KITSAP PUBLIC HEALTH DISTRICT 2022-2024 CONSOLIDATED CONTRACT

CONTRACT NUMBER: CLH31014 AMENDMENT NUMBER: 21

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.

11.	IS MUTU	JALLY AGREED: That the contract is hereby amende	d as follows:								
1.	the DOI	H Finance SharePoint site in the Upload Center at the fo	nts of work, which are incorporated by this reference and located or ollowing URL: /sitepages/home.aspx?=e1:9a94688da2d94d3ea80ac7fbc32e4d7c								
	\boxtimes	Adds Statements of Work for the following programs	:								
		Childhood Lead Poisoning Prevention - Effective July Injury & Violence Prevention-LHJ Opioid Campaign									
		Amends Statements of Work for the following progra	ms:								
		Executive Office of Resiliency & Health Security-WE HIV Client Services-HOPWA - Effective July 1, 2024 Office of Drinking Water Group A Program - Effective Office of Immunization COVID-19 Vaccine - Effective Office of Immunization-Regional Representatives - Effective	4 ve January 1, 2022 ve January 1, 2022								
		Deletes Statements of Work for the following program	ns:								
2.	Exhibit	B-21 Allocations, attached and incorporated by this ref	erence, amends and replaces Exhibit B-20 Allocations as follows:								
		Increase of for a revised maximum consideration	on of								
		Decrease of <u>\$113,286</u> for a revised maximum consider	eration of <u>\$23,345,927</u> .								
		No change in the maximum consideration of Exhibit B Allocations are attached only for information	onal purposes.								
Un	less desig	nated otherwise herein, the effective date of this amend	lment is the date of execution.								
AL	L OTHE	R TERMS AND CONDITIONS of the original contrac	t and any subsequent amendments remain in full force and effect.								
IN	WITNES	S WHEREOF, the undersigned has affixed his/her sign	nature in execution thereof.								
K	STATE OF WASHINGTON DEPARTMENT OF HEALTH										
Si	gnature:		Signature:								
Yolar	Yolanda Fong da Fong (Nov 13, 2024 10:	2 2	Brends Herrikson (Nov 13, 2024 17:27 PST)								
D	ate:		Date:								
Ν	lov 13, 20	24	Nov 13, 2024								

APPROVED AS TO FORM ONLY Assistant Attorney General

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DOH Use Only											
				BARS	Statemen	t of Work		Accounts		Funding	Chart of
	Federal Award		Assist	Revenue	LHJ Fund			g Period		Period	Accounts
Chart of Accounts Program Title	Identification #	Amend #	List #*	Code**		U		End Date	Amount	SubTotal	Total
Ü											
FFY23 IAR SNAP Ed Prog Mgnt-Region 5	207WAWA5Q3903	Amd 9	10.561	333.10.56	10/01/22	09/30/23	10/01/22	09/30/23	\$115,813	\$115,813	\$213,829
FFY22 IAR SNAP Ed Prog Mgnt-Region 5	207WAWA5Q3903	Amd 7	10.561	333.10.56	01/01/22	09/30/22	10/01/21	09/30/22	(\$19,204)	\$98,016	
FFY22 IAR SNAP Ed Prog Mgnt-Region 5	207WAWA5Q3903	Amd 4	10.561	333.10.56	01/01/22	09/30/22	10/01/21	09/30/22	\$12,723		
FFY22 IAR SNAP Ed Prog Mgnt-Region 5	207WAWA5Q3903	Amd 1	10.561	333.10.56	01/01/22	09/30/22	10/01/21	09/30/22	\$104,497		
FFY25 SNAP Ed Prog Mgnt Admin IAR	NGA Not Received	Amd 20	10.561	333.10.56	10/01/24	12/31/24	10/01/24	09/30/25	\$53,765	\$53,765	\$181,199
FFY24 SNAP Ed Prog Mgnt Admin IAR	207WAWA5Q3903	Amd 15	10.561	333.10.56	10/01/23	09/30/24	10/01/23	09/30/24	\$127,434	\$127,434	,
Hous. Opp. for Ppl w/AIDS CARES COVID-19	WA-H2001W074	Amd 4	14.241	333.14.24	01/01/22	06/30/23	01/01/22	06/30/23	\$11,418	\$11,418	\$11,418
FFY24 Hsng-PPL w/AIDS Formula HUD	WAH23-F999	Amd 21	14.241	333.14.24	07/01/24	12/31/24	08/10/23	08/09/26	\$69,533	\$69,533	\$419,965
FFY23 Housing People with AIDS Formula HUD	WAH23-F999	Amd 16			09/01/23			08/09/26	\$300	\$113,064	,
FFY23 Housing People with AIDS Formula HUD	WAH23-F999	Amd 15			09/01/23			08/09/26	\$112,764	, ,,,,	
FFY22 Housing People with AIDS Formula HUD	WAH21-F999	Amd 14		333.14.24			09/12/22	09/11/25	\$23,000	\$126,989	
FFY22 Housing People with AIDS Formula HUD	WAH21-F999	Amd 10, 14		333.14.24			09/12/22	09/11/25	\$103,989	*	
FFY21 Housing People with AIDS Formula	WAH21-F999	Amd 16			09/01/23			08/24/24	\$3,200	\$3,200	
FFY21 Housing People with AIDS Formula	WAH21-F999	Amd 10	14.241	333.14.24	07/01/22	06/30/23	07/01/20	06/30/23	(\$103,989)	\$27,229	
FFY21 Housing People with AIDS Formula	WAH21-F999	Amd 5	14.241	333.14.24	07/01/22	06/30/23	07/01/20	06/30/23	\$131,218	, , ,	
FFY21 Housing People with AIDS Formula	WAH21-F999	Amd 4	14.241		01/01/22			06/30/23	\$28,622	\$49,215	
FFY21 Housing People with AIDS Formula	WAH21-F999	Amd 2	14.241	333.14.24	01/01/22	06/30/22	07/01/20	06/30/23	\$20,593		
FFY20 Housing People with AIDS Formula	WAH20-F999	Amd 4	14.241		01/01/22	06/30/22	07/01/20	06/30/23	\$4,045	\$30,735	
FFY20 Housing People with AIDS Formula	WAH20-F999	Amd 1	14.241	333.14.24	01/01/22	06/30/22	07/01/20	06/30/23	\$26,690		
FFY24 Swimming Beach Act Grant IAR (ECY)	01J74301	Amd 17	66.472	333.66.47	03/01/24	09/30/24	01/01/24	11/30/24	\$25,000	\$25,000	\$75,000
FFY23 Swimming Beach Act Grant IAR (ECY)	01J74301	Amd 11		333.66.47		10/31/23		10/31/23	\$25,000	\$25,000	****
FFY22 Swimming Beach Act Grant IAR (ECY)	01J74301	Amd 2	66.472	333.66.47	03/01/22			11/30/22	\$25,000	\$25,000	
FFY24 PHEP BP1-CDC-LHJ Partners	NU90TU000055	Amd 20	93.069	333.93.06	07/01/24	12/31/24	07/01/24	06/30/25	\$177,207	\$177,207	\$177,207
FFY23 PHEP BP5 LHJ Funding	NU90TP922043	Amd 14	93.069	333.93.06	07/01/23	06/30/24	07/01/23	06/30/24	\$295,345	\$295,345	\$790,580
FFY22 PHEP BP4 LHJ Funding	NU90TP922043	Amd 7	93.069	333.93.06	07/01/22	06/30/23	07/01/22	06/30/23	\$295,345	\$295,345	
FFY21 PHEP BP3 LHJ Funding	NU90TP922043	Amd 7	93.069	333.93.06	07/01/22	06/30/23	07/01/21	06/30/23	\$4,176	\$4,176	
FFY21 PHEP BP3 LHJ Funding	NU90TP922043	Amd 2	93.069	333.93.06	01/01/22	06/30/22	07/01/21	06/30/23	\$195,714	\$195,714	
FFY22 TB Uniting for Ukraine Supp	NU52PS910221	Amd 10, 13	93.116	333.93.11	07/01/22	09/30/23	05/21/22	09/30/23	\$7,500	\$7,500	\$7,500
FFY22 Overdose Data to Action Prev	NU17CE925007	Amd 10	93.136	333.93.13	09/01/22	08/31/23	09/01/22	08/31/23	\$57,417	\$107,417	\$127,324
FFY22 Overdose Data to Action Prev	NU17CE925007	Amd 7	93.136	333.93.13	09/01/22	08/31/23	09/01/22	08/31/23	\$50,000		

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				BARS	Statement	t of Work	Chart of	Accounts		Funding	Chart of
	Federal Award		Assist	Revenue	LHJ Fund	ing Period	Fundin	g Period		Period	Accounts
Chart of Accounts Program Title	Identification #	Amend #	List #*	Code**		U		End Date	Amount	SubTotal	Total
FFY21 Overdose Data to Action Prev	NU17CE925007	Amd 3	03 136		01/01/22				\$19,907	\$19,907	Total
11 121 Overdose Data to Action Tiev	NO1/CL/2300/	And 3	75.150	333.73.13	01/01/22	00/31/22	07/01/21	00/31/22	\$17,707	\$17,707	
COVID19 CDC Vaccines	NH23IP922619	Amd 21	93.268	333.93.26	01/01/22	06/30/24	07/01/20	06/30/24	(\$283,424)	\$0	\$0
COVID19 CDC Vaccines	NH23IP922619	Amd 7	93 268	333 93 26	01/01/22	06/30/24	07/01/20	06/30/24	\$283,424		
COVIDITY CIPC VICEINGS	14112311 / 2201 /	Tilla /	75.200	333.73.20	01/01/22	00/30/21	07/01/20	00/30/21	Ψ203,121		
COVID19 Vaccines R4	NH23IP922619	Amd 20	93.268	333.93.26	07/01/24	12/31/24	07/01/20	12/31/24	\$276,000	\$276,000	\$1,194,477
COVID19 Vaccines R4	NH23IP922619	Amd 21	93.268	333.93.26	01/01/22	06/30/24	07/01/20	06/30/24	(\$113,737)	\$918,477	
COVID19 Vaccines R4	NH23IP922619	Amd 5	93.268	333.93.26	01/01/22	06/30/24	07/01/20	06/30/24	\$5,000		
COVID19 Vaccines R4	NH23IP922619	Amd 1	93 268	333 93 26	01/01/22	06/30/24	07/01/20	06/30/24	\$1,027,214		
COVIDITY VACCINGS ICV	14112311 / 2201 /	i ilita 1	75.200	333.73.20	01/01/22	00/30/21	07/01/20	00/30/21	Ψ1,027,211		
FFY24 CDC PPHF Ops	NH23IP922619	Amd 14	93.268	333.93.26	07/01/23	06/30/24	07/01/23	06/30/24	\$250	\$2,750	\$2,750
FFY24 CDC PPHF Ops	NH23IP922619	Amd 13	93.268	333.93.26	07/01/23	06/30/24	07/01/23	06/30/24	\$2,500		
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FFY25 CDC VFC Ops	NGA Not Received	Amd 20	93.268	333.93.26	07/01/24	12/31/24	07/01/24	06/30/25	\$16,134	\$16,134	\$33,881
FFY24 CDC VFC Ops	NH23IP922619	Amd 14	93.268	333.93.26	07/01/23	06/30/24	07/01/23	06/30/24	\$1,613	\$17,747	
FFY24 CDC VFC Ops	NH23IP922619	Amd 13	93.268	333.93.26	07/01/23	06/30/24	07/01/23	06/30/24	\$16,134		
			70.00		***************************************		***************************************		¥ - v, ·		
FFY25 CDC IQIP Regional Rep	NGA Not Received	Amd 20	93.268	333.93.26	07/01/24	12/31/24	07/01/24	06/30/25	\$41,173	\$41,173	\$71,973
FFY24 CDC IQIP Regional Rep	NH23IP922619	Amd 14	93.268	333.93.26	07/01/23	06/30/24	07/01/23	06/30/24	\$2,800	\$30,800	
FFY24 CDC IQIP Regional Rep	NH23IP922619	Amd 13	93.268	333.93.26	07/01/23	06/30/24	07/01/23	06/30/24	\$28,000		
11 12 vesse iqui regionii rep	1.112011 / 2201 /	11110 10)	222.52.20	0,7,01,25	00/20/21	07/01/25	00,00,21	\$20,000		
FFY23 PPHF Ops	NH23IP922619	Amd 7	93.268	333.93.26	07/01/22	06/30/23	07/01/22	06/30/23	\$2,500	\$2,500	\$4,459
FFY22 PPHF Ops	NH23IP922619	Amd 3	93.268	333.93.26	01/01/22	06/30/22	07/01/21	06/30/22	\$1,959	\$1,959	
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FFY23 VFC IQIP	NH23IP922619	Amd 7	93.268	333.93.26	07/01/22	06/30/23	07/01/22	06/30/23	\$27,588	\$27,588	\$27,588
FFY23 VFC Ops	NH23IP922619	Amd 5	93.268	333.93.26	07/01/22	06/30/23	07/01/22	06/30/23	\$16,134	\$16,134	\$29,004
FFY22 VFC Ops	NH23IP922619	Amd 3	93.268	333.93.26	01/01/22	06/30/22	07/01/21	06/30/22	\$12,870	\$12,870	
FFY19 COVID CARES	NU50CK000515	Amd 2	93.323	333.93.32	01/01/22	04/22/22	04/23/20	07/31/24	\$314,824	\$314,824	\$314,824
FFY19 ELC COVID Ed LHJ Allocation	NU50CK000515	Amd 7	93.323	333.93.32	01/01/22	10/18/22	05/19/20	10/18/22	(\$989,616)	\$155,419	\$155,419
FFY19 ELC COVID Ed LHJ Allocation	NU50CK000515	Amd 2	93.323	333.93.32	01/01/22	10/18/22	05/19/20	10/18/22	\$1,145,035		
									4-,- 10,000		
FFY20 ELC EDE LHJ Allocation	NU50CK000515	Amd 7, 9, 11, 16	93.323	333.93.32	01/01/22	06/30/24	01/15/21	07/31/24	(\$199,494)	\$2,720,344	\$2,720,344
FFY20 ELC EDE LHJ Allocation	NU50CK000515	Amd 2, 9, 11, 16	93.323	333.93.32	01/01/22	06/30/24	01/15/21	07/31/24	\$2,919,838		
		, - , , - ~							. / /		
FFY21 SHARP HAI ELC	NU50CK000515	Amd 19	93.323	333,93.32	09/01/22	12/31/24	08/01/21	07/31/25	\$25,000	\$217,500	\$217,500
FFY21 SHARP HAI ELC	NU50CK000515	Amd 9, 19			09/01/22				\$192,500	Ψ217,500	Ψ217,500
11 121 SIRMO IRUDEC	1103001000313	7111M 7, 17	15.525	555.75.34	07/01/22	12/31/24	30/01/21	37731723	Ψ1,2,300		

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DOH Use Only											
				BARS	Statemen	t of Work		Accounts		Funding	Chart of
	Federal Award		Assist	Revenue	LHJ Fund			g Period		Period	Accounts
Chart of Accounts Program Title	Identification #	Amend #	List #*	Code**				End Date	Amount	SubTotal	Total
•				Cour							1000
FFY21 CDC COVID-19 PHWFD-LHJ	NU90TP922181	Amd 21	93.354	333.93.35	07/01/23	12/31/24	07/01/23	06/30/25	\$200,000	\$600,000	\$600,000
FFY21 CDC COVID-19 PHWFD-LHJ	NU90TP922181	Amd 19	93.354	333.93.35	07/01/23	12/31/24	07/01/23	06/30/25	\$200,000		
FFY21 CDC COVID-19 PHWFD-LHJ	NU90TP922181	Amd 15, 19	93.354	333.93.35	07/01/23	12/31/24	07/01/23	06/30/25	\$200,000		
FFY24 Tobacco-Vape Prev CDC Comp 1	NU58DP006808	Amd 18	93.387	333.93.38	04/29/24	12/31/24	04/29/24	04/28/25	\$19,201	\$19,201	\$92,647
FFY23 Tobacco-Vape Prev Comp 1	NU58DP006808	Amd 12	93.387	333.93.38	04/29/23	04/28/24	04/29/23	04/28/24	\$24,482	\$24,482	
FFY22 Tobacco-Vape Prev Comp 1	NU58DP006808	Amd 5, 9	93.387	333.93.38	04/29/22	04/28/23	04/29/22	04/28/23	\$24,482	\$24,482	
FFY21 Tobacco-Vape Prev Comp 1	NU58DP006808	Amd 2	93.387	333.93.38	01/01/22	04/28/22	04/29/21	04/28/22	\$24,482	\$24,482	
FFY22 Phys Actvty & Nutrition Prog	NU58DP006504	Amd 11	93.439	333.93.43	09/30/22	09/29/23	09/30/22	09/29/23	\$2,000	\$82,000	\$149,000
FFY22 Phys Actvty & Nutrition Prog	NU58DP006504	Amd 7	93.439	333.93.43	09/30/22	09/29/23	09/30/22	09/29/23	\$80,000		
FFY21 Phys Actvty & Nutrition Prog	NU58DP006504	Amd 7	93.439	333.93.43	01/01/22	09/29/22	09/30/21	09/29/22	\$15,000	\$67,000	
FFY21 Phys Actvty & Nutrition Prog	NU58DP006504	Amd 1	93.439	333.93.43	01/01/22	09/29/22	09/30/21	09/29/22	\$52,000		
FFY22 PH Infrastructure Comp A1-LHJ	NE11OE000053	Amd 16	93.967	333.93.96	01/01/24	12/31/24	12/01/22	06/30/25	\$200,000	\$200,000	\$200,000
FFY25 HRSA MCHBG LHJ Contracts	NGA Not Received	Amd 20	93.994	333.93.99	10/01/24	12/31/24	10/01/24	09/30/25	\$39,963	\$39,963	\$332,108
FFY24 HRSA MCHBG LHJ Contracts	B04MC52960	Amd 14	93.994	333.93.99	10/01/23	09/30/24	10/01/23	09/30/24	\$159,854	\$159,854	•
FFY23 HRSA MCHBG LHJ Contracts	B04MC47453	Amd 14	93.994	333.93.99	10/01/22	09/30/23	10/01/22	09/30/23	(\$27,563)	\$132,291	
FFY23 HRSA MCHBG LHJ Contracts	B04MC47453	Amd 7	93.994	333.93.99	10/01/22	09/30/23	10/01/22	09/30/23	\$159,854		
FFY22 HRSA MCHBG Special Proj	B04MC45251	Amd 14	93.994	333.93.99	07/01/23	09/30/23	10/01/22	09/30/23	\$37,563	\$37,563	\$37,563
FFY22 MCHBG LHJ Contracts	B04MC45251	Amd 4	93.994	333.93.99	01/01/22	09/30/22	10/01/21	09/30/22	\$14,691	\$134,581	\$134,581
FFY22 MCHBG LHJ Contracts	B04MC45251	Amd 1	93.994	333.93.99	01/01/22	09/30/22	10/01/21	09/30/22	\$119,890		
SFY1 GFS - Group B		Amd 17	N/A	334.04.90	01/01/24	06/30/24	07/01/23	06/30/25	\$25,230	\$25,230	\$76,985
GFS-Group B (FO-SW)		Amd 10	N/A	334.04.90	01/01/23	06/30/23	07/01/22	06/30/23	\$25,878	\$25,878	
GFS-Group B (FO-SW)		Amd 1	N/A	334.04.90	01/01/22	06/30/22	07/01/21	06/30/22	\$25,877	\$25,877	
State Drug User Health Program		Amd 7	N/A	334.04.91	07/01/22	06/30/23	07/01/21	06/30/23	(\$40,000)	\$0	\$20,000
State Drug User Health Program		Amd 5	N/A	334.04.91	07/01/22	06/30/23	07/01/21	06/30/23	\$40,000		
State Drug User Health Program		Amd 1	N/A	334.04.91	01/01/22	06/30/22	07/01/21	06/30/23	\$20,000	\$20,000	
SFY25 LHJ Opioid Campaign Proviso		Amd 21	N/A	334.04.93	11/01/24	12/31/24	07/01/24	06/30/25	\$24,520	\$24,520	\$24,520
Rec Shellfish/Biotoxin		Amd 13	N/A	334.04.93	07/01/23	12/31/24	07/01/23	06/30/25	\$20,000	\$20,000	\$40,000
Rec Shellfish/Biotoxin		Amd 1	N/A	334.04.93	01/01/22	06/30/23	07/01/21	06/30/23	\$20,000	\$20,000	

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DOH Use Only											
Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**	LHJ Fund	U	Chart of Fundin	Accounts g Period End Date	Amount	Funding Period SubTotal	Chart of Accounts Total
Small Onsite Management (ALEA)		Amd 13	N/A	334.04.93	07/01/24	12/31/24	07/01/23	06/30/25	\$33,333	\$33,333	\$104,166
Small Onsite Management (ALEA)		Amd 13	N/A	334.04.93	07/01/23	06/30/24	07/01/23	06/30/25	\$33,333	\$33,333	
Small Onsite Management (ALEA)		Amd 1	N/A	334.04.93	07/01/22	06/30/23	07/01/21	06/30/23	\$15,000	\$15,000	
Small Onsite Management (ALEA)		Amd 1	N/A	334.04.93	01/01/22	06/30/22	07/01/21	06/30/23	\$22,500	\$22,500	
Small Onsite Management (GFS)		Amd 15	N/A	334.04.93	07/01/24	12/31/24	07/01/23	06/30/25	(\$8,334)	\$0	\$0
Small Onsite Management (GFS)		Amd 13	N/A	334.04.93	07/01/24	12/31/24	07/01/23	06/30/25	\$8,334		
SFY25 Dedicated Cannabis Account		Amd 18	N/A	334.04.93	07/01/24	12/31/24	07/01/24	06/30/25	\$123,755	\$123,755	\$618,773
SFY24 Dedicated Cannabis Account		Amd 13	N/A	334.04.93	07/01/23	06/30/24	07/01/23	06/30/25	\$247,509	\$247,509	
SFY23 Dedicated Cannabis Account		Amd 5, 9	N/A	334.04.93	07/01/22	06/30/23	07/01/22	06/30/23	\$247,509	\$247,509	
SFY22 Marijuana Education		Amd 2	N/A	334.04.93	01/01/22	06/30/22	07/01/21	06/30/23	\$132,277	\$132,277	\$139,848
SFY22 Marijuana Education		Amd 2	N/A	334.04.93	01/01/22	06/30/22	07/01/21	06/30/23	\$7,571	\$7,571	
SFY25 Nicotine Addict Prev & Ed Pro		Amd 18	N/A	334.04.93	07/01/24	12/31/24	07/01/24	06/30/25	\$50,265	\$50,265	\$50,265
SFY24 Tobacco Prevention Proviso		Amd 14	N/A	334.04.93	07/01/23	06/30/24	07/01/23	06/30/24	\$100,530	\$100,530	\$294,530
SFY23 Tobacco Prevention Proviso		Amd 7, 9	N/A	334.04.93	07/01/22	06/30/23	07/01/22	06/30/23	\$4,000	\$194,000	
SFY23 Tobacco Prevention Proviso		Amd 5, 9	N/A	334.04.93	07/01/22	06/30/23	07/01/22	06/30/23	\$190,000		
SFY25 Youth Tobacco Vapor Products		Amd 18	N/A	334.04.93	07/01/24	12/31/24	07/01/24	06/30/25	\$12,241	\$12,241	\$116,347
SFY24 Youth Tobacco Vapor Products		Amd 13	N/A	334.04.93	07/01/23	06/30/24	07/01/23	06/30/25	\$38,402	\$38,402	
SFY23 Youth Tobacco Vapor Products		Amd 5, 9	N/A	334.04.93	07/01/22	06/30/23	07/01/21	06/30/23	\$38,402	\$38,402	
SFY22 Youth Tobacco Vapor Products		Amd 2	N/A	334.04.93	01/01/22	06/30/22	07/01/21	06/30/23	\$27,302	\$27,302	
SFY25 Wastewater Management-GFS		Amd 15	N/A	334.04.93	07/01/24	12/31/24	07/01/23	06/30/25	\$8,334	\$8,334	\$38,334
Wastewater Management-GFS		Amd 1	N/A	334.04.93	07/01/22	06/30/23	07/01/21	06/30/23	\$30,000	\$30,000	
HIV Local Proviso-RW Grant Year 2023		Amd 5	N/A	334.04.98	04/01/23	06/30/23	04/01/23	06/30/23	\$30,814	\$30,814	\$185,184
HIV Local Proviso-RW Grant Year 2022		Amd 5	N/A	334.04.98	07/01/22	03/31/23	04/01/22	03/31/23	\$92,442	\$92,442	•
HIV Local Proviso-RW Grant Year 2022		Amd 10	N/A	334.04.98	04/01/22	06/30/22	04/01/22	03/31/23	(\$19,580)	\$21,174	
HIV Local Proviso-RW Grant Year 2022		Amd 2	N/A	334.04.98	04/01/22	06/30/22	04/01/22	03/31/23	\$19,880	•	
HIV Local Proviso-RW Grant Year 2022		Amd 1	N/A	334.04.98	04/01/22	06/30/22	04/01/22	03/31/23	\$20,874		
HIV Local Proviso-RW Grant Year 2021		Amd 2	N/A	334.04.98		03/31/22	04/01/21	03/31/22	\$19,880	\$40,754	
HIV Local Proviso-RW Grant Year 2021		Amd 1	N/A	334.04.98	01/01/22			03/31/22	\$20,874	•	

Page 6 of 30 Contract Number: Date: O

CLH31014 October 1, 2024

Indirect Rate January 1, 2024-December 31, 2	2024. 20.70 /0 Aumin & Commun	nty Health I gills, 51.5.	2 /0 Environ	illentai 11ea	itii i giiis		DOH I	Jse Only			
				BARS	Statemen	t of Work		Accounts		Funding	Chart of
	Federal Award		Assist	Revenue		ling Period		g Period		Period	Accounts
Chart of Accounts Program Title	Identification #	Amend #	List #*	Code**		0		End Date	Amount	SubTotal	Total
EDVALDA G			37/4	2240400	05/04/04	00/21/24	0.4/0.1/0.4	02/21/25	(025.150)		01.057.505
FFY24 RW Grant Year Rebate		Amd 21	N/A		07/01/24				(\$25,178)	\$0	\$1,876,585
FFY24 RW Grant Year Rebate		Amd 18	N/A	334.04.98			04/01/24		\$25,178	#560.500	
FFY24 RW Grant Year Rebate		Amd 16	N/A	334.04.98			04/01/24		\$568,500	\$568,500	
FFY23 RW Grant Year Rebate		Amd 16	N/A	334.04.98			07/01/23		\$189,500	\$189,500	
RW FFY23 Grant Year Rebate		Amd 13	N/A	334.04.98			07/01/23		\$313,800	\$313,800	
RW FFY23 Grant Year Local (Rebate)		Amd 7	N/A	334.04.98		06/30/23			\$9,940	\$126,086	
RW FFY23 Grant Year Local (Rebate)		Amd 5	N/A	334.04.98			04/01/23		\$116,146		
RW FFY22 Grant Year Local (Rebate)		Amd 7	N/A	334.04.98					\$29,820	\$378,258	
RW FFY22 Grant Year Local (Rebate)		Amd 5	N/A	334.04.98			04/01/22		\$348,438		
RW FFY22 Grant Year Local (Rebate)		Amd 10	N/A	334.04.98					\$19,580	\$135,726	
RW FFY22 Grant Year Local (Rebate)		Amd 1	N/A	334.04.98			04/01/22		\$116,146		
RW FFY21 Grant Year Local (Rebate)		Amd 2	N/A	334.04.98				03/31/22	\$48,569	\$164,715	
RW FFY21 Grant Year Local (Rebate)		Amd 1	N/A	334.04.98	01/01/22	03/31/22	04/01/21	03/31/22	\$116,146		
YR3 TFAH-Trust for America's Health		Amd 2, 10	N/A	334.04.98	10/01/22	03/31/23	10/01/22	09/30/23	\$5,400	\$5,400	\$10,000
YR2 TFAH-Trust for America's Health		Amd 2	N/A	334.04.98	02/01/22	09/30/22	10/01/21	09/30/22	\$4,600	\$4,600	
FPHS-LHJ-Proviso (YR2)		Amd 12	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	\$250,000	\$2,719,000	\$4,064,000
FPHS-LHJ-Proviso (YR2)		Amd 6	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	\$2,469,000	, ,	
FPHS-LHJ-Proviso (YR2)		Amd 7	N/A	336.04.25		06/30/23		06/30/23	(\$1,345,000)	\$0	
FPHS-LHJ-Proviso (YR2)		Amd 1	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	\$1,345,000		
FPHS-LHJ-Proviso (YR1)		Amd 1	N/A		01/01/22				\$1,345,000	\$1,345,000	
SFY25 FPHS-LHJ Funds-GFS		Amd 20	N/A	336.04.25	07/01/24	12/31/24	07/01/24	06/30/25	\$1,824,500	\$3,649,000	\$7,298,000
SFY25 FPHS-LHJ Funds-GFS		Amd 19	N/A	336.04.25			07/01/24		\$1,824,500	42,012,000	4.,,
SFY24 FPHS-LHJ-Funds-GFS		Amd 14	N/A		07/01/23				\$1,180,000	\$3,649,000	
SFY24 FPHS-LHJ-Funds-GFS		Amd 13	N/A				07/01/23		\$2,469,000	42,0,0	
SFY25 Lead Management (FPHS)		Amd 21	N/A	336.04.25	07/01/24	12/31/24	07/01/24	06/30/25	\$15,000	\$15,000	\$15,000
YR 27 SRF - Local Asst (15%) SS		Amd 21	N/A	346,26,64	01/01/24	12/31/24	07/01/23	06/30/25	\$11,750	\$11,750	\$45,250
YR 26 SRF - Local Asst (15%) SS		Amd 21	N/A	346.26.64			07/01/23		(\$11,750)	\$1,250	\$ 10,200
YR 26 SRF - Local Asst (15%) SS		Amd 18	N/A	346.26.64			07/01/23		\$2,250	,=-0	
YR 26 SRF - Local Asst (15%) SS		Amd 15	N/A	346.26.64		12/31/24			\$10,750		
YR 25 SRF - Local Asst (15%) SS		Amd 18	N/A	346.26.64			01/01/23		(\$500)	\$13,250	
YR 25 SRF - Local Asst (15%) SS		Amd 14	N/A	346.26.64					\$500	Ψ13,230	
YR 25 SRF - Local Asst (15%) SS		Amd 14 Amd 11	N/A		01/01/23				\$13,250		
1 K 25 5 Ki - Lucai Assi (1570) 55		Amu 11	1 V / P 1	540.20.04	01/01/23	12/31/23	01/01/23	12/31/23	\$13,230		

Page 7 of 30 **Contract Number:**

GRAND TOTAL

Total Fed

Total State

Date:

CLH31014 October 1, 2024

\$23,345,927

\$8,322,140

\$15,023,787

Indirect Rate January 1, 2022-December 31, 2022: 37.96% Admin & Facilities; 37.96% Community Hlth Pgms (inc. Admin) & 39.47% Environmental Hlth Pgms (inc. Admin) Indirect Rate January 1, 2023-December 31, 2023: 30.08% Admin & Facilities; 30.08% Community Hlth Pgms (inc. Admin) & 36% Environmental Hlth Pgms (inc. Admin)

DOH Use Only

Chart of Accounts BARS Statement of Work **Funding** Chart of Federal Award Assist Revenue **LHJ Funding Period Funding Period** Period Accounts Identification # SubTotal List #* **Chart of Accounts Program Title** Amend # Code** Start Date End Date Start Date End Date Amount Total YR 24 SRF - Local Asst (15%) (FO-SW) SS Amd 7 N/A 346.26.64 01/01/22 12/31/22 07/01/21 06/30/23 \$1,500 \$19,000 YR 24 SRF - Local Asst (15%) (FO-SW) SS Amd 1 N/A 346.26.64 01/01/22 12/31/22 07/01/21 06/30/23 \$17,500 YR 27 SRF - Local Asst (15%) TA Amd 21 346.26.66 01/01/24 12/31/24 07/01/23 06/30/25 \$4,000 \$4,000 \$6,000 N/A YR 26 SRF - Local Asst (15%) TA Amd 21 346.26.66 01/01/24 12/31/24 07/01/23 06/30/25 (\$4,000)**\$0** YR 26 SRF - Local Asst (15%) TA Amd 18 346.26.66 01/01/24 12/31/24 07/01/23 06/30/25 \$4,000 N/A YR 25 SRF - Local Asst (15%) TA Amd 18 346.26.66 01/01/23 12/31/23 01/01/23 12/31/23 (\$2,000)\$0 N/A YR 25 SRF - Local Asst (15%) TA Amd 11 N/A 346.26.66 01/01/23 12/31/23 01/01/23 12/31/23 \$2,000 YR 24 SRF - Local Asst (15%) (FO-SW) TA 346.26.66 01/01/22 12/31/22 07/01/21 06/30/23 \$2,000 Amd 18 N/A \$1,000 YR 24 SRF - Local Asst (15%) (FO-SW) TA 346.26.66 01/01/22 12/31/22 07/01/21 06/30/23 \$1,000 Amd 1 N/A TOTAL \$23,345,927 \$23,345,927 \$23,459,213

Total consideration:

GRAND TOTAL

Indirect Rate January 1, 2024-December 31, 2024: 28.76% Admin & Community Health Pgms; 31.32% Environmental Health Pgms

(\$113,286)

\$23,345,927

^{*}Assistance Listing Number fka Catalog of Federal Domestic Assistance

^{**}Federal revenue codes begin with "333". State revenue codes begin with "334".

DOH Program Name or Title: Childhood Lead Poisoning Prevention -

Effective July 1, 2024

Local Health Jurisdiction Name: Kitsap Public Health District

Contract Number: CLH31014

	_			
SOW Type: Original	Revision # (for this SOW)	Funding Source	Federal Compliance	Type of Payment
		Federal <select one=""></select>	(check if applicable)	Reimbursement
Period of Performance: Jul	ly 1, 2024 through <u>December 31, 2024</u>	State	FFATA (Transparency Act)	☐ Fixed Price
<u></u>	5 -, • • <u> </u>	U Other	Research & Development	

Statement of Work Purpose: The purpose of this statement of work (SOW) is to support Childhood Lead Poisoning Prevention Program implementation to increase blood lead testing, provider outreach, case management, and community engagement.

Note: The full project allocation for July 1, 2024 to June 30, 2025 has been included in this Statement of Work. Any unspent funding as of December 31, 2024 will be included in a new Statement of Work in the 2025-2027 contract effective January 1, 2025 (for a January 1, 2025-June 30, 2025 period of performance).

Revision Purpose: N/A

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Fund Start Date	ing Period End Date	Current Allocation	Allocation Change Increase (+)	Total Allocation
SFY25 LEAD MANAGEMENT (FPHS)	25623851	N/A	336.04.25	07/01/24	12/31/24	0	15,000	15,000
						0	0	0
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						0	15,000	15,000

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Participate in Lead Foundational Public Health Services (FPHS) Core Team	Attendance at regularly scheduled meetings	December 31, 2024	Reimbursement for actual costs, not to exceed total funding consideration.
2	Select and implement model program activity in testing promotion, provider outreach, case management, and/or community engagement	Submit Activity Report to DOH contract manager	December 31, 2024	runding consideration.

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the <u>DOH Finance SharePoint</u> site. Questions related to this SOW, or any other finance-related inquiry, may be sent to finance@doh.wa.gov.

Program Specific Requirements

Special Requirements:

The December 31, 2024 Activity Report should be submitted to the DOH Contract manager and should include the following information:

- 1. Type and amount of spending for the July 1, 2024-December 31, 2024 contract period: staff time, equipment, supplies, services (such as interpretation/translation, etc.), or other types.
- 2. Describe how each type of spending supported implementation of the FPHS Lead Prevention Model Program elements of case management, provider outreach, testing promotion, and/or community engagement?
- 3. Describe the impact of this funding by sharing products and/or success stories (e.g.: a generalized story about how a family or group that benefitted from direct services, how an area of programming advanced, a partnership or collaboration that was formed or enhanced, materials that were produced, etc.).

DOH Program Name or Title: Executive Office of Resiliency & Health Security-

WFD LHJ - Effective July 1, 2023

Local Health Jurisdiction Name: Kitsap Public Health District

Contract Number: CLH31014

SOW Type: Revision	Revision # (for this SOW) 3	Funding Source	Federal Compliance	Type of Payment
			(check if applicable)	Reimbursement
Period of Performance: Jul	y 1, 2023 through <u>December 31, 2024</u>	State Other	FFATA (Transparency Act) Research & Development	Fixed Price

Statement of Work Purpose: The purpose of this statement of work is to provide funding to establish, expand, train, and sustain the LHJ public health workforce to support jurisdictional COVID-19 prevention, preparedness, response, and recovery initiatives, in accordance with the CDC Crisis Response Cooperative Agreement: COVID-19 Public Health Workforce Development (WFD).

Note: Program does not expect to be able to extend funding beyond June 30, 2024. LHJs will not be provided a fund allocation. Program will review invoices and manage use of funds across all LHJs who want to access these funds. Timely invoicing of costs by LHJs to DOH is essential. The program also asks LHJs to inform DOH as soon as possible if they do not plan to invoice for any of these funds.

Note #2: The current consolidated contract ends December 31, 2024. Once a new contract is in place, the Program plans to submit a new statement of work for January 1 - June 30, 2025. The Program plans to allow LHJs to add any unspent funds from 2024 to the new statement of work, once the 2024 invoices have all been submitted and approved. Deliverable due dates after December 31, 2024 are referenced in this statement of work for informational purposes only and will be updated in the January - June 2025 statement of work.

Revision Purpose: The purpose of this revision is to add funds to the statement of work.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Fund	C	Current Allocation	Allocation Change Increase (+)	Total Allocation
FFY21 CDC COVID-19 PHWFD-LHJ	3192621G	93.354	333.93.35	07/01/23	12/31/24	400,000	200,000	600,000
						0	0	0
						0	0	0
						0	0	0
						0	0	0
				·		0	0	0
TOTALS						400,000	200,000	600,000

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Submit names, position titles, email addresses and phone	Submit information by September 15, 2023,	September 15, 2023	Reimbursement for actual
	numbers of key LHJ staff responsible for this statement of	and any changes within 30 days of the		costs not to exceed total
	work, including management, program staff, and accounting	change.	Within 30 days of the	funding allocation amount.
	and/or financial staff.		change.	

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				rage 11 01 30
Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
2	Develop a plan to use these funds for one or more of the allowable costs listed below. Submit plan to the DOH Program Contact for review and prior approval as soon as possible. We want to be sure your planned activities are allowable, and we will be able to reimburse you for the expenses.	Implementation Plan	December 31, 2023, or sooner or when LHJ requests funds or another change to the Plan.	
3	Funding is intended to establish, expand, train, and sustain public health staff to support LHJ COVID-19 prevention, preparedness, response, and recovery initiatives. Funding can be used for permanent full-time and part-time staff, temporary or term-limited staff, fellows, interns, contractors, and contracted employees. Allowable costs include: Costs including, wages and benefits, related to	Implementation Plan Data on form provided by DOH.	December 31, 2023, or sooner or when LHJ requests funds or another change to the Plan. January 10, 2024 July 10, 2024 December 31, 2024	
	recruiting, hiring, and training of new or existing public health staff. • Purchase of supplies and equipment to support the expanded and/or current workforce and any training related to the use of supplies and equipment. • Training and education (and related travel) for new and existing staff on topics such as incident management training, health equity issues, working with underserved populations, cultural competency, disease investigations, informatics or data management, or other needs identified by the LHJ. • Costs of contractors and contracted staff.			
	Notes: Preapproval from DOH is required to contract with these funds. Preapproval is required for the purchase of equipment. (Equipment is a tangible item with an original per-unit cost of \$5,000 or more.)			
4	Data collection, as applicable, based on activities LHJ has completed during the reporting period. Data collection includes: • Total new hires	Data on form provided by DOH.	January 10, 2024 July 10, 2024 December 31, 2024	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	 Describe challenges or experiences that have impacted progress toward achieving set hiring goals. Describe promising practices or activities that should be considered for sustained funding. Explain your approach and mitigation plans to address challenges in meeting these hiring goals. Health Equity – Identify metrics to address Diversity, Equity, and Inclusion (DEI) in hiring. Administrative Support Staff – New Hires Professional or Clinical Staff – New Hires Disease Investigation Staff – New Hires Program Management Staff – New Hires Existing Staff budget for this funding. 			
	Note: Reporting periods are July 1 – December 31, 2023, January 1 – June 30, 2024, and July 1 – December 31, 2024.			

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the <u>DOH Finance SharePoint</u> site. Questions related to this SOW, or any other finance-related inquiry, may be sent to <u>finance@doh.wa.gov</u>.

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

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

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Unique Entity Identifier (UEI) generated by SAM.gov.

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

Program Specific Requirements

$Follow\ all\ Federal\ requirements\ for\ use\ of\ Federal\ funds:$

Code of Federal Regulations (CFR), Title 2, Subtitle A, Chapter II, Part 200
Uniform Administrative Requirements, Cost Principle, and Audit Requirements for Federal Awards
eCFR:: 2 CFR Part 200 -- Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards

The following expenses are not allowable with these funds:

- Clothing (except for vests to be worn during exercises or responses).
- Food or beverages.
- Incentives.
- Items to be given to community members (members of the public).
- Salaries at a rate more than Executive Level II (Federal Pay Scale).

• Vehicles (with preapproval, funds may be used to lease vehicles).

Preapproval from DOH is required to use these funds for:

- Contracting.
- Purchasing equipment. (Equipment is a tangible item with an original per-unit cost of \$5,000 or more.)
- Disposition of equipment with a current value of \$5,000 or more. (Equipment is a tangible item with an original per-unit cost of \$5,000 or more.)
- Leasing vehicles.
- Out of state travel.

Note: Preapproval is no longer required for paying overtime.

See also DOH A19 Documentation Matrix for additional expenses that may require preapproval.

BILLING

All expenses on invoices must be related to statement of work tasks.

Submit invoices monthly on a signed A19 with backup documentation appropriate for risk level. DOH will provide A19 and risk level.

- If your invoice includes indirect costs, you must have an indirect rate cost agreement approved by DOH.
- If you have no expenses related to this contract for a month, let your DOH Primary Point of Contact know via email.
- Submit final billing within 60 days of the end of the contract period.

State

Other

DOH Program Name or Title: HIV Client Services-HOPWA - Effective July 1, 2024

Revision # (for this SOW) 1

Contract Number: CLH31014 **Funding Source Federal Compliance Type of Payment** Reimbursement Federal Subrecipient (check if applicable) Fixed Price FFATA (Transparency Act)

Research & Development

Local Health Jurisdiction Name: Kitsap Public Health District

SOW Type: Revision

Period of Performance: July 1, 2024 through December 31, 2024

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

Revision Purpose: The purpose of this revision is to extend the period of performance from August 31, 2024 to December 31, 2024, change funding source from Rebates to Federal, and provide additional funding.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Fund Start Date	O	Current Allocation	Allocation Change Increase (+)	Total Allocation
RW FFY24 GRANT YEAR REBATE	12618530	N/A	334.04.98	07/01/24	08/31/24	25,178	-25,178	0
FFY23 HSNG-PPL W/AIDS FORMULA HUD	12660231	14.241	333.14.24	07/01/24	12/31/24	0	69,533	69,533
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						25,178	44,355	69,533

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Provide funding to help the housing needs of persons with	-Perform prompt housing inspections.	Required reports are to be	Administrative: \$1,345
	HIV/AIDS or related diseases and their families.		submitted in a timely	
		-Make prompt rent and deposit payments	manner.	Support Services: \$833
	The outcome of this performance-based grant is safe, affordable	to landlords and make utility payments to		
	and stable housing for the clients of the Housing Opportunities	utility companies.	DOH may delay payment	STRMU:
	for Persons with AIDS (HOPWA) Program.		until the reports are	\$4,417
		-Develop housing plans for clients	received or recapture	
	Services are restricted to households with at least one person	receiving housing assistance [Short-Term	unclaimed funds.	Tenant Based Rental
	who has HIV/AIDS and whose total household income is less	Rent, Mortgage and Utility (STRMU),		Assistance:
	than 80% of the Area Median Income (AMI) as defined by	Tenant-Based Rental Assistance (TBRA),		\$16,000
	Housing and Urban Development (HUD).	and Facility Based Housing] and update		
		housing plans at least annually.		

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Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		-Provide or refer eligible clients to supportive services and permanent housing placement when appropriate.		Permanent Housing Placement: \$2,583
		-Prepare and submit monthly invoice vouchers by the 25th of the month following provision of services.		TOTAL: \$25,178 MI 12660231
		-Submission of Consolidated Annual Performance Report (CAPER) by		Administrative: \$4,033
		requested due date. -Submission of Monitor responses by the due date requested.		Support Services: \$500 STRMU: \$9,000
		due date requested.		Tenant Based Rental Assistance: \$52,000
				Permanent Housing Placement: \$4,000
				TOTAL: \$69,533

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the <u>DOH Finance SharePoint</u> site. Questions related to this SOW, or any other finance-related inquiry, may be sent to <u>finance@doh.wa.gov</u>.

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

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

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Unique Entity Identifier (UEI) generated by SAM.gov.

Information about the LHJ and this statement of work will be made available on <u>USASpending.gov</u> 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 *January 31*, 2025. September 25, 2024. DOH will pay belated claims at its discretion, contingent upon the availability of funds.
- ii) The LHJ agrees to reimburse DOH for expenditures billed to DOH for costs that are later determined through audit or monitoring to be disallowed under the requirements of 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.
- iii) **Submission of Invoice Vouchers** On a monthly basis, the CONTRACTOR shall submit correct A19-1A invoice vouchers amounts billable to DOH under this statement of work. **All A19-1A invoice vouchers must be submitted by the 25th of the following month.**
 - (1) The LHJ shall use and adhere to the DOH Infectious Disease Reimbursement Guidelines and Forms when submitting A19 invoice voucher requests to DOH.
- iv) Advance Payments Prohibited Funds are "cost reimbursement" funds. DOH will not make payment in advance or in anticipation of services or supplies provided under this agreement. This includes payments of "one-twelfth" of the current fiscal year's funding. E-mail invoices to: ID.Operations@doh.wa.gov

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

Contract Modifications:

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

Confidentiality Requirements:

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

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

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

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

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

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

DOH Program Name or Title: <u>Injury & Violence Prevention-LHJ Opioid Campaign</u>

Proviso – Effective November 1, 2024

Local Health Jurisdiction Name: Kitsap Public Health District

Contract Number: CLH31014

SOW Type: Original Revision # (for this SOW)	Funding Source	Federal Compliance	Type of Payment
Period of Performance: November 1, 2024 through December 31, 2024	☐ Federal <select one=""> ☐ State ☐ Other</select>	(check if applicable) FFATA (Transparency Act) Research & Development	⊠ Reimbursement ☐ Fixed Price

Statement of Work Purpose: Opioid abatement settlement account—state appropriation is provided solely for the Department of Health to administer grants to local health jurisdictions for opioid and fentanyl awareness, prevention, and education campaigns.

NOTE: This SOW is part of the 2022-2024 Consolidated Contract term that ends on December 31, 2024. A new Consolidated Contract term for 2025-2027 will begin on January 1, 2025. Activities and due dates in this SOW are for state fiscal year 25 that ends on June 30, 2025 and will be continued in a new SOW in the next Consolidated Contract term from January 1, 2025 through June 30, 2025. The funding allocation in this SOW reflects a portion of the total budget shown in the below budget table. The remaining funding allocation and tasks with deliverables after December 31, 2024 will be added to the new SOW in the next Consolidated Contract term starting on January 1, 2025.

Revision Purpose: N/A

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date End Date		G		Current Allocation	Allocation Change Increase (+)	Total Allocation
SFY25 LHJ OPIOID CAMPAIGN PROVISO	77550853	N/A	334.04.93	11/1/24	12/31/24	0	24,520	24,520		
						0	0	0		
						0	0	0		
						0	0	0		
TOTALS	·					0	24,520	24,520		

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Purchase 80 t-shirts from the International Overdose Awareness website	80 t-shirts will be purchased between Jan-Mar 2025 to support International Overdose Awareness efforts in Summer 2025.	A19 will reflect the purchase of t-shirts with images of purchased document	Monthly invoices for actual cost reimbursement will be submitted to DOH.
2	Purchase posters for International Overdose Awareness website	Use of Blue-Sky printing for poster printouts during Quarter 1 of 2025.	A19 will reflect the purchase of posters with images of purchased document	Total of all invoices will not exceed \$24,520 through December 31, 2024.

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
3	Kitsap Public Health District staff and communication team will work collaboratively to contact media providers and order/print supplies. Staff time will also be used to develop invoices, reports and communication with grant funder.	Staff time will be continuous during grant.	Ongoing, November 2024- June 2025	
4	Purchase marketing spots for the Docks at the Bremerton/Seattle and Bainbridge Island/Seattle	Based on the availability of screen time, the goal would be to run this during Quarter 1 of 2025.	A19 will reflect the purchase of marketing spots	
5	Purchase two (2) billboards in Kitsap for marketing and share materials with Outfront media for display	Based on availability, the goal would be to have campaign on billboards in Quarter 1 or 2 of 2025	A19 will reflect the purchase of billboards	

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the <u>DOH Finance SharePoint</u> site. Questions related to this SOW, or any other finance-related inquiry, may be sent to <u>finance@doh.wa.gov</u>.

Program Specific Requirements

Billing Requirements: DOH awards funding through reimbursement-based billing. Invoices must be submitted monthly on an A19-1A invoice voucher. DOH must receive all complete final invoices within 60 days of the end of the budget period for this statement of work.

Budget Table

Line Item	Allocation	Justification
Salaries	\$9,333	0.2 FTE for liaison staff for 8 months
Benefits	\$4,200	45% of salaries
Goods and Services	\$29,995	
T-Shirts	\$1,920	For OD awareness day. 80 shirts x \$24 each
Pre-paid marketing	\$75	For OD awareness day. 5 posters x \$15 each
LCD Screens	\$10,000	At the Bremerton & Bainbridge/ Seattle Kitsap ferry terminal
Billboards	\$10,000	2 billboards x \$5,000 each
Targeted ads for parents	\$7,500	Google display ads for \$2,500; Outfront media targeted mobile ads for \$5,000
Printed materials	\$500	From Blu Sky printing for school district specific resources
Administrative costs/indirect	\$12,519	28.76% indirect rate
TOTAL	\$56,046	

^{*}Additional budget negotiation information will be requested and added in the January Statement of Work.

The LHJ must receive written approval from DOH before making any changes to the SOW activities or itemized budget.

DOH Program Name or Title: Office of Drinking Water Group A Program -

Effective January 1, 2022.

Local Health Jurisdiction Name: Kitsap Public Health District

Contract Number: CLH31014

SOW Type: Revision	Revision # (for this SOW) 7	Funding Source Federal Contractor	Federal Compliance (check if applicable)	Type of Payment Reimbursement
Period of Performance: Ja	nuary 1, 2022 through <u>December 31, 2024</u>	State Other	FFATA (Transparency Act) Research & Development	Fixed Price

Statement of Work Purpose: The purpose of this statement of work is to provide funding to the LHJ for conducting sanitary surveys and providing technical assistance to small community and non-community Group A water systems

Revision Purpose: The purpose of this revision is to update funding provided for Sanitary Survey and Technical Assistance activity assigned 1/1/2024 through 12/31/2024.

DOUGH Chart of Assessment Markey In Law Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Fund		Current	Allocation Change	Total
DOH Chart of Accounts Master Index Title	Code	Number	Code	Start Date	End Date	Allocation	None	Allocation
YR 24 SRF - LOCAL ASST (15%) (FO-SW) SS	24239224	N/A	346.26.64	01/01/22	12/31/22	19,000	0	19,000
YR 24 SRF - LOCAL ASST (15%) (FO-SW) TA	24239224	N/A	346.26.66	01/01/22	12/31/22	2,000	0	2,000
YR 25 SRF - LOCAL ASST (15%) SS	24119226	N/A	346.26.64	01/01/23	12/31/23	13,250	0	13,250
YR 25 SRF - LOCAL ASST (15%) TA	24119226	N/A	346.26.66	01/01/23	12/31/23	0	0	0
YR 26 SRF - LOCAL ASST (15%) SS	24119226	N/A	346.26.64	01/01/24	12/31/24	13,000	-11,750	1,250
YR 26 SRF - LOCAL ASST (15%) TA	24119226	N/A	346.26.66	01/01/24	12/31/24	4,000	-4,000	0
YR 27 SRF - LOCAL ASST (15%) SS	24119227	N/A	346.26.64	01/01/24	12/31/24	0	11,750	11,750
YR 27 SRF - LOCAL ASST (15%) TA	24119227	N/A	346.26.66	01/01/24	12/31/24	0	4,000	4,000
						0	0	0
TOTALS	TOTALS						0	51,250

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Trained LHJ staff will conduct sanitary	Provide Final* Sanitary Survey	Final Sanitary	Upon ODW acceptance of the Final Sanitary Survey
	surveys of small community and non-	Reports to ODW Regional Office.	Survey Reports	Report, the LHJ shall be paid \$250 for each sanitary
	community Group A water systems identified	Complete Sanitary Survey Reports	must be received by	survey of a non-community system with three or fewer
	by the DOH Office of Drinking Water	shall include:	the ODW Regional	connections.
	(ODW) Regional Office.	Cover letter identifying	Office within 30	
	See Special Instructions for task activity.	significant deficiencies, significant findings, observations, recommendations, and referrals	calendar days of conducting the sanitary survey.	Upon ODW acceptance of the Final Sanitary Survey Report, the LHJ shall be paid \$500 for each sanitary survey of a non-community system with four or more
	The purpose of this statement of work is to provide funding to the LHJ for conducting	for further ODW follow-up.	Sairtary Sairtoy.	connections and each community system.

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Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	sanitary surveys and providing technical assistance to small community and non-community Group A water systems.	 Completed Small Water System checklist. Updated Water Facilities Inventory (WFI). Photos of water system with text identifying features Any other supporting documents. *Final Reports reviewed and accepted by the ODW Regional Office. 		Payment is inclusive of all associated costs such as travel, lodging, per diem. Payment is authorized upon receipt and acceptance of the Final Sanitary Survey Report within the 30-day deadline. Late or incomplete reports may not be accepted for payment.
2	Trained LHJ staff will conduct Special Purpose Investigations (SPI) of small community and non-community Group A water systems identified by the ODW Regional Office. See Special Instructions for task activity.	Provide completed SPI Report and any supporting documents and photos to ODW Regional Office.	Completed SPI Reports must be received by the ODW Regional Office within 2 working days of the service request.	Upon acceptance of the completed SPI Report, the LHJ shall be paid \$800 for each SPI. Payment is inclusive of all associated costs such as travel, lodging, per diem. Payment is authorized upon receipt and acceptance of completed SPI Report within the 2-working day deadline. Late or incomplete reports may not be accepted for payment.
3	Trained LHJ staff will provide direct technical assistance (TA) to small community and non-community Group A water systems identified by the ODW Regional Office. See Special Instructions for task activity.	Provide completed TA Report and any supporting documents and photos to ODW Regional Office.	Completed TA Report must be received by the ODW Regional Office within 30 calendar days of providing technical assistance.	Upon acceptance of the completed TA Report, the LHJ shall be paid for each technical assistance activity as follows: • Up to 3 hours of work: \$250 • 3-6 hours of work: \$500 • More than 6 hours of work: \$750 Payment is inclusive of all associated costs such as consulting fee, travel, lodging, per diem. Payment is authorized upon receipt and acceptance of completed TA Report within the 30-day deadline. Late or incomplete reports may not be accepted for payment.
4	LHJ staff performing the activities under tasks 1, 2 and 3 attend periodic required survey training as directed by DOH. See Special Instructions for task activity.	For training attended in person, prior to attending the training, submit an "Authorization for Travel (Non-Employee)" DOH Form 710-013 to the ODW Program Contact for	Annually	For training attended in person, LHJ shall be paid mileage, per diem, lodging, and registration costs as approved on the pre-authorization form in accordance with the current rates listed on the OFM Website http://www.ofm.wa.gov/resources/travel.asp

Task # Activity		Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount	
		approval (to ensure enough funds are available).			

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the <u>DOH Finance SharePoint</u> site. Questions related to this SOW, or any other finance-related inquiry, may be sent to <u>finance@doh.wa.gov</u>.

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

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

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Unique Entity Identifier (UEI) generated by SAM.gov.

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

Program Specific Requirements

Data Sharing

The Office of Drinking Water will share water system information and files with the local health jurisdiction to support the work identified in this statement of work. To request water system data please contact the regional office with the name of the water system, water system ID#, specific information being requested and any timeline requirements. If allowable, please give administrative staff 3 to 5 business days to provide records.

Program Manual, Handbook, Policy References: Field Guide (DOH Publication 331-486).

Special References:

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

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

Special Billing Requirements

The LHJ shall submit quarterly invoices within 30 days following the end of the quarter in which work was completed, noting on the invoice the quarter and year being billed for. Payment cannot exceed a maximum accumulative fee of \$45,250 for Task 1, and \$6,000 for Task 2, Task 3 and Task 4 combined during the contracting period, to be paid at the rates specified in the Payment Method/Amount section above.

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

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

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

Special Instructions

Task 1

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

- No more than 8 surveys of non-community systems with three or fewer connections be completed between January 1, 2022 and December 31, 2022.
- No more than **34** surveys of non-community systems with four or more connections and all community systems to be completed between January 1, 2022 and December 31, 2022.
- No more than 3 surveys of non-community systems with three or fewer connections be completed between January 1, 2023 and December 31, 2023.
- No more than **25** surveys of non-community systems with four or more connections and all community systems to be completed between January 1, 2023 and December 31, 2023.
- No more than-2 survey of non-community systems with three or fewer connections be completed between January 1, 2024 and December 31, 2024.
- No more than 25 surveys of non-community systems with four or more connections and all community systems to be completed between January 1, 2024 and December 31, 2024.

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

Task 2

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

Task 3

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

Task 4

LHJ staff assigned to perform activities under tasks 1, 2, and 3 must be trained and approved by ODW prior to performing work.

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

DOH Program Name or Title: Office of Immunization COVID-19 Vaccine -

Effective January 1, 2022

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

Contract Number: CLH31014

SOW Type : Revision	Revision # (for this SOW) 8	Funding Source	Federal Compliance	Type of Payment
			(check if applicable)	⊠ Reimbursement
Period of Performance: Jan	nuary 1, 2022 through June 30, 2024	State Other	☐ FFATA (Transparency Act)☐ Research & Development	Fixed Price

Statement of Work Purpose: The purpose of this statement of work (SOW) is to provide funding to conduct COVID-19 vaccine activities.

Revision Purpose: The purpose of this revision is to remove funds.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Fund Start Date	ing Period End Date	Current Allocation	Allocation Change Decrease (-)	Total Allocation
COVID19 Vaccines R4	74310259	93.268	333.93.26	01/01/22	06/30/24	1,032,214	-113,737	918,477
COVID19 CDC Vaccines	74310236	93.268	333.93.26	01/01/22	06/30/24	283,424	-283,424	0
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						1,315,638	-397,161	918,477

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
3.A	Identify activity/activities to support COVID vaccine response in your community, using the examples below as a guideline. Example 1: Develop and implement communication strategies with health care providers, community, and/or other partners to help build vaccine confidence broadly and among groups anticipated to receive early vaccination, as well as dispel vaccine misinformation. Document and provide a plan that shows the communication strategies used with health care providers and other partners and the locally identified population anticipated to reach.	Summary of the engagement strategies to be used with health care providers and other partners, and the locally identified population to be reached.	January 31, Annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Example 2: Engage in other vaccination planning activities such as partnership development, provider education, vaccination point of dispensing (POD) planning, tabletop exercises, engagement with communities, leaders, nontraditional provider, or vulnerable populations to develop strategies to ensure equitable access to vaccination services			
3.B	Implement the communication strategies or other activities, working with health care providers and other partners to reach the locally identified population, support providers in vaccination plans, and support equitable access to vaccination services.	Written report describing activity/activities and progress made to-date and strategies used (template to be provided)	June 30, Annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
3.C	Catalog activities and conduct an evaluation of the strategies used	Written report, showing the strategies used and the final progress of the reach (template to be provided)	June 30, annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
3.D	As needed to meet community needs, expand operations to increase vaccine throughput (i.e., providing vaccinations during evenings, overnight, and on weekends) or adjust vaccine delivery approaches to optimize access. Activities may include vaccine strike teams, mobile vaccine clinics, satellite clinics, temporary, or off-site clinics to travel and provide vaccination services in non-traditional settings, or to supplement the work of local health departments in underserved communities, and may include administration costs for other vaccines coadministered at the events. These activities may be done by the local health department or in collaboration with community partners. (see Restrictions on Funds below)	Reports summarizing quantity, type, and frequency of activities	December 31 and June 30, annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.

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

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

Program Specific Requirements

Restrictions on Funds:

Coverage of co-administration costs for other vaccines administered at vaccination events does NOT apply to the FEMA Mass Vaccination funding. Coverage of co-administration costs only applies to the vaccine funding (COVID19 Vaccine R4, MI 74310230) allocated for Task 3 of the consolidated contract. FEMA Mass Vaccination funding is only available to cover the costs for COVID vaccine administration and cannot be used for co-administration costs of other vaccines.

Unallowable Costs:

There are limitations from the funding source on allowable costs for this contract. If the contractor is unsure if a cost is allowable, they should contact the contract manager for approval of the cost prior to making the purchase or charge.

- Advertising costs (e.g., conventions, displays, exhibits, meetings, memorabilia, gifts, souvenirs)
- Alcoholic beverages
- Building, purchases, construction, capital improvements
- Clinical care (non-immunization services)
- Entertainment costs
- Fundraising Cost
- Goods and services for personal use
- Honoraria
- Independent Research
- Land acquisition
- Legislative/lobbying activities
- Interest on loans for the acquisition and/or modernization of an existing building
- Payment of a bad debt, collection of improper payments
- Promotional and/or incentive materials (e.g., plaques, clothing, and commemorative items such as pens, mugs/cups, folders/folios, lanyards, magnets, conference bags)
- Purchase of food/meals (unless part of required travel per diem costs)
- Vehicle Purchase

DOH Program Name or Title: Office of Immunization-Regional Representatives -

Effective July 1, 2024

Local Health Jurisdiction Name: Kitsap Public Health District

Contract Number: CLH31014

SOW Type : Revision	Revision # (for this SOW) 1	Funding Source	Federal Compliance	Type of Payment
			(check if applicable)	Reimbursement
Period of Performance: Ju	aly 1, 2024 through December 31, 2024	State	FFATA (Transparency Act)	Fixed Price
		Other	Research & Development	

Statement of Work Purpose: The purpose of this statement of work is to define required Childhood Vaccine Program (CVP) activities for regional representatives.

NOTE: Deliverables with due dates after December 31, 2024, are shown for informational purposes only and will be included in a new SOW in the next Consolidated Contract term starting January 1, 2025.

Revision Purpose: The purpose of this revision is to add language to activities, deliverables/outcomes, and added a new task,

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Fund Start Date	ing Period End Date	Current Allocation	Allocation Change None	Total Allocation
FFY25 CDC IQIP Regional Rep	74310254	93.268	333.93.26	07/01/24	12/31/24	41,173	0	41,173
						0	0	0
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						41,173	0	41,173

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount				
	Perform as the regional representative for Region Two (Clallam County, Jefferson County, Kitsap County) conducting activities in accordance with state and federal requirements for the Childhood Vaccine Program (CVP) and Immunization Quality Improvement for Providers as directed by the state administrators of the program.							
1	Within the first 90 days of the contract provide a budget for FY25 funding.	Sumit completed Budget Template provided by Department of Health	September 30, 2024					
2	Conduct enrollment site visits <i>with</i> all new providers and gather information needed to complete program enrollment. All visits must be conducted in person in accordance with the CVP Operations Guide.	a) Email Provider Agreement New Enrollment Packet with provider's original or electronic signature – DOH 348-022 1. Provider did not previously submit the provider agreement to DOH.	Within ten (10) days after the date of the provider enrollment visit	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.				

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Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
3	Facilitate vaccine transfer/removal for providers who merge with existing health care organizations or who discontinue	2. Changes are made to the provider agreement during the enrollment visit. b) Email New Enrollment Training Guide (CVP SharePoint Site) with original or electronic signatures Email completed Provider Disenrollment form DOH 348-423 or list to verify	Within ten (10) days of vaccine transfer or removal	Reimbursement for actual costs incurred, not to
	participating in the Childhood Program and when requested by DOH. Transfers must be approved by DOH and performed in accordance with CDC and CVP guidelines.	vaccine inventory transferred/removed from provider site.		exceed total funding consideration amount.
4	Conduct Unannounced Vaccine Storage and Handling (USH) visits at 5% of enrolled health care provider sites within the assigned region. Sites may be selected by DOH or by using the DOH USH Visit Planning List. All visits must be conducted in person in accordance with the CVP Operations Guide. Complete Unannounced Vaccine Storage and Handling visit follow-up to assure providers resolve all follow-up actions identified during the initial visit. Follow-up actions may include another physical visit or verification by email, fax, or mail that follow-up actions were completed. Documentation for each follow-up action must be appropriately entered into PEAR.	 a) Enter responses from the Storage and Handling Reviewer Guide into the Provider Education, Assessment, and Reporting (PEAR) online system for each unannounced storage and handling visit. Follow all corrective action and follow-up guidance provided by PEAR and the Childhood Vaccine Program for each incorrect response. b) Upload the signed Acknowledgement of Receipt form to the visit in PEAR. c) Enter resolved site visit follow-up actions and upload applicable s documentation into PEAR 	 a) Online at the time of the visit or within five (5) business days of the site visit if online access was not possible even with equipment intended for access. b) Within five (5) business days of the site visit. c) Within five (5) business days of receiving the document(s) and verifying follow-up actions were completed. 	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
5	Conduct Announced Vaccine Storage and Handling (ASH) visits upon DOH request after an enrolled site moves to a new physical location. All visits must be conducted in person, within 60 days of DOH request, in accordance with the CVP Operations Guide. If site is due for a compliance visit within the current project period, conduct a compliance visit instead of an ASH visit. Complete Announced Vaccine Storage and Handling visit follow-up to assure providers resolve all follow-up actions	a) Enter responses from the Storage and Handling Reviewer Guide into the Provider Education, Assessment, and Reporting (PEAR) online system for each announced storage and handling visit. Follow all corrective action and follow-up guidance provided by PEAR and the Childhood Vaccine Program for each incorrect response.	a) Online at the time of the visit or within five (5) business days of the site visit if online access was not possible even with equipment intended for access.	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount	
	identified during the initial visit. Follow-up actions may include another physical visit or verification by email, fax, or mail that follow-up actions were completed. Documentation for each follow-up action must be appropriately entered into PEAR.	 b) Upload the signed Acknowledgement of Receipt form to the visit in PEAR. c) Enter resolved site visit follow-up actions and upload applicable s documentation into PEAR 	b) Within five (5) business days of the site visit. c) Within five (5) business days of receiving the document(s) and verifying follow-up actions were completed.		
56	Complete the CVP Compliance Visit Project Schedule to ensure providers receive a site visit within 24 months of previous site visit and/or 6 months from new enrollment visit. Conduct Compliance Site Visits at enrolled health care provider sites within the assigned region using the DOH Provider Selection Protocol. All visits must be conducted in person in accordance with the CVP Operations Guide. Complete Compliance Site Visit follow-up to assure providers resolve all corrective actions identified during the initial visit. Follow-up actions may include another physical visit or verification by email, fax, or mail that follow-up actions were completed. Documentation for each Site Visit follow-up action must be appropriately entered into PEAR. Participate in at least one (1) CVP observational visit conducted by DOH Office of Immunization staff or designee annually.	 a) Submit completed CVP Compliance Visit Project Schedule to DOH b) Enter responses from the Compliance Site Visit Reviewer Guide into the Provider Education, Assessment, and Reporting (PEAR) online system for each compliance site visit. Follow all corrective action and follow-up guidance provided by PEAR and the Childhood Vaccine Program for each incorrect response. c) Upload the signed Acknowledgement of Receipt form, Chart Review Worksheet, and Billing Practices Form to the site visit in PEAR. d) Enter resolved site visit follow-up actions and upload applicable documentation in PEAR. e) Respond to requests from DOH to schedule observation visit. 	a) By July 31 b) Online at the time of the Compliance Site Visit or within five (5) business days of the site visit if online access was not possible even with equipment intended for access. c) Within five (5) business days of the site visit. d) Within five (5) business days of receiving the document(s) and verifying_follow-up actions were completed. e) Within 5 business days of DOH request.		
6- 7	Within 6 months of the start of contract provide a Budget Forecast.	Submission of Budget Forecast form provided by Department of Health stating spend down of remain funds.	January 15, 2025		
7-8	IQIP (Immunization Quality Improvement for Providers) Complete Project Management Scheduling Tool	a) Copy of project management plan (template will be provided)	By July 31, 2024	Reimbursement for actual costs incurred, not to	

Task #	Activity		Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Complete initial IQIP (Immunization Quality Improvement for Providers) visits with 25% of eligible enrolled health care providers within the assigned region by June 15, 2024. A minimum of 35% of total visits assigned per region must be initiated within the first half Project Year (Dec 31,2024) and take place in person or via webinar and in accordance with the Immunization Quality Improvement for Providers Guide on IQIP SharePoint/Basecamp site. Continue following up with provider sites at two (2,) six (6), and twelve (12) months after initial IQIP visit. Perform an assessment at six (6) months of initial visit. Follow-up visits must take place in person, webinar, or by telephone and in accordance with the Immunization Quality Improvement for Provider's Guide. All IQIP reviewers are required to have at least one (1)	b) c)	Enter all initial IQIP visit details into the IQIP Online Tool for each visit conducted. Enter IQIP follow-up visit details in the IQIP Online Tool for all follow-up.	a) Within five (5) business days of visit b) Within five (5) business days of contact	exceed total funding consideration amount.
	observational visit conducted by DOH Office of Immunization staff or their designee. The observational visit will occur by Dec 31, 2024			By Dec 31, 2024	

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the <u>DOH Finance SharePoint</u> site. Questions related to this SOW, or any other finance-related inquiry, may be sent to <u>finance@doh.wa.gov</u>.

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

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

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Unique Entity Identifier (UEI) generated by SAM.gov.

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

Program Specific Requirements

- Tasks in this statement of work may not be subcontracted without prior written approval from the Office of Immunizations.
- Regional Representatives must have access to a digital data logger with current certificate of calibration and qualified pack outs or portable storage units for the purposes of transporting vaccine at appropriate temperatures when needed (see definitions in the DOH Vaccine Management Plan).
- Regional consultants will limit use of Immunization Information System (IIS) user accounts to view the data needed to conduct site visits with enrolled sites, and DOH reserves the right to limit regional consultant IIS access if used for unauthorized purposes, including but not limited to, editing, or approving Childhood Vaccine Program provider agreements or vaccine-related requests.

Unallowable Costs:

There are limitations from the funding source on allowable costs for this contract. If the contractor is unsure if a cost is allowable, they should contact the contract manager for approval of the cost prior to making the purchase or charge.

- Advertising costs (e.g., conventions, displays, exhibits, meetings, memorabilia, gifts, souvenirs)
- Alcoholic beverages
- Building, purchases, construction, capital improvements
- Clinical care (non-immunization services)
- Entertainment costs
- Fundraising Cost
- Goods and services for personal use
- Honoraria
- Independent Research
- Land acquisition
- Legislative/lobbying activities
- Interest on loans for the acquisition and/or modernization of an existing building
- Payment of a bad debt, collection of improper payments
- Promotional and/or incentive materials (e.g., plaques, clothing, and commemorative items such as pens, mugs/cups, folders/folios, lanyards, magnets, conference bags)
- Purchase of food/meals (unless part of required travel per diem costs)
- Vehicle Purchase