOH. Request for regional IMT should be submitted through the normal process through WebEOC. <strong>DOH will coordinate with the LHJ and regional IMT/IMO regarding carrying out the filed mass vaccination plan within the county.</strong> Regional IMT will be under the delegation authority of DOH and they are to provide support and coordination for all efforts around vaccine planning, resource support and general guidance and information sharing in order to regionally coordinate efforts. Local jurisdictions will maintain all decisional authority around vaccination planning and execution within their jurisdiction/district.</td>
<td>Submit to DOH a mass vaccination plan including:  - type of site,  - site locations,  - throughput,  - considerations made to ensure equity to historically marginalized populations,  - and to the extent possible a regional map of sites/locations.</td>
<td>Within 30 days of contract amendment execution.</td>
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</tbody>
</table>

**Definition:** Mass vaccination clinics defined as those outside of the usual healthcare delivery method such as pop-up clinics, mobile clinics, non-clinical facility (fairgrounds, arenas, etc.).

Guidance on vaccination protocols must be followed as provided by DOH and CDC. The Department of Health modeled the State of Washington State Patrol Fire Mobilization framework to quickly implement and carry out the Mass Vaccination effort as outlined by FEMA. This process specifically implements contracting with local jurisdictions once capacity is exceeded to effectively carry out the emergency mission as efficiently, equitably, and quickly as possible on a Statewide basis.
<table>
<thead>
<tr>
<th>Task #</th>
<th>Activity</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Provide any information as requested by the regional IMT.</td>
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<tr>
<td>1B</td>
<td>Funding for eligible Mass Vaccination activities are reimbursed on actual costs as outlined in the DOH guidance to provide the services and to carry out the mission. Funding will be dependent on full participation in the LHJ and IMT processes and all documentation will be required to be provided to fully close out funding requests by the end of the mission period of performance. Allowable costs include expenses such as facility rentals, staff to conduct planning, management, support and operation of the site, medical personnel for vaccinations, site security personnel, wrap around services for staff (meals, travel, lodging), equipment (which must be pre-approved by IMT/DOH if it exceeds $5,000 each), supplies for vaccinations and site operation. LHJs should provide narratives to help assist IMT and DOH finance know what expenditures were necessary to carry out the mission.</td>
<td>Submit estimated budget for the mass vaccination plan. Monthly Cost Summary Spreadsheet to the IMT/IMO by the fifth of the following month.</td>
<td>Within 30 days of contract amendment execution. Monthly</td>
<td></td>
</tr>
<tr>
<td>1C</td>
<td>Vaccination data – will be maintained according to current state and federal requirements. Vaccine Registration Systems – If a local jurisdiction or region does not have a registration system(s) the include internet based, phone option and other methods to ensure equitable registration, the state PrepMod system and tools will be available for use.</td>
<td>Submission of vaccine use into WA IIS database within 24hrs of use. Jurisdiction/Regions will ensure a fair and equitable process for registration of eligible Washingtonians across all available modalities.</td>
<td>Daily</td>
<td></td>
</tr>
<tr>
<td>1D</td>
<td>Regularly report on vaccinations sites and operational activities (number of vaccinations, personnel to operate the site, challenges, successes to share for learning across the public health system).</td>
<td>Provide monthly situation report to IMT/IMO on status of implementation of mass vaccination plan, or more frequently if that is the LHJ procedure. Sites operating for the time period, vaccines administered by site for the time period, estimated costs for the time period, any challenges/successes of note, including assistance requested.</td>
<td>Monthly</td>
<td></td>
</tr>
</tbody>
</table>

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

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

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

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

**Program Specific Requirements**

**Program Manual, Handbook, Policy References**
- Emergency Response Plan (or equivalent)
- Medical Countermeasure/Mass Vaccination Plan

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

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

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

Eligible costs from the timeframe of January 1, 2022 through July 1, 2022 include facility rentals, medical and support staff for planning, management, support, and operations; as well as wrap-around services for staff (i.e., meals, travel, lodging). Regular and overtime pay associated with this project is allowable for all staff working under this project and must be billed as a direct charge; timesheets are required documentation and must be available upon request by DOH. Indirect rates are not applicable to these funds. Eligible equipment includes facility infection control measures, personal protective equipment (PPE), storage equipment, coolers, freezers, temperature monitoring devices, portable vaccine units for transportation, supplies such as emergency medical supplies (for emergency medical care needs that may arise in the administration of the vaccine), containers for medical waste, as well as proper storage as needed for canisters of liquid nitrogen or dry ice. Eligible equipment purchase costs should not exceed $5,000 per piece. Equipment over $5,000 a piece must be preapproved by the IMT and should be leased rather than purchased. Any diversion from the list of pre-approved expenses will require a narrative on the purchase rationale and will be subject to IMT approval prior to reimbursement. Timesheets are required documentation for all activities related to this project. Staff time-in / time-out must be recorded, as well as a brief description of their activities. A general description of activities is acceptable for those working at the vaccine site; more detailed/specific description is required for those not working at the vaccine site.
DOH Program Name or Title: DCHS - ELC COVID-19 Response - Effective January 1, 2022

Local Health Jurisdiction Name: Kitsap Public Health District

Contract Term: 2022-2024

Contract Number: CLH31014

SOW Type: Revision

Revision # (for this SOW): 1

Period of Performance: January 1, 2022 through December 31, 2022

Statement of Work Purpose: The purpose of this statement of work (SOW) is to provide supplemental funding for the LHJ to ensure adequate culturally and linguistically responsive testing, investigation and contract tracing resources to limit the spread of COVID-19. This funding is the estimated carryforward amount.

Revision Purpose: Update Activity Task #2 "Contact Investigation and Contact Tracing" and "Isolation and Quarantine" sections.

DOH Chart of Accounts Master Index Title

<table>
<thead>
<tr>
<th>Master Index Code</th>
<th>Assistance Listing Number</th>
<th>BARS Revenue Code</th>
<th>LHJ Funding Period</th>
<th>Current Allocation</th>
<th>Allocation Change</th>
<th>Total Allocation</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY19 ELC COVID ED ALLOCATION</td>
<td>1897129G</td>
<td>93.323</td>
<td>333.93.32</td>
<td>01/01/22</td>
<td>10/18/22</td>
<td>1,145,035</td>
</tr>
<tr>
<td>FFY20 ELC EDE LHJ ALLOCATION</td>
<td>1897120E</td>
<td>93.323</td>
<td>333.93.32</td>
<td>01/01/22</td>
<td>12/31/22</td>
<td>2,919,838</td>
</tr>
</tbody>
</table>

TOTALS 4,064,873 0 4,064,873

Task # Activity Deliverables/Outcomes Due Date/Time Frame Payment Information and/or Amount

Participate in public health emergency preparedness and response activities for COVID-19. This may include surveillance, epidemiology, laboratory capacity, infection control, mitigation, communications and or other preparedness and response activities for COVID-19.

Examples of key activities include:
- Incident management for the response
- Testing
- Case Investigation/Contact Tracing
- Sustainable isolation and quarantine
- Care coordination
- Surge management
- Data reporting
<table>
<thead>
<tr>
<th>Task #</th>
<th>Activity</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>NOTE:</strong> The purpose of this agreement is to supplement existing funds for local health jurisdictions to carry out surveillance, epidemiology, case investigations and contact tracing, laboratory capacity, infection control, mitigation, communications, community engagement, and other public health preparedness and response activities for COVID-19.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>1</td>
<td>Establish a budget plan and narrative to be submitted to the Department of Health (DOH) Contract Manager. DOH will send the “Budget narrative Template”, “Budget Guidance” and any other applicable documents that may be identified.</td>
<td>Submit the budget plan and narrative using the template provided.</td>
<td>Within 30 days of receiving any new award for DCHS COVID-19 Response tasks.</td>
<td>Reimbursement of actual costs incurred, not to exceed: $1,145,035 FFY19 ELC COVID ED LHJ ALLOCATION Funding (MI 1897129G) Funding end date 10/18/2022</td>
</tr>
<tr>
<td>2</td>
<td>1) LHJ Active monitoring activities. In partnership with WA DOH and neighboring Tribes, the LHJ must ensure adequate culturally and linguistically responsive testing, investigation and contact tracing resources to limit the spread disease. LHJs must conduct the following activities in accordance with the guidance to be provided by DOH.</td>
<td>Data collected and reported into DOH systems daily.</td>
<td>Enter performance metrics daily into DOH identified systems</td>
<td>$2,919,838 FFY20 ELC EDE LHJ ALLOCATION Funding (MI 1897120E) Funding end date 7/31/2023</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>Quarterly performance reporting updates</td>
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<tr>
<td></td>
<td>a. Allocate enough funding to ensure the following Contact Tracing and Case Investigation Support: Hire a minimum of 1.0 data entry FTE to assure system requirements for task 2.1.a.</td>
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<tr>
<td></td>
<td>i. Contact tracing</td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>1. Strive to maintain the capacity to <strong>conduct targeted investigations as appropriate. surge a minimum of five (5) case investigators and contact tracers for every 100,000 people in the jurisdiction, as needed, based on disease rates. DOH centralized investigation will count toward this minimum.</strong></td>
<td>Enter all contact tracing data in CREST following guidance from-DOH.</td>
<td></td>
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<tr>
<td></td>
<td>2. Have staff that reflect the demographic makeup of the jurisdiction and who can provide culturally and linguistically competent and responsive services. In addition, or alternatively, enter into an agreement(s) with Tribal, community-based and/or culturally-specific organizations to provide such services. DOH centralized investigations will count towards this minimum.</td>
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<td>3. Ensure all contact tracing staff are trained in accordance with DOH investigative guidelines and data entry protocols.</td>
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<tr>
<td>Task #</td>
<td>Activity</td>
<td>Deliverables/Outcomes</td>
<td>Due Date/Time Frame</td>
<td>Payment Information and/or Amount</td>
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<tr>
<td>4.</td>
<td>Coordinate with Tribal partners in conducting contact tracing for Tribal members.</td>
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<tr>
<td>5.</td>
<td>Ensure contact tracing and case investigations activities meet DOH case and Contact Tracing Metrics. (Metrics to be determined collaboratively by DOH, LHJs and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics.</td>
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<tr>
<td>6.</td>
<td>Perform daily monitoring for symptoms during quarantine period of contacts.</td>
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<tr>
<td></td>
<td>ii. Case investigation</td>
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<tr>
<td></td>
<td>1. Strive to maintain the capacity to conduct targeted investigations as appropriate. Surges: a minimum of five (5) case investigators and contact tracers for every 100,000 people in the jurisdiction, as needed, based on disease rates. DOH centralized investigation will count toward this minimum.</td>
<td>Enter all case investigation data in WDRS following guidance from DOH.</td>
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<tr>
<td></td>
<td>2. Enter all case investigation and outbreak data in WDRS following DOH guidance.</td>
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<tr>
<td></td>
<td>a) Strive to enter all case investigation and outbreak data into CREST as directed by DOH.</td>
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<td></td>
<td>b) Ensure all staff designated to utilize WDRS have access and are trained in the system.</td>
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<td></td>
<td>c) Include if new positive cases are tied to a known existing positive case or indicate community spread.</td>
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<td></td>
<td>d) Conduct targeted case investigation and monitor outbreaks.</td>
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<td></td>
<td>e) Coordinate with Tribal partners in conducting case investigations for tribal members.</td>
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<td>3. Ensure contact tracing and case investigation activities meet DOH Case and Contact Tracing Metrics. (Metrics to be determined collaboratively by DOH, LHJs, and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics.</td>
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<td></td>
<td>b. Testing</td>
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</table>
## Task #

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<thead>
<tr>
<th>Activity</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. Work with partners and Tribes to ensure testing is available to every person within the jurisdiction meeting current DOH criteria for testing and other local testing needs.</td>
<td>Maintain a current list of entities providing COVID-19 testing and at what volume. Provide reports to DOH on testing locations and volume as requested.</td>
<td></td>
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<tr>
<td>ii. Work with partners and Tribes to ensure testing is provided in a culturally and linguistically responsive manner with an emphasis on making testing available to disproportionately impacted communities and as a part of the jurisdiction’s contact tracing strategy.</td>
<td>Ensure all COVID positive test results are entered into WDRS within 2 days of receipt</td>
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<tr>
<td>iii. Maintain a current list of entities providing COVID-19 testing and at what volume. Provide reports to DOH on testing locations and volume as requested.</td>
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<td>c. Surveillance FTE support at a minimum of .5 FTE Epidemiologist to support daily reporting needs below.</td>
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<tr>
<td>i. Ensure all COVID positive lab test results from LHJ are entered in to WDRS by 1) entering data directly in to WDRS, 2) sending test results to DOH to enter, or 3) working with DOH and entities conducting tests to implement an electronic method for test result submission.</td>
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<td>ii. Maintain records of all COVID negative lab test results from the LHJ and enter into WDRS when resources permit or send test results to DOH.</td>
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<tr>
<td>iii. Collaborate with Tribes to ensure Tribal entities with appropriate public health authority have read/write access to WDRS and CREST to ensure that all COVID lab results from their jurisdictions are entered in WDRS or shared with the LHJ or DOH for entry.</td>
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<tr>
<td>d. Tribal Support. Ensure alignment of contact tracing and support for patients and family by coordinating with local tribes if a patient identified as American Indian/Alaska Native and/or a member of a WA tribe.</td>
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<tr>
<td>e. Support Infection Prevention and control for high-risk populations</td>
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<tr>
<td>i. Migrant and seasonal farmworker support. Partner with farmers, agriculture sector and farmworker service organizations to develop and</td>
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</tbody>
</table>

Exhibit A, Statement of Work

Page 4 of 7

Contract Number CLH31014-Amnd#4
<table>
<thead>
<tr>
<th>Task #</th>
<th>Activity</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>execute plans for testing, quarantine and isolation, and social service needs for migrant and seasonal farmworkers.</td>
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<tr>
<td>ii.</td>
<td>Congregate care facilities: In collaboration with the state licensing agency (DSHS), support infection prevention assessments, testing, Infection control and isolation and quarantine protocols in congregate care facilities.</td>
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<tr>
<td>iii.</td>
<td>High risk businesses or community-based operations. In collaboration with state licensing agencies and Labor and Industries, partner with food processing and manufacturing businesses to ensure adequate practices to prevent COVID-19 exposure, conduct testing and respond to outbreaks.</td>
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<tr>
<td>iv.</td>
<td>Healthcare: Support infection prevention and control assessments, testing, cohorting, and isolation procedures. Provide educational resources to a variety of healthcare setting types (e.g., nursing homes, hospitals, dental, dialysis).</td>
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<tr>
<td>v.</td>
<td>Non-healthcare settings that house vulnerable populations: In collaboration with state corrections agency (DOC) and other state partners, support testing, infection control, isolation and quarantine and social services and wraparound supports for individuals living or temporarily residing in congregate living settings, including detention centers, prisons, jails, transition housing, homeless shelters, and other vulnerable populations.</td>
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<td>vi.</td>
<td>Schools: In collaboration with OSPI and local health jurisdictions, support infection prevention and control and outbreak response in K-12 and university school settings.</td>
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<tr>
<td>f.</td>
<td>Ensure adequate resources are directed towards H2A housing facilities within communities, fishing industries and long-term care facilities to prevent and control disease transmission. Funds can be used to hire support staff, provide incentives or facility-based funding for onsite infection prevention efforts, etc.</td>
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<tr>
<td>Task #</td>
<td>Activity</td>
<td>Deliverables/Outcomes</td>
<td>Due Date/Time Frame</td>
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<tr>
<td>g.</td>
<td>Community education. Work with Tribes and partners to provide culturally and linguistically responsive community outreach and education related to COVID-19.</td>
<td>Quarterly performance updates to include name, address and capacity of identified location that can support isolation and quarantine, and confirmation of appropriate planning and coordination as required.</td>
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<tr>
<td>h.</td>
<td>Establish sustainable isolation and quarantine (I&amp;Q) measures in accordance with WAC 246-100-045 (Conditions and principles for isolation or quarantine).</td>
<td></td>
<td>Report census numbers to include historic total by month and monthly total for current quarter to date</td>
<td></td>
</tr>
<tr>
<td>i.</td>
<td>Have at least one (1) location identified and confirmed for conducting I&amp;Q operations identified and confirmed. This location should be sufficient for supporting I&amp;Q services that are adequate for the population for your jurisdiction and have an ability to expand if needed. This can be through contract/formal agreement that can support isolation and quarantine adequate to the population for your jurisdiction with the ability to expand; alternatively, the jurisdiction may establish with an adjacent jurisdiction a formal agreement to provide the isolation and quarantine capacity adequate to the population for your jurisdiction with the ability to expand.</td>
<td></td>
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</tr>
<tr>
<td>ii.</td>
<td>Maintain ongoing census data for isolation and quarantine for your population.</td>
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</tr>
<tr>
<td>iii.</td>
<td>Planning must incorporate transfer or receipt of people requiring I&amp;Q support isolation and quarantine patients to and from adjacent jurisdictions or state facilities in the event of localized increased need. Planning must incorporate indicators for activating and surging to meet demand and describe the process for coordinating requests for state I&amp;Q support, either through mobile teams or the state facility.</td>
<td></td>
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</tr>
</tbody>
</table>
To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Data Universal Numbering System (DUNS®) number.

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

**Program Specific Requirements**

All work will be performed in accordance with the revised and approved project plans to be submitted to DOH.

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

CDC Funding Regulations and Policies  

**Monitoring Visits (frequency, type)**

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

**Special Billing Requirements**

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

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

**Other:** Required activities, deliverables, and funding is for the entire project period: January 2021 through specified date above. Unspent funds and tasks not completed by December 31, 2021, were reauthorized for work in this new consolidated contract term beginning January 1, 2022. It is the LHJ’s responsibility to assure that the unspent funding amount carried forward to this statement of work does not exceed the remaining available balance from the 2018-2021 contract.
Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: HIV Client Services-HOPWA CARES - Effective January 1, 2022
Local Health Jurisdiction Name: Kitsap Public Health District
Contract Number: CLH31014

SOW Type: Original  Revision # (for this SOW)

Period of Performance: January 1, 2022 through June 30, 2023

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

Revision Purpose: N/A

<table>
<thead>
<tr>
<th>DOH Chart of Accounts Master Index Title</th>
<th>Master Index Code</th>
<th>Assistance Listing Number</th>
<th>BARS Revenue Code</th>
<th>LHJ Funding Period Start Date End Date</th>
<th>Current Allocation</th>
<th>Allocation Change Increase (+)</th>
<th>Total Allocation</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOUS. OPP. FOR PPL W/AIDS CARES COVID-19</td>
<td>12660207</td>
<td>14.241</td>
<td>333.14.24</td>
<td>01/01/22 06/30/23</td>
<td>0</td>
<td>11,418</td>
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<table>
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<th>Task #</th>
<th>Activity</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
</tr>
</thead>
</table>
| 1      | Provide funding to help the housing needs of persons with HIV/AIDS or related diseases and their families. | -Perform prompt housing inspections.  
- Make prompt rent and deposit payments to landlords and make utility payments to utility companies.  
- Develop housing plans for clients receiving housing assistance [Short-Term Rent, Mortgage and Utility (STRMU), Tenant-Based Rental Assistance (TBRA), and Facility Based Housing] and update housing plans at least annually. | Required reports are to be submitted in a timely manner.  
DOH may delay payment until the reports are received or recapture unclaimed funds. | Administrative: $1,500  
Support Services: $0  
STRMU: $9,918  
Permanent Housing Placement: $0  
Tenant Based Rental Assistance: $0 |
<table>
<thead>
<tr>
<th>Task #</th>
<th>Activity</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>-Provide or refer eligible clients to supportive services and permanent housing placement when appropriate.</td>
<td></td>
<td>Housing Information Services: $0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-Prepare and submit monthly invoice vouchers by the 25th of the month following provision of services, except in July, when it is due on the 10th of the month.</td>
<td></td>
<td>TOTAL: $11,418</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-Submission of Consolidated Annual Performance Report (CAPER) by August 10.</td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td>-Submission of Monitor responses by the due date requested.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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)**

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

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

Information about the LHJ and this statement of work will be made available on [USASpending.gov](#) by DOH as required by P.L. 109-282.

**Program Specific Requirements**

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

LHJ shall provide the following inputs:

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

**Compensation and Payment:**

i) The LHJ shall submit all claims for payment for costs due and payable under this SOW and incurred during this period by **July 25, 2023**. DOH will pay belated claims at its discretion, contingent upon the availability of funds.

ii) The LHJ agrees to reimburse DOH for expenditures billed to DOH for costs that are later determined through audit or monitoring to be disallowed under the requirements of 2 CFR Part 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

iii) **Submission of Invoice Vouchers** – On a monthly basis, the CONTRACTOR shall submit correct A19-1A invoice vouchers amounts billable to DOH under this statement of work. **All A19-1A invoice vouchers must be submitted by the 25th of the following month.**

   (1) The LHJ shall use and adhere to the DOH Infectious Disease Reimbursement Guidelines and Forms when submitting A19 invoice voucher requests to DOH.
iv) **Advance Payments Prohibited** Funds are “cost reimbursement” funds. DOH will not make payment in advance or in anticipation of services or supplies provided under this agreement. This includes payments of “one-twelfth” of the current fiscal year’s funding.

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

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

**Contract Modifications:**

(1) **Notice of Change in Services** – LHJ shall notify DOH program staff, within 45 days, if any situations arise that may impede provision of the services contained in this Statement of Work. DOH and LHJ will agree to strategies for resolving any shortfalls. DOH retains the right to withhold funds in the event of noncompliance.

(2) **Contract Amendments – Effective Date** – LHJ shall not begin providing the services authorized by a contract amendment until such time as LHJ has received a signed, fully executed copy of the contract amendment from DOH.

**Confidentiality Requirements:**

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

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

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

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

*Disclosure of information is governed by the Washington Administrative Code (WAC) 246-101-120, 520 and 635, and the Revised Code of Washington (RCW) 70.24.080, 70.24.084, and 70.24.105 regarding the exchange of medical information among health care providers related to HIV/AIDS or STD diagnosis and treatment. Please note that contractors fit under the definition of “health care providers” and “individuals with knowledge of a person with a reportable disease or condition” in the WAC and RCW.*
Statement of Work Purpose: The purpose of this statement of work is to provide funding to help the housing needs of persons with human immunodeficiency virus/acquired immune deficiency syndrome (HIV/AIDS) or related diseases and their families.

Revision Purpose: The purpose of this revision is to add final carryforward amount of $4,045 to FFY20 from prior contract and add $1,872 to Admin, $7,500 to STRMU, $1,250 to Support Services and $18,000 to TBRA for a total of $28,622 to FFY21.

### DOH Chart of Accounts Master Index Title

<table>
<thead>
<tr>
<th>Master Index Code</th>
<th>Assistance Listing Number</th>
<th>BARS Revenue Code</th>
<th>LHJ Funding Period Start Date</th>
<th>End Date</th>
<th>Current Allocation</th>
<th>Allocation Change Increase (+)</th>
<th>Total Allocation</th>
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<th>Task #</th>
<th>Activity</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Provide funding to help the housing needs of persons with HIV/AIDS or related diseases and their families. The outcome of this performance-based grant is safe, affordable and stable housing for the clients of the Housing Opportunities for Persons with AIDS (HOPWA) Program. Services are restricted to households with at least one person who has HIV/AIDS and whose total household income is less than 80% of the Area Median Income (AMI) as defined by Housing and Urban Development (HUD).</td>
<td>-Perform prompt housing inspections. -Make prompt rent and deposit payments to landlords and make utility payments to utility companies. -Develop housing plans for clients receiving housing assistance [Short-Term Rent, Mortgage and Utility (STRMU), Tenant-Based Rental Assistance (TBRA), and Facility Based Housing] and update housing plans at least annually.</td>
<td>Required reports are to be submitted in a timely manner. DOH may delay payment until the reports are received or recapture unclaimed funds.</td>
<td>$30,735-$26,690 – MI 12660201 – HOPWA Formula Federal $30,735-$26,690 for 1/1/22-6/30/22 Administrative: $3,492 $1,746 Support Services: $2,500 $1,250</td>
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<tr>
<td>Task #</td>
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<td>Payment Information and/or Amount</td>
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<tr>
<td></td>
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<td>-Provide or refer eligible clients to supportive services and permanent housing placement when appropriate.</td>
<td></td>
<td>STRMU: $4,260 $3,750</td>
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<td></td>
<td>-Prepare and submit monthly invoice vouchers by the 25th of the month following provision of services, except in July, when it is due on the 10th of the month.</td>
<td></td>
<td>Permanent Housing Placement: $0</td>
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<tr>
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<td></td>
<td>-Submission of Consolidated Annual Performance Report (CAPER) by August 10.</td>
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<td>Tenant Based Rental Assistance: $20,483 $19,944</td>
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<td>-Submission of Monitor responses by the due date requested.</td>
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<td>Housing Information Services: $0</td>
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<td></td>
<td>TOTAL: $30,735 $26,690</td>
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<td>$49,215 $20,593 – MI 12660221 – HOPWA Formula Federal</td>
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<td></td>
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<td>Administrative: $3,219 $1,347</td>
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<td></td>
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<td>STRMU: $11,250 $2,750</td>
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<td></td>
<td></td>
<td></td>
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<td>Tenant Based Rental Assistance: $33,496 $15,496</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>TOTAL: $49,215 $20,593</td>
</tr>
</tbody>
</table>

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To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Data Universal Numbering System (DUNS®) number.
Information about the LHJ and this statement of work will be made available on USAspending.gov by DOH as required by P.L. 109-282.

Program Specific Requirements

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

LHJ shall provide the following inputs:

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

Compensation and Payment:

i) The LHJ shall submit all claims for payment for costs due and payable under this SOW and incurred during this period by July 31, 2022. DOH will pay belated claims at its discretion, contingent upon the availability of funds.

ii) The LHJ agrees to reimburse DOH for expenditures billed to DOH for costs that are later determined through audit or monitoring to be disallowed under the requirements of 2 CFR Part 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

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   (1) The LHJ shall use and adhere to the DOH Infectious Disease Reimbursement Guidelines and Forms when submitting A19 invoice voucher requests to DOH.

iv) Advance Payments Prohibited Funds are “cost reimbursement” funds. DOH will not make payment in advance or in anticipation of services or supplies provided under this agreement. This includes payments of “one-twelfth” of the current fiscal year’s funding.

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

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

Contract Modifications:

(1) Notice of Change in Services – LHJ shall notify DOH program staff, within 45 days, if any situations arise that may impede provision of the services contained in this Statement of Work. DOH and LHJ will agree to strategies for resolving any shortfalls. DOH retains the right to withhold funds in the event of noncompliance.

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

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

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

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

*Disclosure of information is governed by the Washington Administrative Code (WAC) 246-101-120, 520 and 635, and the Revised Code of Washington (RCW) 70.24.080, 70.24.084, and 70.24.105 regarding the exchange of medical information among health care providers related to HIV/AIDS or STD diagnosis and treatment. Please note that contractors fit under the definition of “health care providers” and “individuals with knowledge of a person with a reportable disease or condition” in the WAC and RCW.
Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: Maternal and Child Health Block Grant - Effective January 1, 2022

Local Health Jurisdiction Name: Kitsap Public Health District

Contract Number: CLH31014

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

Period of Performance: January 1, 2022 through September 30, 2022

Statement of Work Purpose: The purpose of this statement of work (SOW) is to support local interventions that impact the target population of the Maternal and Child Health Block Grant.

Revision Purpose: The purpose of the revision is to carry over unspent funds from the Oct-Dec contract for continuation of MCHBG-related activities.

<table>
<thead>
<tr>
<th>Task #</th>
<th>Activity</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal and Child Health Block Grant (MCHBG) Administration</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>1a</td>
<td>Report actual expenditures for the six-month period October 1, 2021 through March 31, 2022</td>
<td>Submit actual expenditures using the MCHBG Budget Workbook to DOH contract manager</td>
<td>May 27, 2022</td>
<td>Reimbursement for actual costs, not to exceed total funding consideration. Action Plan and Progress Reports must only reflect activities paid for with funds provided in this statement of work for the specified funding period. See Program Specific Requirements and Special Billing Requirements.</td>
</tr>
<tr>
<td>1b</td>
<td>Develop 2022-2023 MCHBG Budget Workbook for October 1, 2022 through September 30, 2023 using DOH provided template.</td>
<td>Submit MCHBG Budget Workbook to DOH contract manager</td>
<td>September 9, 2022</td>
<td></td>
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</tbody>
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<thead>
<tr>
<th>DOH Chart of Accounts Master Index Title</th>
<th>Master Index Code</th>
<th>Assistance Listing Number</th>
<th>BARS Revenue Code</th>
<th>LHJ Funding Period Start Date End Date</th>
<th>Current Allocation</th>
<th>Allocation Change Increase (+)</th>
<th>Total Allocation</th>
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<tr>
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<td>TOTALS</td>
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<td>119,890</td>
<td>14,691</td>
<td>134,581</td>
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Funding Source
- Federal Subrecipient
- State
- Other

Federal Compliance
- FFATA (Transparency Act)
- Research & Development

Type of Payment
- Reimbursement
- Fixed Price
<table>
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<tr>
<th>Task #</th>
<th>Activity</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Report activities and outcomes of 2022 MCHBG Action Plan using DOH-provided template.</td>
<td>Submit quarterly Action Plan reports to DOH Contract manager</td>
<td>January 15, 2022; April 15, 2022; July 15, 2022</td>
<td>Reimbursement for actual costs, not to exceed total funding consideration. Action Plan and Progress Reports must only reflect activities paid for with funds provided in this statement of work for the specified funding period. See Program Specific Requirements and Special Billing Requirements.</td>
</tr>
<tr>
<td>3a</td>
<td>Complete Child Health Intake Form (CHIF) using the CHIF Automated System on all infants and children served by the CYSHCN Program as referenced in CYSHCN Program guidance.</td>
<td>Submit CHIF data into Secure Access Washington website: <a href="https://secureaccess.wa.gov">https://secureaccess.wa.gov</a></td>
<td>January 15, 2022; April 15, 2022; July 15, 2022</td>
<td>Reimbursement for actual costs, not to exceed total funding consideration. Action Plan and Progress Reports must only reflect activities paid for with funds provided in this statement of work for the specified funding period. See Program Specific Requirements and Special Billing Requirements.</td>
</tr>
<tr>
<td>3b</td>
<td>Identify unmet needs for CYSHCN on Medicaid and refer to DOH CYSHCN Program for approval to access Diagnostic and Treatment funds to meet the need.</td>
<td>Submit completed Health Services Authorization forms and Central Treatment Fund requests directly to the CYSHCN Program as needed.</td>
<td>30 days after forms are completed.</td>
<td></td>
</tr>
<tr>
<td>3c</td>
<td>Work with partners to share updated local CYSHCN resources with Within Reach / Help Me Grow (HMG).</td>
<td>Review resources for your local area on ParentHelp123.org annually for accuracy and submit any updates to Within Reach.</td>
<td>September 30, 2022</td>
<td></td>
</tr>
</tbody>
</table>

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**Federal Funding Accountability and Transparency Act (FFATA) (Applies to federal subrecipient funding.)**
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To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Data Universal Numbering System (DUNS®) number.

Information about the LHJ and this statement of work will be made available on [USASpending.gov](https://uspending.gov) by DOH as required by P.L. 109-282.

**Program Specific Requirements**

**Program Manual, Handbook, Policy References:**
[Children and Youth with Special Health Care Needs Manual](https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/PublicHealthSystemResourcesandServices/LocalHealthResourcesandTools/MaternalandChildHealthBlockGrant/ChildrenandYouthWithSpecialHealthCareNeeds)

Health Services Authorization (HSA) Form
[http://www.doh.wa.gov/Portals/1/Documents/Pubs/910-002-ApprovedHSA.docx](http://www.doh.wa.gov/Portals/1/Documents/Pubs/910-002-ApprovedHSA.docx)
Restrictions on Funds:

1. At least 30% of federal Title V funds must be used for preventive and primary care services for children and at least 30% must be used services for children with special health care needs. [Social Security Law, Sec. 505(a)(3)].

2. Funds may not be used for:
   a. Inpatient services, other than inpatient services for children with special health care needs or high risk pregnant women and infants, and other patient services approved by Health Resources and Services Administration (HRSA).
   b. Cash payments to intended recipients of health services.
   c. The purchase or improvement of land, the purchase, construction, or permanent improvement of any building or other facility, or the purchase of major medical equipment.
   d. Meeting other federal matching funds requirements.
   e. Providing funds for research or training to any entity other than a public or nonprofit private entity.
   f. Payment for any services furnished by a provider or entity who has been excluded under Title XVIII (Medicare), Title XIX (Medicaid), or Title XX (social services block grant).[Social Security Law, Sec 504(b)].

3. If any charges are imposed for the provision of health services using Title V (MCH Block Grant) funds, such charges will be pursuant to a public schedule of charges; will not be imposed with respect to services provided to low income mothers or children; and will be adjusted to reflect the income, resources, and family size of the individual provided the services. [Social Security Law, Sec. 505 (1) (D)].

Monitoring Visits: Telephone calls with DOH contract manager as needed.

Billing Requirements: Payment is contingent upon DOH receipt and approval of all deliverables and an acceptable A19-1A invoice voucher. Payment to completely expend the “Total Consideration” for a specific funding period will not be processed until all deliverables are accepted and approved by DOH. Invoices must be submitted quarterly by the 30th of each month following the quarter in which the expenditures were incurred and must be based on actual allowable program costs. Billing for services on a monthly fraction of the “Total Consideration” will not be accepted or approved.

Special Instructions: Contact DOH contract manager below for approval of expenses not reflected in approved budget workbook.

MCHBG funds may be expended on COVID-19 response activities that align with maternal and child health priorities. Examples may include:

- Providing support in educating the MCH population about COVID-19 through partnerships with other local agencies, medical providers, and health care organizations.
- Working closely with state and local emergency preparedness staff to assure that the needs of the MCH population are represented.
- Funding infrastructure that supports the response to COVID-19. For example, Public Health Nurses who are routinely supported through the Title V program may be able to be mobilized, using Title V funds or separate emergency funding, to support a call center or deliver health services.
- Partnering with parent networks and health care providers to provide accurate and reliable information to all families.
- Engaging community leaders, including faith-based leaders, to educate community members about strategies for preventing illness.

Restrictions listed above continue to apply.
DOH Program Name or Title: Supplemental Nutrition Assistance Program-Education - Effective January 1, 2022

SOW Type: Revision

Revision # (for this SOW): 1

Period of Performance: January 1, 2022 through December 31, 2024

Statement of Work Purpose: The purpose of this statement of work is to provide Supplemental Nutrition Assistance Program-Education (SNAP-Ed) to improve the likelihood that persons eligible for SNAP (Basic Food, Food Stamps) will make healthy food choices within a limited budget and choose active lifestyles consistent with the current USDA dietary guidelines.

Revision Purpose: The purpose of this revision is to add FFY22 IAR SNAP Ed Program Management category funds.

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<tr>
<th>DOH Chart of Accounts Master Index Title</th>
<th>Master Index Code</th>
<th>Assistance Listing Number</th>
<th>BARS Revenue Code</th>
<th>LHJ Funding Period Start Date</th>
<th>LHJ Funding Period End Date</th>
<th>Current Allocation</th>
<th>Allocation Change Increase (+)</th>
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<td>Task #</td>
<td>Activity</td>
<td>Deliverables/Outcomes</td>
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<td><strong>Project Planning, Implementation, and Performance</strong>&lt;br&gt;For SNAP-Ed, the Subrecipient will develop, implement, and evaluate a SNAP-Ed project included in the Washington SNAP-Ed State Plan approved by Department of Social and Health Services (DSHS) and United States Department of Agriculture (USDA); and, as described in the Subrecipient’s project work plan approved by Department of Health (DOH).</td>
<td>1. Project provides 100% of SNAP-Ed activities at eligible sites and/or with eligible audiences.&lt;br&gt;2. On-time delivery, implementation, and evaluation of Project activities as scheduled in approved state plan and project work plan.&lt;br&gt;3. Project plan supports at least one State SNAP-Ed goal as selected by Subrecipient.&lt;br&gt;4. Demonstrates progress towards project objective(s), and additional project goal(s) determined by Subrecipient are demonstrated and reported.&lt;br&gt;5. Project maintains cost-effectiveness per current approved cost-effective measure provided by DOH or DSHS.</td>
<td><strong>Due:</strong> per the approved work plan and per the required due dates during the federal fiscal year, and no later than 09/30/23. 10/01/23 to 12/31/24 TBD.</td>
<td><strong>Reimbursement upon on-time receipt and approval of acceptable deliverables/outcomes for the funding period will not exceed $104,497 $117,220.</strong>&lt;br&gt;Kitsap Public Health District will be paid the allowable costs incurred based on their approved budget and program allowability. See special billing requirements section. <strong>NOTE:</strong> The DOH SNAP-Ed program will deny payment for any costs not submitted by the required due dates without prior DOH approval in writing.</td>
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<td>1.1</td>
<td><strong>Project Progress: Monitoring and Compliance</strong>&lt;br&gt;For SNAP-Ed, the Subrecipient will demonstrate satisfactory progress of the approved Project as documented in DOH.</td>
<td>1. On-time delivery of proposed list of Project site(s) or audience(s) to DOH.&lt;br&gt;2. All sites and/or audiences are determined to be eligible per current SNAP-Ed eligibility guidance and DOH process before programming begins with site(s) or audience(s).</td>
<td><strong>For the Period:</strong>&lt;br&gt;01/01/22 to 09/30/23&lt;br&gt;10/01/23 to 12/31/24 TBD.&lt;br&gt;</td>
<td>See payment information as referenced in task number 1.0.</td>
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SNAP-Ed progress reports, progress reviews, and project and fiscal monitoring reports.

Monitoring of Subrecipient Project progress includes but is not limited to the following activities:

i. one-on-one progress reviews with DOH,
ii. progress reports submitted to DOH,
iii. project monitoring completed with DOH or DSHS or USDA, and
iv. project monitoring site visits completed by SNAP-Ed statewide initiative teams.

Satisfactory progress of the Subrecipient’s Project includes progress shown in the following areas and documented in reporting and/or monitoring completed:

1. Progress demonstrated in achieving goal(s) outlined in the project.
2. Progress demonstrated in achieving objective(s) outlined in the project’s interventions.
3. Progress demonstrated in creating a sustainable project.
4. Progress demonstrated in engaging or involving the community in project planning, implementation, and/or evaluation.
5. Progress demonstrated in working with DSHS community services offices (CSOs).
6. Progress demonstrated in promoting available Federal, state, or local fruit and vegetable incentive programs to SNAP clients.
7. Progress demonstrated in using strategies that are evidence-based and delivered with fidelity, where applicable.
9. Strategy for promoting available Federal, state, or local fruit and vegetable incentive program(s) is implemented and demonstrated to increase knowledge, awareness, or participation of SNAP-Ed eligible audience.
10. **Direct education strategies only:** Statewide SNAP-Ed Curriculum team or DOH monitoring reviews show education delivered with fidelity, with no major deficiencies. If major deficiencies documented, corrected properly within timeline required.
11. Compliance maintained with current SNAP-Ed financial and cost policy guidance, 2 CFR 200 federal Uniform Administrative Requirements (OMB guidance), and related DOH SNAP-Ed fiscal policy and procedures.

**MEASURE**

**Progress reviews** – documentation of one-on-one meeting(s) with DOH SNAP-Ed staff person(s) and Subrecipient completed in person, web conference, phone, or via email as needed. Documentation of progress review notes.

**Project monitoring** – completed in person, web conference, phone, or via email as needed. Completion of on-site program observations where applicable. Completion of project monitoring report forms, with monitoring results documented and provided to Subrecipient.

**Fiscal monitoring** – documentation of completed fiscal reviews scheduled by SNAP-Ed fiscal analyst or DOH fiscal monitoring unit, with corresponding reports where applicable. Fiscal monitoring completed in person, web conference, phone, or via email as needed.

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**Due: Progress reviews.** Occur at minimum once a fiscal year, and no later than 09/30/23. 10/01/23 to 12/31/24 TBD.

**Due: Project monitoring.** Occurs at minimum once within every other fiscal year. If project monitoring documents major deficiencies or corrective action, the Subrecipient will be monitored again within the fiscal year. Project monitoring can be scheduled more frequently if deemed necessary by DOH, or if agreed upon by both parties.

**Due: Fiscal monitoring.** Each Subrecipient receives one (1) annual fiscal monitoring visit every other year, unless Subrecipient monitoring results in corrective action or finding, in which case Subrecipient will be monitored again the following year. Fiscal monitoring can be scheduled more frequently if deemed necessary by DOH, or if agreed upon by both parties.
2.0 Evaluation Data and Reports

For SNAP-Ed, the Subrecipient will report progress of the approved project and work plan, including ongoing evaluation of the project and outcomes, using an approved form/system on a regular basis that will at a minimum include:

1. Progress reports
2. Reporting in PEARs online reporting system of all SNAP-Ed activities

SNAP-Ed activities implemented and evaluation of the project and outcomes are reported in an online program evaluation and reporting system (PEARs) through the following required modules as appropriate for the approved project: Program Activity (direct education), Indirect Activity (health promotion, indirect education channels), PSE Site Activities, Partnerships, Coalitions, Success Stories, and Social Marketing.

The following evaluation activities and information are required based on the Subrecipient’s approved project and work plan.
- Formative evaluation
- Process evaluation
- Outcome evaluation
- Qualitative evaluation
- Evaluation of PSE strategies

Please Note: the deliverables may change based on state SNAP-Ed Evaluation guidance, DSHS, or USDA requirements.

Please Note: Topics included in Progress Report subject to change based on Department of Health (DOH), Department of Social and Health Services (DSHS), Washington SNAP-Ed (WA SNAP-Ed), or United States Department of Agriculture (USDA) Food and Nutrition Services (USDA) requirements.

On-time and correct submission of reporting, data, and materials for all SNAP-Ed funded activities implemented, including:
1. Progress for all intervention strategies reported for approved project plan.
2. All evaluation results reported for approved project plan (formative, process, outcome, qualitative, PSE).
3. Success stories reported for approved project plan describing progress or success of project activities, or positive change or improvement in SNAP-Ed eligible site(s) or audience(s).
4. Required release form(s) for all photos submitted.
5. **Direct education strategies only:** All required information for scheduled direct education lessons submitted to Statewide SNAP-Ed Curriculum team, using approved form/system, by dates required.

On-time and correct submission of required evaluation data for direct education strategies into PEARs electronically, or using approved reporting method, according to time frame provided, including:
6. **Direct education strategies only:** Pre-test surveys for each project class series are entered into PEARs by Subrecipient no later than two weeks after completion of the pre-test survey.
7. **Direct education strategies only:** Post-test surveys for each project class series are entered into PEARs by Subrecipient no later than two weeks after completion of the post-test survey.
8. **Direct education strategies only:** Demographic cards for each class series are entered into PEARs by Subrecipient no later than two weeks after collection of the demographic cards.

**MEASURE**

Documentation showing completion of progress report and submission to DOH on or before the required due dates, or by approved extension date.

Completion of required evaluation data in progress reports and PEARs electronically, or using approved reporting method/form, on or before the required due dates, or by approved extension date.

**Direct education strategies only:**
1. Entry of required SNAP-Ed participant surveys into PEARs using DOH approved method, on or before the required due dates or by approved extension date.

For the Period:
01/01/22 to 09/30/23
10/01/23 to 12/31/24 TBD

**Progress Reports:** Due at minimum quarterly, and no later than 10 calendar days after the end of the quarter, except for the last month of the FFY which is due by 9/15/22. If the 10th calendar day falls on a weekend day, the report is due the next business day.
- 1st Progress report due 1/11/22
- 2nd Progress report due 4/12/22
- 3rd Progress report due 7/12/22
- Final Progress report due 9/15/22 or follow close-out procedures.
- FFY 23-24 TBD

**PEARs:** Project evaluation and reporting required between 10/1/21 to 9/15/22.
- **Direct education strategies only:** PEARs Program Activities module updated with completed activities no later than two (2) weeks after services are provided.

- **Due:** PEARs Indirect Activities, PSE Site Activities, Partnerships, Coalitions, Success Stories, and Social Marketing modules completed no later than the last business day of the month following when the...
2. Completion of required evaluation data into PEARS electronically, or using approved reporting method, on or before the required due dates for data entry, or by approved extension date.

- Jan 2022 by 2/26/22
- Feb 2022 by 3/31/22
- Mar 2022 by 4/30/22
- Apr 2022 by 5/31/22
- May 2022 by 6/30/22
- Jun 2022 by 7/30/22
- Jul 2022 by 8/31/22
- Aug 2022 by 9/15/22

Final data entry for all activities not already reported, due by 9/15/22, or follow close-out schedule.

- FFY23-24 TBD

SNAP-Ed Direct education conducted between 01/01/22 and 9/15/22. FFY23-24 TBD

- **Direct education strategies only:**
  - Completed Pre- and post-test surveys are entered into PEARS database by Subrecipient no later than two weeks after completion of the survey. All completed pre- and post-test surveys must be entered by Subrecipient, no later than COB 9/15/22, or follow close-out schedule.

3.0 Civil Rights Training

All SNAP-Ed funded staff must complete training each fiscal year in civil rights.

*See special requirements section - Civil Rights*

**MEASURE**

On-time completion of an approved Civil Rights training for all SNAP-Ed funded staff.

Submission of documentation showing completed Civil Rights training for all SNAP-Ed funded staff on or before the required due date.

**For the Period:**

- 01/01/22 to 09/30/23
- 10/01/23 to 12/31/24 TBD

**Due:** 01/01/22 for all SNAP-Ed funded staff. FFY23-24 TBD.

See payment information as referenced in task number 1.0
### 3.1 Other Required Training and Meetings

The following trainings or meetings are required for all Subrecipients when provided by DOH or WA SNAP-Ed for the staff listed. Unless more staff attendance is required, minimum of one (1) staff person required to attend to satisfy requirements. Multiple staff may attend if costs for attendance are covered in Subrecipient’s annual budget.

- **Fiscal training** – fiscal agent or project coordinator, whoever is most responsible for creating and monitoring budget, procurements, invoices, budget decisions, or budget amendments for the SNAP-Ed program.

- **Food handler training** – all staff who will handle, prepare, cook, assemble, and/or serve food or drink to participants or the public.

- **Training on data collection and reporting** – project coordinator or any staff person responsible for collecting, reporting, or entering SNAP-Ed related data.

- **Regional meeting(s), when provided** – project coordinator or any qualified designated staff person.

- **Annual State SNAP-Ed forum, when provided** - project coordinator or any qualified designated staff person.

- **SNAP-Ed Curriculum training (either in person or online)** (only required for direct education strategies) – project coordinator or qualified designated staff person responsible for delivering SNAP-Ed curricula to SNAP-Ed eligible audience.

- **SNAP-Ed Systems Approaches for Healthy Communities training (online or in person, when provided)** - project coordinator and all staff involved in

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<th>Who attended</th>
<th>Date completed</th>
<th>New hires to complete within 30 days of hire.</th>
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<td>On-time completion of all required trainings by required SNAP-Ed staff.</td>
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<td>For the Period: 01/01/22 to 09/30/23, 10/01/23 to 12/31/24 TBD</td>
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<td>Attendance of required or appropriate staff person(s) at all required meetings.</td>
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<td>Fiscal: Annually, and no later than March 31, 2022. FFY23-24 TBD.</td>
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<td>Demonstration of satisfactory understanding of the information and concepts included in required trainings.</td>
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<td>SNAP-Ed Curriculum: New direct education staff trained within 30 days for specific curriculum to be used in direct education strategy, or before providing SNAP-Ed direct education activities to SNAP-Ed audience. Project coordinator or qualified designated staff person to complete additional SNAP-Ed Curriculum training when new information is provided for specific curriculum to be used in direct education strategy.</td>
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<td>Food handler training: Completion of a Washington State authorized food handler or food worker training by all staff who will handle and serve food to the public.</td>
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<td>Data collection and reporting: Annually, or more often as needed. If approved data collection system changes, every SNAP-Ed funded staff member entering data will be required to complete training on any new expectations or system changes on the day of, or within 30 days of when the training is provided.</td>
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<td>Coordinator meetings: Attendance of project coordinator or qualified, designated staff person to at least 50% of all coordinator meetings provided.</td>
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<td>Annual Forum: Annually, when provided, and no later than 9/30/22. FFY23-24 TBD</td>
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<td>Regional meetings: Attendance of project coordinator or qualified, designated staff person to at least 50% of all regional meetings provided.</td>
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<td>Coordinator meetings: Completed on dates scheduled by DOH, when provided.</td>
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<td>State Forum: Attendance of project coordinator or qualified, designated staff person to all state forums provided.</td>
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<td>SNAP-Ed Systems Approaches for Healthy Communities: Demonstrate satisfactory understanding of the information and concepts included in the training. Satisfactory application of knowledge and skill learned from training to SNAP-Ed project, as needed.</td>
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<td>If required meeting or training is not provided, Subrecipient is not required to make up requirements for attendance and will be in compliance. Attendance at required meetings and completion of required trainings required only when provided.</td>
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<td>MEASURE</td>
<td>Documentation showing required person(s) and date(s) of attendance for all web-based and in-person required meetings.</td>
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**For the Period:**
- 01/01/22 to 09/30/23
- 10/01/23 to 12/31/24 TBD

**Fiscal:** Annually, and no later than March 31, 2022. FFY23-24 TBD.

**SNAP-Ed Curriculum:** New direct education staff trained within 30 days for specific curriculum to be used in direct education strategy, or before providing SNAP-Ed direct education activities to SNAP-Ed audience. Project coordinator or qualified designated staff person to complete additional SNAP-Ed Curriculum training when new information is provided for specific curriculum to be used in direct education strategy.

**Data collection and reporting:** Annually, or more often as needed. If approved data collection system changes, every SNAP-Ed funded staff member entering data will be required to complete training on any new expectations or system changes on the day of, or within 30 days of when the training is provided.

**Annual Forum:** Annually, when provided, and no later than 9/30/22. FFY23-24 TBD

**Coordinator meetings:** Completed on dates scheduled by DOH, when provided.
planning, implementing, and evaluating SNAP-Ed project activities.
- **Project coordinator meetings** (conference calls or in person)—project coordinator or qualified designated staff person.

Documentation showing required person(s); date(s) of attendance; and, completion of training for all web-based and in-person required trainings.

Documentation of satisfactory understanding gained from required trainings, and application of applicable knowledge and skills in progress reviews and/or monitoring reports.

### 4.0 SNAP-Ed Inventory

SNAP-Ed Subrecipients are required by regulation to keep an up-to-date inventory list that includes all non-capital equipment, approved capital equipment, purchased curriculum, and other SNAP-Ed purchased items that are not disposable. This list should include items purchased in prior fiscal years still in use and in possession of the Subrecipient. This list should be updated per the due dates required. Agencies are required to follow the DOH SNAP-Ed Inventory policy and procedure.

*See special requirements section - Monitoring*

On-time updates to SNAP-Ed inventory list.

1. Inventory list updated per due dates required.
2. Inventory list contains complete list of all items purchased with SNAP-Ed funds in current fiscal year and previous fiscal years still in use and in possession of the Subrecipient.

**MEASURE**

Completed documentation showing updated SNAP-Ed inventory using approved form/system provided.

**Regional meetings:** Completed on dates scheduled by DOH, when provided.

**SNAP-Ed systems approaches training online:** At least once within the three year period of performance, and no later than the end of the first fiscal year within the three year period of performance.

- **Due:** On or before 9/30/22, FFY23-24 TBD

All SNAP-Ed funded staff with programmatic responsibilities will complete at least once. Current staff who have not taken this training will complete by September 30, 2022. New hires (defined as May 1, 2022 forward) to take within 6 months of start date.

### 5.0 SNAP-Ed A19 Invoices

Subrecipients must use the A19 invoice form specific to the DOH SNAP-Ed program. This document will be sent to all Subrecipients prior to October 31 of the current fiscal year.

On-time delivery of correct completion of SNAP-Ed A19 invoices, using the current form for the fiscal year.

**For the Period:**

01/01/22 to 09/30/23
10/01/23 to 12/31/24 TBD

**Due:** Inventory list is required to be updated at minimum annually and no later than 9/15/22. FFY23-24 TBD.

At the time of a fiscal or project monitoring review, or when requested, an up-to-date inventory list must be made available.

**See payment information as referenced in task number 1.0**
On-time delivery of detailed ledger supporting the costs to be reviewed by SNAP-Ed program via the most current submission procedure before approval of payment.

Complete documentation of all actual costs incurred shall be accompanied by the Subrecipient’s financial system report. If Subrecipient does not have a financial reporting system, the Subrecipient must check with the DOH SNAP-Ed program for further guidance.

**MEASURE**

SNAP-Ed invoices (A19) with all documented costs and any required accompanying materials received at DOH by due dates required, or by approved extension date.

**Due:** Monthly - Submit invoices to DOH no later than 30 calendar days after the end of the preceding month. (E.g. October A19 invoice submitted no later than November 30)
- January: 2/28/22
- February: 3/30/22
- March: 4/30/22
- April: 5/30/22
- May: 6/30/22
- June: 7/30/22
- July: 8/30/22
- August: 9/30/22

**Final invoice is due** November 30th, 2022 or follow close-out schedule. FFY23-24 TBD.

*If pre-approved in writing by DOH, agencies can submit invoices every two months. Upon approval, a list of submission dates will be provided.

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**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.

**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 Data Universal Numbering System (DUNS®) number.

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

**Program Specific Requirements/Narrative**

- Contractor shall ensure, and shall require of its subcontractor, that services provided by the subcontractor are provided in accordance with the terms and conditions of the Contract; and Contractor is responsible for the acts and omissions of the subcontractor.
- Contractor shall ensure that the subcontractor and subcontractor’s staff who will have unsupervised access to children or vulnerable adults served under the Contract have each completed and received a satisfactory background check before providing services to DSHS clients, as required under the Contract.
- Contractor shall ensure that the subcontractor has and maintains insurance with the same types and limits of coverage as required of the Contractor under the Contract.
- Contractor is responsible to ensure that all terms, conditions, assurances, and certifications set forth in this Contract are included in the subcontract, including all confidentiality and data security requirements.
All contract terms in the above-referenced contract remain in full force and effect and nothing in this Checklist shall be construed as waiver of terms in the above-referenced Contract.

**Contract Noncompliance and Corrective Action (see CFR § 200.338 Remedies for noncompliance)**
The Subrecipient must meet the required set of acceptable deliverables/outcomes and adhere to contractual obligations. The contract’s acceptable deliverables/outcomes along with specific due dates will be determined by the DOH SNAP-Ed program and provided to the Subrecipient in writing. Based on contract performance (as documented in progress reviews, project monitoring reports, and fiscal monitoring reports) and after implementation of other specific conditions as appropriate listed in CFR § 200.207 - Specific conditions (see https://www.govregs.com/regulations/2/200.207), DOH reserves the right to withhold up to 10% of funds from the next applicable payment to the Subrecipient for deliverables/outcomes that are documented as consistently incomplete; continually late (without approved extension by DOH in writing); found to be unacceptable or unsatisfactory according to the standards of acceptable deliverables/outcomes outlined in the Statement of Work; or, not carried out sufficiently or consistently and documented as such. After DOH SNAP-Ed provides documentation of the issue(s) and outlines the appropriate corrective action in writing, and with approval from the DOH SNAP-Ed program manager, the first withholding of funds up to 10% would occur one time and allow 60 days for the appropriate corrective action to be completed by the Subrecipient. If satisfactory corrective action is completed within 60 days, the funds withheld will be released to the Subrecipient. If satisfactory corrective action does not take place within 60 days, up to 5% of funds will be withheld from each subsequent monthly payment until the appropriate corrective action is completed. If satisfactory corrective action is completed after the 60-day window, the initial 10% of funds withheld will not be provided as reimbursement to the Subrecipient as penalty. The subsequent monthly withholdings (up to 5% per month) will be reimbursed to the Subrecipient upon satisfactory completion of the corrective action. The Subrecipient may request reconsideration by submitting a letter to Washington Department of Health SNAP-Education, PO Box 47886, Olympia, WA 98504-7886, or in writing via email to snap-ed@doh.wa.gov.

All invoices must be approved by DOH prior to payment; approval will not be unreasonably withheld. DOH will authorize payment only upon satisfactory and on-time completion of acceptance deliverables/outcomes and for allowable costs as outlined in the SNAP-Ed federal guidance, statement of work, state plan, and/or budget. DOH will return all incorrect or incomplete invoices and will not pay for services that occur outside the period of performance or that are deemed unallowable costs.

**Additional Details Regarding Deliverables**
Required deliverables for SNAP-Ed reporting will depend on approved SNAP-Ed plan activities for each Subrecipient, e.g. if direct education is not an approved plan activity for a Subrecipient, submission of pre/post surveys is not a required deliverable for that Subrecipient. To attend required trainings during fiscal year, the Subrecipient must use the travel funds within their current allotted budget to send the minimum number of one (1) staff person to the required training. The Subrecipient may request additional travel funds from DOH for required training(s) if necessary and if funds are available.

**Monitoring Expectations**
The Subrecipient’s premises and records will be made available upon request to DOH, DSHS, and USDA staff for the purposes of observing project activities and reviewing for project and fiscal compliance. All non-capital equipment, capital equipment, reusable educational materials and supplies, and any non-disposable items purchased using SNAP-Ed funds should be tracked in an inventory list and available for review upon request. Based on fiscal and project monitoring results or findings, additional monitoring during the fiscal year may be required at the discretion of the DOH SNAP-Ed program, DOH fiscal analyst, or DOH fiscal monitoring unit. Completed project and fiscal monitoring reports with suggestions, observations, comments, feedback, findings, and/or corrective action will be kept on file at DOH and shared with Subrecipients regularly and by request.

**Staff Requirements**
Upon request by DOH, the Subrecipient must demonstrate that SNAP-Ed staff meet requirements appropriate to their positions including but not limited to: background checks, food handlers’ permits, qualifications, and training required by DOH.

**Project Coordinator Requirements**
The Subrecipient must maintain a SNAP-Ed project coordinator. The project coordinator is the main contact between Department of Health SNAP-Ed team and the Subrecipient. DOH SNAP-Ed expectations for the project coordinator responsibilities include:

- Ensure all contract deliverables are met.
- Coordinate the planning, implementation, evaluation, and reporting of all parts of the approved project plan.
• Comply with and remain knowledgeable about all WA SNAP-Ed and DOH SNAP-Ed policies and procedures.
• Comply with and remain knowledgeable about the National SNAP-Ed Guidance.
• Ensure staff and any sub-Subrecipients funded through this contract stay informed of current and new SNAP-Ed policies, and are held accountable to policies when needed.
• Ensure staff and any sub-Subrecipients meet requirements appropriate to their positions, including but not limited to: background checks, food handlers’ permits, and trainings required by WA SNAP-Ed and DOH.
• Attend, or designate and send qualified staff member as proxy to, required DOH and State SNAP-Ed meetings and trainings.
• Monitor or maintain knowledge of project budget status, including estimated spend out and total dollars spent to date.
• Submit plan and budget amendments for approval as outlined in the current year’s policy and procedures.
• Coordinate the on-time completion of all data entry and reporting.
• Ensure photo and media release forms are obtained for persons featured in SNAP-Ed programming photographs or videos.

Communication Requirements
The Subrecipient must maintain communication with DOH SNAP-Ed. Communication required between DOH SNAP-Ed and the Subrecipient will not be unreasonable or excessive. DOH SNAP-Ed expectations for communication include:
• Submit updates to DOH following any change in contact information for the project coordinator, fiscal agent, contract signatory, or any SNAP-Ed funded staff within 10 business days of the change.
• Be available for regular and intermittent meetings, both in person and phone, with DOH SNAP-Ed as agreed upon or as needed.
• Respond to all DOH and SNAP-Ed Statewide initiative requests within the timeline requested.
• Maintain or obtain an internet connection for communication with DOH, for access to DOH SharePoint webpages, to view updates and messages from Washington SNAP-Ed through the WA SNAP-Ed Providers website, and for reliable reporting of SNAP-Ed activities. If reliable internet connection cannot be secured, the Subrecipient and DOH SNAP-Ed will agree on a plan for necessary communication, data entry, and reporting.
• Obtain a Secure Access Washington (SAW) account to access DOH SNAP-Ed SharePoint webpages.

SNAP-Ed Assurances:
The following assurances must be followed (see program Guidance https://snaped.fns.usda.gov/program-administration/guidance-and-templates)
• The Subrecipient is fiscally responsible for activities funded with Supplemental Nutrition Assistance Program Education funds and is liable for repayment of unallowable costs.
• Programming is provided to approved SNAP-Ed eligible audiences.
• Only expanded or additional coverage of those activities funded under the Expanded Food and Nutrition Education Program (EFNEP) may be claimed under the SNAP-Ed grant. Approved activities are those designed to expand the State's current EFNEP coverage in order to serve additional SNAP-Ed targeted individuals. In no case may activities funded under the EFNEP grant be included in the budget for SNAP-Ed.
• Contracts are procured through competitive bid procedures governed by State procurement regulations.
• Program activities are conducted in compliance with all applicable Federal laws, rules, and regulations including Civil Rights and OMB regulations governing cost issues.
• Program activities do not supplant existing nutrition education and obesity prevention programs, and where operating in conjunction with existing programs, enhance as well as supplement them. This applies to all activities and costs under the Federal budget.
• Program activities are reasonable and necessary to accomplish SNAP-Ed objectives and goals.
• All materials developed with SNAP-Ed funds include the appropriate USDA non-discrimination statement and credit SNAP as a funding source in standard font that is easily readable.

SNAP-Ed Statewide Initiatives
Subrecipients are expected to communicate with, respond to, and comply with requests, guidance, requirements, and/or on-site visits from all contracted SNAP-Ed statewide initiative entities.
Any SNAP-Ed curriculum modifications should be developed and executed based on the most current Guidance for Curriculum Modification, found under “Guidance and Process” on WA SNAP-Ed Providers website. Subrecipients must consult DOH SNAP-Ed as directed.

After notification to the DOH SNAP-Ed implementing agency, the Subrecipient may adjust or deny requests, requirements, and/or site visits from any contracted SNAP-Ed statewide initiative entities if said request, requirement, and/or site visit is deemed unreasonable, burdensome, unnecessarily costly, or inequitable after appropriate consideration and deliberation between the Subrecipient, DOH SNAP-Ed, and the contracted SNAP-Ed statewide initiative entity/entities; and, when necessary, DSHS. After appropriate consideration and deliberation, the resulting decision about whether or not the Subrecipient must comply or can adjust or deny a specific will be provided in writing to the Subrecipient from DOH SNAP-Ed and/or DSHS.

**Health and Safety**
Subrecipients are not required to work under conditions that could endanger their health, safety, or well-being. Additionally, Subrecipients should ensure they are not putting any SNAP-Ed audience or community members in situations that could endanger their health, safety, or well-being. Participation in SNAP-Ed by the SNAP-Ed audience is voluntary. If an activity is deemed unsafe, Subrecipients must adapt activities as needed to allowable and safe alternatives. For a given situation, all Subrecipients and SNAP-Ed activities should follow current health and safety laws, regulation and guidance from the designated authorities in the applicable city/town, county, state, and/or the related federal authority, e.g. CDC, USDA. If Subrecipient is unable to adapt activities as needed to safe, allowable alternatives within their allocation, funding for the current fiscal year may change after sufficient and acceptable technical assistance between Subrecipient and DOH SNAP-Ed and after prior written notification to the Subrecipient. Any change in annual funding due to inability to adapt project activities as needed to safe, allowable alternatives will not be a permanent change in annual funding, unless accompanied by actions outlined under the ‘Contract Noncompliance and Corrective Action’ section.

**Audits**
The Subrecipient must make State financial and program audits or reviews conducted by other entities available to the DOH, DSHS, USDA, or its designee.

**Indirect Rate/Allocation Plan**
All indirect rate/allocation plans must be submitted and preapproved by the DOH grants office and the DOH SNAP-Ed program. The Subrecipient is responsible for ensuring that indirect costs included in the Subrecipient’s SNAP-Ed plan and budget are supported by an indirect rate and/or cost allocation plan approved by the appropriate agency. The Subrecipient cannot bill indirect costs that are determined to be unacceptable and will be disallowed.

**Annual Civil Rights Training Requirement** (see USDA Instruction Number 113-1 Chapter XI) http://www.fns.usda.gov/sites/default/files/113-1.pdf “Training is required so that people involved in all levels of administration of programs that receive Federal financial assistance understand civil rights related laws, regulations, procedures, and directives. Local agencies are responsible for training their subrecipients, including ‘frontline staff.’ ‘Frontline staff’ who interact with program applicants or participants, and those persons who supervise ‘frontline staff’ must be provided civil rights training an annual basis.”

**Records Maintenance - Record Retention and Management - State Agency and All Subrecipients 7CFR 272.2**
DOH SNAP-Ed regulations require that all records related to the SNAP-Ed program be retained for six (6) years from fiscal closure. This requirement applies to fiscal documentation and procurement records, contract related documents and emails, progress reports, monitoring reports, and SNAP-Ed client information (pre/post surveys, demographic cards, etc.). Supporting documentation may be kept at the Subrecipient level but shall be available for review within six years from the date of the last quarterly claim submittal. Any costs that cannot be substantiated by source documents will be disallowed as charges to SNAP-Ed.

**Travel**
The Subrecipient is expected to comply with the Office of Financial Management’s Travel Management Requirement and Restrictions as found in policy 10.10 (http://www.ofm.wa.gov/policy/10.htm), with the travel requirements found in the current year’s SNAP-Ed federal guidance, and with any travel related DOH SNAP-Ed policy and procedures. If the Subrecipient organization’s travel related policy and procedures are in conflict with any of the aforementioned travel related federal or state policies and procedures, the Subrecipient organization will follow the stricter of the travel related policy and procedures unless otherwise approved and allowable by DOH or higher authority.

**Amendments**
Subrecipients should check the current year’s federal SNAP-Ed guidance, the current year’s DOH SNAP-Ed budget amendment guidance, and/or with a DOH SNAP-Ed program consultant to know what changes they can make on their own and what changes require an amendment and pre-approval in writing. Notify DOH staff prior to implementing amendments that significantly change the scope or direction of the approved project plan, including creating new or completely ending interventions, or adding different recruitment or delivery sites for reaching SNAP eligible population. Following the current year’s guidance when required, subrecipients must submit a written plan amendment or written budget amendment request to DOH, and receive written approval from DOH, prior to making any changes within their project or budget and prior to making any purchases included within the amendment. Any requests needing USDA approval must be submitted to DOH no later than April 1st of each fiscal year, or no later than date specified by USDA, DSHS, or DOH. Following the current year’s guidance when required, if Subrecipients submit plan or budget no cost amendments that do not require DSHS or USDA approval, DOH can review those and make approvals on a case by case basis during the federal fiscal year following the current year’s guidance when required. All cost amendments that do not require DSHS or USDA approval should be submitted to DOH no later than July 16th of each fiscal year.

**Overtime**

Staff overtime is not billable in the DOH SNAP-Ed program unless it has been reviewed by the DOH SNAP-Ed program in advance and approved in writing.

**Special Funding Requirements**

Payment for deliverables as specified herein is dependent on receipt of funding from the USDA funding sources. In the event funding is not received, DOH is under no obligation to make payments for the deliverables as specified. If funding is reduced or limited in any way after the effective date of this contract and prior to normal completion, DOH may terminate task(s), remove funds, or reallocate funds at DOH’s discretion under new funding limitations and conditions. DOH will make payments only upon the receipt of the funding. DOH will notify the Subrecipient within 10 working days upon notice by the funding source of funding availability.

**Special Billing Requirements**

1. All invoices, billing, and reimbursements must be in compliance with all applicable Federal laws, rules, regulations including the current year SNAP-Ed Guidance and OMB circulars governing cost issues.

2. Total costs billed will not exceed the USDA-approved budget amount listed in the box below.
   - Bills must be for only SNAP-Ed specific activities, using a DOH A19-1A Invoice voucher.
   - A SNAP-Ed specific A19-1A must be submitted to the subrecipient’s designated DOH SNAP-Ed staff member within 30 days of the last day of the month for which the work is being billed, OR
   - A Subrecipient may request pre-approval to bill every 2 months instead, in which case, that Subrecipient is required to adhere to the billing due dates provided by DOH.

3. The SNAP-Ed program will deny payment for any costs not submitted by the due date without prior approval. If for ANY reason a Subrecipient is unable to submit the SNAP-Ed A-19-1A on the due date, the Subrecipient is required to submit a request for an exception to the DOH no later than 7 days prior to due date to the DOH SNAP-Ed program. The SNAP-Ed program reserves the right and responsibility to either approve or deny the request for an exception and will reply to the request.

4. Supporting documentation for each month must be submitted with each SNAP-Ed A19-1A.
   - At the very least this means a copy of a Subrecipient’s financial expanded/detailed general ledger level report.
   - Additionally, all receipts, timecards and other supporting documentation, as noted by USDA, must be available upon request.

5. If a Subrecipient meets one of the criteria below, they will need to submit all SNAP-Ed backup documentation with each bill and this requirement will continue until further notice by DOH.
   - All new SNAP-Ed Subrecipients within their 1st fiscal year.
   - Subrecipients with current fiscal findings.
   - Subrecipients who have not submitted adequate or accurate backup documentation within the last year.
   - Subrecipients who receive a rating of “High” from the DOH Federal Subrecipient Risk Assessment Tool.

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**BUDGET**

Exhibit A, Statement of Work  Page 12 of 13  Contract Number CLH31014 -Amnd#4
Template September 2021
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<thead>
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"CLH31014 Kitsap Amend #4" History

📅 Document created by Brenda Henrikson (Brenda.Henrikson@DOH.WA.GOV)
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📅 Document e-signed by Keith Grellner (keith.grellner@kitsappublichealth.org)
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📅 Document e-signed by Brenda Henrikson (Brenda.Henrikson@DOH.WA.GOV)

✅ Agreement completed.
  2022-05-04 - 9:31:08 PM GMT