



**JEFFERSON COUNTY
BOARD OF COUNTY COMMISSIONERS
AGENDA REQUEST**

TO: Board of County Commissioners
Mark McCauley, County Administrator

FROM: Apple Martine, JCPH Director
Veronica Shaw, JCPH Deputy Director

DATE:

SUBJECT: Agenda Item – Consolidated Contracts Amendment #16 with the Department of Health; January 1 2022 – December 31, 2024; additional \$238,600 for a total of \$7,548,717

STATEMENT OF ISSUE:

Jefferson County Public Health (JCPH) requests Board approval of Consolidated Contract Amendment #16 between JCPH and State of Washington Department of Health (DOH); January 1, 2022 – December 31, 2024; additional \$238,600 for a total of \$7,548,717.

ANALYSIS/STRATEGIC GOALS/PROS and CONS:

The purpose of this agreement is to provide public health services to the people of Washington State. This Amendment adds and/or amends statements of work (SOW) and funding for the following programs:

- COVID-19 Gap Funding to increase COVID-19 vaccine availability in the community outside the usual healthcare delivery method; this revision adds language to address use of these funds for COVID-19 vaccine purchases.
- Executive Office of Resiliency & Health Security establishes funding to support local health jurisdiction (LHJ) public health COVID-19 prevention and recovery initiatives (funding of \$200,000)
- Office of Drinking Water Group A Program provides funding to LHJ for sanitary surveys and providing tech assistance to small community Group A water systems; revision extends period of performance (additional \$3,600)
- Office of Immunization provides funding to conduct COVID-19 Vaccine activities; revision removes tasks
- OSS LMP Implementation funds for on-site sewage system local management plan; revision updates GFS funding code.
- School-Based Health Centers (SBHCs) Program formalizes grant award for SBHC operations; revision increases grant award and revises task deliverables (additional \$35,000)

FISCAL IMPACT/COST BENEFIT ANALYSIS :

Total consideration for this Contract Amendment is an increase of \$238,600 for a total of \$7,548,717. The Consolidated Contract is funded by DOH, and comprises both Federal and State funds.

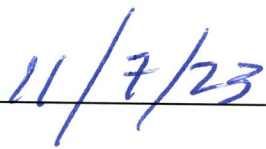
RECOMMENDATION:

JCPH Management recommends BOCC approval of Consolidated Contract Amendment #16; January 1 2022 – December 31, 2024; additional \$238,600 for a total of \$7,548,717.

REVIEWED BY:



Mark McCauley, County Administrator



Date

CONTRACT REVIEW FORM

Clear Form

(INSTRUCTIONS ARE ON THE NEXT PAGE)

CONTRACT WITH: State of WA Dept of Health

Contract No: CC-22-002-A16

Contract For: Consolidated Contracts, Amendment 16

Term: 1/1/2022 - 12/31/2024

COUNTY DEPARTMENT: Public Health

Contact Person: Veronica Shaw

Contact Phone: x 409

Contact email: veronica@co.jefferson.wa.us

AMOUNT: Additional \$238,600 for a total of \$7,548,717

Revenue: \$238,600

Expenditure:

Matching Funds Required:

Sources(s) of Matching Funds

Fund # 127

Munis Org/Obj 12756220

PROCESS:

- ☒ Exempt from Bid Process
- ☐ Cooperative Purchase
- ☐ Competitive Sealed Bid
- ☐ Small Works Roster
- ☐ Vendor List Bid
- ☐ RFP or RFQ
- ☐ Other:

APPROVAL STEPS:

STEP 1: DEPARTMENT CERTIFIES COMPLIANCE WITH J.C.G. 3.55.080 AND CHAPTER 42.23 RCW.

CERTIFIED: ☐ N/A: ☒


Signature

Nov. 1, 2023

Date

STEP 2: DEPARTMENT CERTIFIES THE PERSON PROPOSED FOR CONTRACTING WITH THE COUNTY (CONTRACTOR) HAS NOT BEEN DEBARRED BY ANY FEDERAL, STATE, OR LOCAL AGENCY.

CERTIFIED: ☐ N/A: ☒


Signature

Nov. 1, 2023

Date

STEP 3: RISK MANAGEMENT REVIEW (will be added electronically through Laserfiche):

Electronically approved by Risk Management on 11/3/2023.
Amendment adding funding to a state agreement.

STEP 4: PROSECUTING ATTORNEY REVIEW (will be added electronically through Laserfiche):

Electronically approved as to form by PAO on 11/2/2023.
State language - Cannot Change. Contract amendment.

STEP 5: DEPARTMENT MAKES REVISIONS & RESUBMITS TO RISK MANAGEMENT AND PROSECUTING ATTORNEY(IF REQUIRED).

STEP 6: CONTRACTOR SIGNS

STEP 7: SUBMIT TO BOCC FOR APPROVAL

JEFFERSON COUNTY PUBLIC HEALTH 2022-2024 CONSOLIDATED CONTRACT

CONTRACT NUMBER: CLH31013
AMENDMENT NUMBER: 16

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

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

1. Exhibit A Statements of Work, includes the following statements of work, which are incorporated by this reference and located on the DOH Finance SharePoint site in the Upload Center at the following URL:
<https://stateofwa.sharepoint.com/sites/doh-ofsfundingresources/sitepages/home.aspx?e1:9a94688da2d94d3ea80ac7fbc32e4d7c>
 - ☐ Adds Statements of Work for the following programs:
 - ☒ Amends Statements of Work for the following programs:
 - COVID-19 LHJ Gap Funding - Effective July 1, 2023
 - Executive Office of Resiliency & Health Security-WFD LHJ - Effective July 1, 2023
 - Office of Drinking Water Group A Program - Effective January 1, 2022
 - Office of Immunization COVID-19 Vaccine - Effective January 1, 2022
 - OSS LMP Implementation - Effective July 1, 2023
 - School-Based Health Centers Program – Effective July 1, 2023
 - ☐ Deletes Statements of Work for the following programs:
2. Exhibit B-16 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-15 Allocations as follows:
 - ☒ Increase of **\$238,600** for a revised maximum consideration of **\$7,548,717**.
 - ☐ Decrease of _____ for a revised maximum consideration of _____.
 - ☐ No change in the maximum consideration of _____.
 Exhibit B Allocations are attached only for informational purposes.

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

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

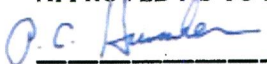
IN WITNESS WHEREOF, the undersigned has affixed his/her signature in execution thereof.

JEFFERSON COUNTY WASHINGTON
BOARD OF COUNTY COMMISSIONERS

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

Greg Brotherton, Chair Date

Date

APPROVED AS TO FORM ONLY

 November 2, 2023
 Philip C. Hunsucker, Date
 Chief Civil Deputy Prosecuting Attorney

APPROVED AS TO FORM ONLY
 Assistant Attorney General

Indirect Rate January 1, 2022 through December 31, 2022: 29.23% Public Health

Indirect Rate January 1, 2023 through December 31, 2023: 35.85% Public Health

Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List **	BARS Revenue Code**	Statement of Work LHHJ Funding Period		DOH Use Only Chart of Accounts Funding Period		Amount	Funding Period SubTotal	Chart of Accounts Total
					Start Date	End Date	Start Date	End Date			
FFY24 USDA BFPC Prog Mgmt	NGA Not Received	Amd 15	10.557	333.10.55	10/01/23	09/30/24	10/01/23	09/30/24	\$37,651	\$37,651	\$118,691
FFY23 USDA BFPC Prog Mgmt	7WA700WA1	Amd 10	10.557	333.10.55	10/01/22	09/30/23	10/01/22	09/30/23	\$28,238	\$37,651	
FFY23 USDA BFPC Prog Mgmt	7WA700WA1	Amd 8, 10	10.557	333.10.55	10/01/22	09/30/23	10/01/22	09/30/23	\$9,413		
FFY22 USDA BFPC Prog Mgmt	7WA700WA1	Amd 1	10.557	333.10.55	01/01/22	09/30/22	10/01/21	09/30/22	\$43,389	\$43,389	
FFY24 USDA WIC Client Svs Contracts	NGA Not Received	Amd 15	10.557	333.10.55	10/01/23	09/30/24	10/01/23	09/30/24	\$2,500	\$27,738	\$246,452
FFY24 USDA WIC Client Svs Contracts	NGA Not Received	Amd 10, 15	10.557	333.10.55	10/01/23	09/30/24	10/01/23	09/30/24	\$25,238		
FFY23 USDA WIC Client Svs Contracts	7WA700WA7	Amd 15	10.557	333.10.55	10/01/22	09/30/23	10/01/22	09/30/23	\$11,657	\$132,338	
FFY23 USDA WIC Client Svs Contracts	7WA700WA7	Amd 12	10.557	333.10.55	10/01/22	09/30/23	10/01/22	09/30/23	\$21,218		
FFY23 USDA WIC Client Svs Contracts	7WA700WA7	Amd 10	10.557	333.10.55	10/01/22	09/30/23	10/01/22	09/30/23	\$75,713		
FFY23 USDA WIC Client Svs Contracts	7WA700WA7	Amd 1	10.557	333.10.55	10/01/22	09/30/23	10/01/22	09/30/23	\$23,750		
FFY22 USDA WIC Client Svs Contracts	7WA700WA7	Amd 7	10.557	333.10.55	01/01/22	09/30/22	10/01/21	09/30/22	\$5,600	\$86,376	
FFY22 USDA WIC Client Svs Contracts	7WA700WA7	Amd 5	10.557	333.10.55	01/01/22	09/30/22	10/01/21	09/30/22	\$6,726		
FFY22 USDA WIC Client Svs Contracts	7WA700WA7	Amd 1	10.557	333.10.55	01/01/22	09/30/22	10/01/21	09/30/22	\$74,050		
FFY23 USDA WIC Prog Mgmt CSS	7WA700WA7	Amd 10	10.557	333.10.55	01/01/23	09/30/23	10/01/22	09/30/23	\$2,800	\$2,800	\$2,800
FFY23 USDA FMNP Prog Mgmt	7WA810WA7	Amd 15	10.572	333.10.57	06/01/23	09/30/23	10/01/22	09/30/23	\$496	\$496	\$1,012
FFY22 USDA FMNP Prog Mgmt	7WA810WA7	Amd 4	10.572	333.10.57	05/01/22	09/30/22	10/01/21	09/30/22	\$516	\$516	
FY24 LHH COVID-19 ARPA	SLFRP0002	Amd 15	21.027	333.21.02	07/01/23	06/30/24	07/01/23	06/30/25	\$46,740	\$46,740	\$46,740
LHH COVID-19 Gap Supplemental	SLFRP0002	Amd 13	21.027	333.21.02	01/01/23	06/30/23	01/01/23	06/30/23	\$35,651	\$35,651	\$35,651
PS SSI 1-5 OSS Task 4	01J18001	Amd 15	66.123	333.66.12	01/01/22	11/30/23	07/01/17	08/31/28	\$30,000	\$263,844	\$263,844
PS SSI 1-5 OSS Task 4	01J18001	Amd 7, 15	66.123	333.66.12	01/01/22	11/30/23	07/01/17	08/31/28	(\$1,654)		
PS SSI 1-5 OSS Task 4	01J18001	Amd 2, 5, 15	66.123	333.66.12	01/01/22	11/30/23	07/01/17	08/31/28	\$235,498		
FFY23 Swimming Beach Act Grant IAR (ECY)	01J74301	Amd 11	66.472	333.66.47	03/01/23	10/31/23	03/01/23	10/31/23	\$15,000	\$15,000	\$30,000
FFY22 Swimming Beach Act Grant IAR (ECY)	01J74301	Amd 2	66.472	333.66.47	03/01/22	10/31/22	01/01/22	11/30/22	\$15,000	\$15,000	
FFY23 PHEP BP5 LHH Funding	NU90TP922043	Amd 15	93.069	333.93.06	07/01/23	06/30/24	07/01/23	06/30/24	\$34,384	\$34,384	\$82,522
FFY22 PHEP BP4 LHH Funding	NU90TP922043	Amd 7	93.069	333.93.06	07/01/22	06/30/23	07/01/22	06/30/23	\$34,384	\$34,384	
FFY21 PHEP BP3 LHH Funding	NU90TP922043	Amd 2	93.069	333.93.06	01/01/22	06/30/22	07/01/21	06/30/22	\$13,754	\$13,754	
FFY22 Title X Dire Needs	FPHPA006495	Amd 2	93.217	333.93.21	01/14/22	03/31/22	01/14/22	03/31/22	\$4,066	\$4,066	\$4,066
FFY23 Title X Family Planning	FPHPA006560	Amd 14	93.217	333.93.21	04/01/23	03/31/24	04/01/23	03/31/24	\$30,822	\$30,822	\$57,959
FFY22 Title X Family Planning	FPHPA006560	Amd 5	93.217	333.93.21	04/01/22	03/31/23	04/01/22	03/31/23	\$27,137	\$27,137	
COVID19 Vaccines	NH23IP922619	Amd 4	93.268	333.93.26	01/01/22	06/30/24	07/01/20	06/30/24	\$278,114	\$278,114	\$278,114

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					Start Date	End Date	Start Date	End Date			
COVID19 Vaccines R4	NH23IP922619	Amd 4	93.268	333.93.26	01/01/22	06/30/24	07/01/20	06/30/24	\$354,803	\$709,606	\$709,606
COVID19 Vaccines R4	NH23IP922619	Amd 1	93.268	333.93.26	01/01/22	06/30/24	07/01/20	06/30/24	\$354,803		
FFY24 CDC VFC Ops	NH23IP922619	Amd 15	93.268	333.93.26	07/01/23	06/30/24	07/01/23	06/30/24	\$560	\$6,160	\$6,160
FFY24 CDC VFC Ops	NH23IP922619	Amd 14	93.268	333.93.26	07/01/23	06/30/24	07/01/23	06/30/24	\$5,600		
FFY23 VFC Ops	NH23IP922619	Amd 5	93.268	333.93.26	07/01/22	06/30/23	07/01/22	06/30/23	\$5,600	\$5,600	\$11,200
FFY22 VFC Ops	NH23IP922619	Amd 3	93.268	333.93.26	01/01/22	06/30/22	07/01/21	06/30/22	\$5,600	\$5,600	
FFY19 COVID CARES	NU50CK000515	Amd 2	93.323	333.93.32	01/01/22	04/22/22	04/23/20	07/31/24	\$14,664	\$14,664	\$14,664
FFY19 ELC COVID Ed LHHJ Allocation	NU50CK000515	Amd 7	93.323	333.93.32	01/01/22	10/18/22	05/19/20	10/18/22	(\$2,281)	\$1,737	\$1,737
FFY19 ELC COVID Ed LHHJ Allocation	NU50CK000515	Amd 4	93.323	333.93.32	01/01/22	10/18/22	05/19/20	10/18/22	(\$78,694)		
FFY19 ELC COVID Ed LHHJ Allocation	NU50CK000515	Amd 2	93.323	333.93.32	01/01/22	10/18/22	05/19/20	10/18/22	\$82,712		
FFY20 ELC EDE LHHJ Allocation	NU50CK000515	Amd 9	93.323	333.93.32	01/01/22	07/31/23	01/15/21	07/31/24	(\$6,375)	\$341,822	\$341,822
FFY20 ELC EDE LHHJ Allocation	NU50CK000515	Amd 4, 9	93.323	333.93.32	01/01/22	07/31/23	01/15/21	07/31/24	(\$90,842)		
FFY20 ELC EDE LHHJ Allocation	NU50CK000515	Amd 2, 9	93.323	333.93.32	01/01/22	07/31/23	01/15/21	07/31/24	\$439,039		
FFY21 CDC COVID-19 PHWFD-LHHJ	NU90TP922181	Amd 16	93.354	333.93.35	07/01/23	06/30/24	07/01/23	06/30/24	\$200,000	\$200,000	\$200,000
FFY22 NEHA Climate & Health Grant	NU38OT000300	Amd 9	93.421	333.93.42	04/11/22	12/31/22	04/01/22	12/31/22	\$11,000	\$22,000	\$22,000
FFY22 NEHA Climate & Health Grant	NU38OT000300	Amd 5	93.421	333.93.42	04/11/22	12/31/22	04/01/22	12/31/22	\$11,000		
FFY24 HRSA MCHBG LHHJ Contracts	NGA Not Received	Amd 15	93.994	333.93.99	10/01/23	09/30/24	10/01/23	09/30/24	\$36,700	\$36,700	\$56,566
FFY23 HRSA MCHBG LHHJ Contracts	B04MC47453	Amd 15	93.994	333.93.99	10/01/22	09/30/23	10/01/22	09/30/23	(\$16,834)	\$19,866	
FFY23 HRSA MCHBG LHHJ Contracts	B04MC47453	Amd 7	93.994	333.93.99	10/01/22	09/30/23	10/01/22	09/30/23	\$36,700		
FFY22 HRSA MCHBG Special Proj	B04MC45251	Amd 15	93.994	333.93.99	10/01/22	09/30/23	10/01/22	09/30/23	\$16,834	\$16,834	\$16,834
FFY22 MCHBG LHHJ Contracts	B04MC45251	Amd 1	93.994	333.93.99	01/01/22	09/30/22	10/01/21	09/30/22	\$27,525	\$27,525	\$27,525
SFY25 SBHC Proviso		Amd 14	N/A	334.04.90	07/01/24	12/31/24	07/01/24	06/30/25	\$62,000	\$62,000	\$207,000
SFY24 SBHC Proviso		Amd 16	N/A	334.04.90	07/01/23	06/30/24	07/01/23	06/30/24	\$35,000	\$145,000	
SFY24 SBHC Proviso		Amd 14	N/A	334.04.90	07/01/23	06/30/24	07/01/23	06/30/24	\$110,000		
SFY23 School Based Health Centers		Amd 5	N/A	334.04.90	07/01/22	06/30/23	07/01/22	06/30/23	\$150,000	\$150,000	\$150,000
SFY24 Sexual & Rep Hlth Cost Share		Amd 15	N/A	334.04.91	07/01/23	12/31/23	07/01/23	06/30/24	\$42,926	\$42,926	\$167,035
SFY23 Sexual & Rep Hlth Cost Share		Amd 10	N/A	334.04.91	07/01/22	06/30/23	07/01/22	06/30/23	\$40,357	\$80,009	
SFY23 Sexual & Rep Hlth Cost Share		Amd 7, 10	N/A	334.04.91	07/01/22	06/30/23	07/01/22	06/30/23	\$39,652		

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					Start Date	End Date	Start Date	End Date			
SFY22 Sexual & Rep Hlth Cost Share		Amd 5	N/A	334.04.91	01/01/22	06/30/22	07/01/21	06/30/22	\$5,880	\$44,100	
SFY22 Sexual & Rep Hlth Cost Share		Amd 1	N/A	334.04.91	01/01/22	06/30/22	07/01/21	06/30/22	\$38,220		
SFY24 Drug User Health Program		Amd 14	N/A	334.04.91	07/01/23	12/31/23	07/01/23	12/31/23	\$7,500	\$7,500	\$7,500
State Drug User Health Program		Amd 5	N/A	334.04.91	07/01/22	06/30/23	07/01/21	06/30/23	\$15,000	\$15,000	\$22,500
State Drug User Health Program		Amd 1	N/A	334.04.91	01/01/22	06/30/22	07/01/21	06/30/23	\$7,500	\$7,500	
Rec Shellfish/Biotoxin		Amd 14	N/A	334.04.93	07/01/23	12/31/24	07/01/23	06/30/25	\$11,100	\$11,100	\$28,600
Rec Shellfish/Biotoxin		Amd 9	N/A	334.04.93	01/01/22	06/30/23	07/01/21	06/30/23	\$7,000	\$17,500	
Rec Shellfish/Biotoxin		Amd 1	N/A	334.04.93	01/01/22	06/30/23	07/01/21	06/30/23	\$10,500		
Small Onsite Management (ALEA)		Amd 14	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 14	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 12	N/A	334.04.93	07/01/22	06/30/23	07/01/21	06/30/23	\$9,375	\$24,375	
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		
Small Onsite Management (ALEA)		Amd 12	N/A	334.04.93	01/01/22	06/30/22	07/01/21	06/30/23	(\$9,375)	\$13,125	
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		
Small Onsite Management (GFS)		Amd 16	N/A	334.04.93	07/01/24	12/31/24	07/01/23	07/01/25	(\$31,970)	\$0	\$0
Small Onsite Management (GFS)		Amd 14	N/A	334.04.93	07/01/24	12/31/24	07/01/23	07/01/25	\$31,970		
SFY25 Wastewater Management-GFS		Amd 16	N/A	334.04.93	07/01/24	12/31/24	07/01/23	06/30/25	\$31,970	\$31,970	\$61,970
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	
SFY23 FPHS-LHHJ-GFS		Amd 6, 9	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	\$1,433,000	\$1,433,000	\$1,433,000
FPHS-LHHJ-Proviso (YR2)		Amd 7	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	(\$550,000)	\$0	\$445,181
FPHS-LHHJ-Proviso (YR2)		Amd 1	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	\$550,000		
FPHS-LHHJ-Proviso (YR1)		Amd 10	N/A	336.04.25	01/01/22	06/30/22	07/01/21	06/30/23	\$32,681	\$445,181	
FPHS-LHHJ-Proviso (YR1)		Amd 4	N/A	336.04.25	01/01/22	06/30/22	07/01/21	06/30/23	(\$137,500)		
FPHS-LHHJ-Proviso (YR1)		Amd 1	N/A	336.04.25	01/01/22	06/30/22	07/01/21	06/30/23	\$550,000		
FPHS-Local Health Jurisdiction		Amd 15	N/A	336.04.25	07/01/23	06/30/24	07/01/23	06/30/25	\$900,000	\$2,333,000	\$2,333,000
FPHS-Local Health Jurisdiction		Amd 14	N/A	336.04.25	07/01/23	06/30/24	07/01/23	06/30/25	\$1,433,000		
YR 25 SRF - Local Asst (15%) SS		Amd 16	N/A	346.26.64	01/01/24	12/31/24	07/01/23	06/30/25	\$1,800	\$1,800	\$5,400
YR 25 SRF - Local Asst (15%) SS		Amd 11	N/A	346.26.64	01/01/23	12/31/23	01/01/23	12/31/23	\$2,200	\$2,200	
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	\$1,400	\$1,400	
Sanitary Survey Fees SS-State		Amd 16	N/A	346.26.65	01/01/22	12/31/24	07/01/21	12/31/24	\$1,800	\$5,400	\$5,400
Sanitary Survey Fees SS-State		Amd 11, 16	N/A	346.26.65	01/01/22	12/31/24	07/01/21	12/31/24	\$2,200		
Sanitary Survey Fees SS-State		Amd 1, 11, 16	N/A	346.26.65	01/01/22	12/31/24	07/01/21	12/31/24	\$1,400		

Indirect Rate January 1, 2022 through December 31, 2022: 29.23% Public Health

Indirect Rate January 1, 2023 through December 31, 2023: 35.85% Public Health

Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**	Statement of Work		DOH Use Only Chart of Accounts Funding Period		Amount	Funding Period SubTotal	Chart of Accounts Total
					LHJ Funding Period Start Date	LHJ Funding Period End Date	Funding Period Start Date	Funding Period End Date			
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	\$1,000	\$1,000	\$2,000
YR 24 SRF - Local Asst (15%) (FO-SW) TA		Amd 1	N/A	346.26.66	01/01/22	12/31/22	07/01/21	06/30/23	\$1,000	\$1,000	
TOTAL									\$7,548,717	\$7,548,717	
Total consideration:	\$7,310,117									GRAND TOTAL	\$7,548,717
	\$238,600										
GRAND TOTAL	\$7,548,717									Total Fed	\$2,575,965
										Total State	\$4,972,752

*Catalog of Federal Domestic Assistance

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

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: COVID-19 LHJ Gap Funding - Effective July 1, 2023

Local Health Jurisdiction Name: Jefferson County Public Health

Contract Number: CLH31013

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

Funding Source ☒ Federal Subrecipient ☐ State ☐ Other	Federal Compliance (check if applicable) ☒ FFATA (Transparency Act) ☐ Research & Development	Type of Payment ☒ Reimbursement ☐ Fixed Price
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Period of Performance: July 1, 2023 through June 30, 2024

Statement of Work Purpose: The purpose of this statement of work is to support LHJ COVID-19 work utilizing American Rescue Plan Act (ARPA) funding.

Revision Purpose: The purpose of this revision is to add language under Special Requirements to address use of these funds for COVID-19 vaccine purchases.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date End Date		Current Allocation	Allocation Change None	Total Allocation
FY24 LHJ COVID-19 ARPA	926C0240	21.027	333.21.02	07/01/23	06/30/24	46,740	0	46,740
						0	0	0
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						46,740	0	46,740

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
Task 1, 2, and 3 Activities Supported by LHJ COVID-19 Gap Supplemental			July 1, 2023 – June 30, 2024	Reimbursement for actual costs incurred, not to exceed total funding allocation. Due date: Every 60 days as specified in the ConCon billing instructions.
1.	Provide vaccination services to increase COVID-19 vaccine availability in the community. Vaccination services are defined as those outside the usual healthcare delivery method, such as pop-up clinics, mobile clinics, non-clinical facilities and may be conducted during non-traditional hours such as evenings and weekends. Activities may include vaccine strike teams, mobile vaccine clinics,	Vaccine availability to the community and prioritized in your jurisdiction’s community.		

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	satellite clinics, temporary or off-site clinics to travel and provide vaccination services in non-traditional settings, community outreach/messaging or to supplement the work of other community partners in underserved communities and may include administration costs for COVID-19 vaccine.			
1A.	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) then include internet based, phone option and other methods to ensure equitable registration. The state PrepMod system and tools will be available for use.	Submission of vaccine use into WA IIS database within 48 hours of use. Jurisdiction/Regions will ensure a fair and equitable process for registration of eligible Washingtonians across all available modalities.	Within two (2) days of vaccine use	
1B.	Specific itemized breakdown of activities and costs from our partners for vaccine efforts and keeping Washington safe.	Final written report including activities completed and how LHI addressed equitable distribution of the vaccine, community outreach and messaging.	Report due within 30 days of the end of each quarter listed below: Year 1 Quarter 1 July 1, 2023-September 30, 2023 Year 1 Quarter 2 October 1, 2023-December 31, 2023 Year 1 Quarter 3 January 1, 2024-March 31, 2024 Year 1 Quarter 4 April 1, 2024-June 30, 2024	
1C.	<i>COVID-19 vaccine purchase</i>	<i>See Special Requirements Below</i>	<i>See reporting requirements in 1A and 1B</i>	
2.	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	See Special Requirements below.	See Special Requirements below.	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	5. 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. ii. Case investigation 1. Strive to maintain the capacity to conduct targeted investigations as appropriate. 2. Enter all case investigation and outbreak data in WDRS following DOH guidance. a) Strive to enter all case investigation and outbreak data into CREST as directed by DOH. b) Ensure all staff designated to utilize WDRS have access and are trained in the system. c) Include if new positive cases are tied to a known existing positive case or indicate community spread. d) Conduct targeted case investigation and monitor outbreaks. e) Coordinate with Tribal partners in conducting case investigations for tribal members. 3. Ensure contact tracing and case investigation activities meet DOH Case and Contact Tracing Metrics. (Metrics to be determined collaboratively by DOH, LHJs, and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics. b. Testing 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. 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	Enter all case investigation data in WDRS-following guidance from DOH.		

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

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	ii. 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. iii. High risk businesses or community-based operations. In collaboration with state licensing agencies and Labor and Industries, partner with food processing and manufacturing businesses to ensure adequate practices to prevent COVID-19 exposure, conduct testing and respond to outbreaks. iv. Healthcare: Support infection prevention and control assessments, testing, cohorting, and isolation procedures. Provide educational resources to a variety of healthcare setting types (e.g., nursing homes, hospitals, dental, dialysis). v. Non-healthcare settings that house vulnerable populations: In collaboration with state corrections agency (DOC) and other state partners, support testing, infection control, isolation and quarantine and social services and wraparound supports for individuals living or temporarily residing in congregate living settings, including detention centers, prisons, jails, transition housing, homeless shelters, and other vulnerable populations. vi. Schools: In collaboration with OSPI and local health jurisdictions, support infection prevention and control and outbreak response in K-12 and university school settings. f. Ensure adequate resources are directed towards 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.			

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	g. Community education. Work with Tribes and partners to provide culturally and linguistically responsive community outreach and education related to COVID-19. h. Establish sustainable isolation and quarantine (I&Q) measures in accordance with <u>WAC 246-100-045</u> (Conditions and principles for isolation or quarantine). i. Have at least one (1) location for conducting I&Q operations identified and confirmed. This location should be sufficient for supporting I&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; 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. ii. Maintain ongoing census data for isolation and quarantine for your population. iii. Planning must incorporate transfer or receipt of people requiring I&Q support 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&Q support, either through mobile teams or the state facility.	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. Report census numbers to include historic total by month and monthly total for current quarter to date		

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

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

Program Specific Requirements

Special Requirements:

A report on the specific areas the LHJ partners have spent the ARPA vaccine dollars if the legislature requests this information.

The funds from the American Rescue Plan Act are not available for the purchase of vaccines when the federal government is already making COVID-19 vaccines available to certain populations. The Department of Health Office of Immunization, is using a combination of federal and state funds to supply COVID-19 vaccines for the following groups:

- *All children less than 19 years of age.*
- *Adults 19 years of age and older who are:*
 - *Uninsured.*
 - *Underinsured – lacks cost-free coverage for COVID-19 vaccines.*

To access these vaccines, healthcare providers must be enrolled in the Childhood Vaccine Program and/or the Adult Vaccine Program.

In order for LHJs to utilize the American Rescue Plan Act (FY24 LHJ COVID-19 ARPA) funding as listed on the LHJ con-con to purchase COVID-19 vaccines beyond what is currently available as stated above for administration in their jurisdiction, the LHJ must follow the guidance provided. In this guidance, it specifically asks that this funding is targeted to disproportionately impacted, underserved populations and communities having COVID-19 impacts that are documented and the response must be tailored to benefit this impacted class.

DOH has received the following guidance: to (1) identify and respond to other pandemic impacts and (2) serve other populations that experienced pandemic impacts, beyond the enumerated uses and presumed eligible populations. Recipients can also identify groups or 'classes' of beneficiaries that experienced pandemic impacts and provide services to those classes. You should refer to pages 32 and 33 of the Overview of the Final Rule for (1) identifying impacts to a specific household or class of households and (2) tailoring the response to benefit this impacted class.

If LHJs identify a disproportionately impacted underserved population in their LHJ COVID-19 vaccination plan that would benefit from expanded access to COVID-19 vaccines and is not already served by another state program, they may use this funding to purchase COVID-19 vaccines in support of a documented mission.

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: Executive Office of Resiliency & Health Security-
WFD LHJ - Effective July 1, 2023

Local Health Jurisdiction Name: Jefferson County Public Health

Contract Number: CLH31013

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

Period of Performance: July 1, 2023 through July 31, 2024

Funding Source ☒ Federal Subrecipient ☐ State ☐ Other	Federal Compliance (check if applicable) ☒ FFATA (Transparency Act) ☐ Research & Development	Type of Payment ☒ Reimbursement ☐ Fixed Price
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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.

Revision Purpose: The purpose of this revision is to add funds to the statement of work. There was a change to the process described in the Note above. The Program decided to add funds to these statements of work.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date End Date		Current Allocation	Allocation Change Increase (+)	Total Allocation
FFY21 CDC COVID-19 PHWFD-LHJ	3192621G	93.354	333.93.35	07/01/23	06/30/24	0	200,000	200,000
						0	0	0
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						0	200,000	200,000

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Submit names, position titles, email addresses and phone numbers of key LHJ staff responsible for this statement of work, including management, program staff, and accounting and/or financial staff.	Submit information by September 15, 2023, and any changes within 30 days of the change.	September 15, 2023 Within 30 days of the change.	Reimbursement for actual costs not to exceed total funding allocation amount.
2	Develop a plan to use these funds for one or more of the allowable costs listed below.	Implementation Plan	December 31, 2023, or sooner.	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	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.			
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 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.)	Implementation Plan Data on form provided by DOH.	December 31, 2023, or sooner. January 10, 2024 July 10, 2024	
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	

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, and January 1 – June 30, 2024.			

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

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

Program Specific Requirements

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.

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: Office of Drinking Water Group A Program -
Effective January 1, 2022.

Local Health Jurisdiction Name: Jefferson County Public Health

Contract Number: CLH31013

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

Funding Source ☒ Federal Contractor ☒ State ☐ Other	Federal Compliance (check if applicable) ☒ FFATA (Transparency Act) ☐ Research & Development	Type of Payment ☐ Reimbursement ☒ Fixed Price
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Period of Performance: January 1, 2022 through December 31, 2024

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

Revision Purpose: The purpose of this revision is to extend the period of performance from December 31, 2023 to December 31, 2024, provide additional Sanitary Survey funding and extend Sanitary Survey State funding from 12/31/23 to 12/31/24. In addition, this revision updates the Master Index Title removing (FO-SW) from YR 25 SRF and Sanitary Survey Fees-State lines and updates the Master Index codes from 24232522 to 24112522 and 24239225 to 24119225.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date End Date		Current Allocation	Allocation Change Increase (+)	Total Allocation
SANITARY SURVEY FEES SS-STATE	24112522	N/A	346.26.65	01/01/22	12/31/24	3,600	1,800	5,400
YR 24 SRF - LOCAL ASST (15%) (FO-SW) SS	24239224	N/A	346.26.64	01/01/22	12/31/22	1,400	0	1,400
YR 24 SRF - LOCAL ASST (15%) (FO-SW) TA	24239224	N/A	346.26.66	01/01/22	12/31/22	1,000	0	1,000
YR 25 SRF - LOCAL ASST (15%) SS	24119225	N/A	346.26.64	01/01/23	12/31/23	2,200	0	2,200
YR 25 SRF - LOCAL ASST (15%) TA	24119225	N/A	346.26.66	01/01/23	12/31/23	1,000	0	1,000
YR 25 SRF - LOCAL ASST (15%) SS	24119225	N/A	346.26.64	01/01/23	12/31/24	0	1,800	1,800
TOTALS						9,200	3,600	12,800

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Trained LHJ staff will conduct sanitary surveys of small community and non-community Group A water systems identified by the DOH Office of Drinking Water (ODW) Regional Office. See Special Instructions for task activity. The purpose of this statement of work is to provide funding to the LHJ for conducting sanitary surveys and providing technical	Provide Final* Sanitary Survey Reports to ODW Regional Office. Complete Sanitary Survey Reports shall include: - Cover letter identifying significant deficiencies, significant findings, observations, recommendations, and referrals for further ODW follow-up. - Completed Small Water System checklist. - Updated Water Facilities Inventory (WFI).	Final Sanitary Survey Reports must be received by the ODW Regional Office within 30 calendar days of conducting the sanitary survey.	Upon ODW acceptance of the Final Sanitary Survey Report, the LHJ shall be paid \$400 for each sanitary survey of a non-community system with three or fewer connections. Upon ODW acceptance of the Final Sanitary Survey Report, the LHJ shall be paid \$800 for each sanitary survey of a non-community system with four or more connections and each community system.

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	assistance to small community and non-community Group A water systems.	4. Photos of water system with text identifying features 5. 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	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

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		ODW Program Contact for approval (to ensure enough funds are available).		current rates listed on the OFM Website http://www.ofm.wa.gov/resources/travel.asp

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

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

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

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

Program Specific Requirements

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 ~~\$7,200~~ **\$10,800** for **Task 1**, and **\$2,000** 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 sanitary surveys, bill half to BARS Revenue Code 346.26.64 and half to BARS Revenue Code 346.26.65.

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 1 surveys of non-community systems with three or fewer connections be completed between January 1, 2022 and December 31, 2022.
- No more than 3 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 4 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 1 survey of non-community systems with three or fewer connections be completed between January 1, 2024 and December 31, 2024.*
- *No more than 4 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.

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: Office of Immunization COVID-19 Vaccine -
Effective January 1, 2022

Local Health Jurisdiction Name: Jefferson County Public Health

Contract Number: CLH31013

SOW Type: Revision **Revision # (for this SOW)** 4

Period of Performance: January 1, 2022 through June 30, 2024

Funding Source ☒ Federal Subrecipient ☐ State ☐ Other	Federal Compliance (check if applicable) ☒ FFATA (Transparency Act) ☐ Research & Development	Type of Payment ☒ Reimbursement ☐ Fixed Price
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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 tasks.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date End Date		Current Allocation	Allocation Change None	Total Allocation
COVID19 Vaccines R4	74310230	93.268	333.93.26	01/01/22	06/30/24	709,606	0	709,606
COVID19 CDC Vaccines	74310229	93.268	333.93.26	01/01/22	06/30/24	278,114	0	278,114
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						987,720	0	987,720

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
The purpose of this statement of work is to identify activities and provide funding to support COVID vaccine response outreach, education, and operations. The activities may include other vaccines recommended for the audience population, as long as COVID vaccine is the primary focus and references to other vaccines are secondary.				
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, non-traditional provider, or vulnerable populations to develop strategies to ensure equitable access to vaccination services			
3.B	Implement the communication strategies or other activities, working with health care providers and other partners to reach the locally identified population, support providers in vaccination plans, and support equitable access to vaccination services.	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 co-administered 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.
3.E	At the LHI discretion, provide incentives to persons receiving COVID vaccine, adhering to LHI Guidance for COVID Initiatives Application requirements and allowable/unallowable use of federal funds.	a. LHI Incentive Plan Proposal b. Report that summarizes quantity of incentives purchased and distributed	a. Prior to implementing b. June 30, annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
3.F	As needed to meet community needs, perform as a vaccine depot to provide COVID vaccine. Duties include ordering and redistributing of COVID-19 vaccine, assure storage space for minimum order sizes, initiating transfer in the Immunization Information System (IIS), coordinate with providers for physical transport of doses, and maintaining inventory of COVID vaccine by manufacturer. Immunization COVID-19 funding is specifically required to address COVID-19 vaccination activities. However, the funding can be leveraged to also address and incorporate other	a. Complete a redistribution agreement. b. Report inventory reconciliation page. c. Report lost (expired, spoiled, wasted) vaccine to the IIS. d. Report transfer doses in the IIS and VaccineFinder. e. Monitor and maintain vaccine temperature logs from digital data logger and/or the temperature monitoring system for a minimum of 3 years.	a. Submit upon completion b. Reconcile and submit inventory once monthly in the IIS. c. Report lost vaccine within 72 hours in the IIS. d. Update within 24 hours from when transfers occur.	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
	<i>non-COVID vaccination activities concurrent to COVID-19 vaccination activities. For example, COVID vaccine storage and distribution may also support monkeypox vaccine storage and distribution, concurrently</i>		<i>e. — Download as needed (retain temperature data on-site for 3 years)</i>	

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)

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

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

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

Program Specific Requirements

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

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.

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: OSS LMP Implementation - Effective July 1, 2023

Local Health Jurisdiction Name: Jefferson County Public Health

Contract Number: CLH31013

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

Period of Performance: July 1, 2023 through December 31, 2024

Funding Source ☐ Federal <Select One> ☒ State ☐ Other	Federal Compliance (check if applicable) ☐ FFATA (Transparency Act) ☐ Research & Development	Type of Payment ☒ Reimbursement ☐ Fixed Price
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Statement of Work Purpose: The purpose of this statement of work is to fund implementation of the on-site sewage system (OSS) local management plan (LMP).

Note: Statements of work with GFS funds must exhaust those funds before billing ALEA funds. GFS funds in the 07/01/23-06/30/24 funding period cannot roll over into the next funding period. This funding allocation is for the 2023-2025 state biennium. New statements of work with a period of performance of January 1, 2025 to June 30, 2025 will be issued in the next consolidated contract term.

Revision Purpose: Updating GFS funding code. The funding source remains the same but the coding has changed

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date	LHJ Funding Period End Date	Current Allocation	Allocation Change None	Total Allocation
SMALL ONSITE MANAGEMENT (ALEA)	26705100	N/A	334.04.93	07/01/23	06/30/24	33,333	0	33,333
SMALL ONSITE MANAGEMENT (ALEA)	26705100	N/A	334.04.93	07/01/24	12/31/24	33,333	0	33,333
SMALL ONSITE MANAGEMENT (GFS)	26701100	N/A	334.04.93	07/01/24	12/31/24	31,970	-31,970	0
SFY25 WASTEWATER MANAGEMENT-GFS	26701150	N/A	334.04.93	07/01/24	12/31/24	0	31,970	31,970
						0	0	0
						0	0	0
						0	0	0
TOTALS						98,636	0	98,636

GOALS & MEASURABLE OBJECTIVES

This table summarizes starting and target metrics achieved by implementing the tasks below. This data is reported on an ongoing basis in the semiannual progress reports.

Description (e.g., "OSS compliance")	Units (e.g., "systems")	Starting Amount	Targets
OSS compliant with inspections in Marine Recovery Areas (MRAs)	Number of OSS	486	550
OSS compliant with inspections countywide	Number of OSS	1693	1900
OSS failures identified/corrected in MRA	Number of OSS failures identified/ number of OSS failures with completed repairs	9/2	12/6

OSS failures identified/corrected countywide	Number of OSS failure identified/ number of OSS failures with completed repairs	25/8	32/16
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Task #	Task/Activity/Description	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
Task 1. Grant Administration This task is to fund the required financial and reporting activities necessary to meet state DOH and Auditor requirements including administration of LHJ local management plan and OSS LMP grant program.				
1.1	Bi-monthly Invoicing and Progress Reports DOH Consolidated Contracts (ConCon) requires billing within 60 days of completing work. LHJ will submit invoices through the ConCon process and will send progress reports and deliverables to the LMP Contract Manager. Invoices must be submitted at least bi-monthly (per ConCon requirements) but no more frequently than monthly. Invoices will be reviewed for consistency with progress. The LMP Contract Manager may require monthly invoices.	Bimonthly/Monthly invoices	Bimonthly/monthly for duration of contract period.	Reimbursement up to \$4,104 based on actual costs.
1.2	Semi-Annual Progress Reports Reporting periods are semi-annually from January 1 – June 30 and July 1 – December 31. Progress reports include data described in the outcome column.	Data about the following: - Qualitative: - Summary of work. - Barriers to LMP Implementation. - Quantitative: - OSS inventory metrics. - Enforcement actions. - Outreach and Education efforts.	Due July 15 and December 31 for the duration of the contract period.	
Task 2. Local Management Plan Implementation This task includes all work done to implement the county’s LMP excluding grant management tasks and inspection rebates/incentives.				
2.1	Database Maintenance and Quality Assurance/Quality Control (QA/QC) Database maintenance and QA/QC is ongoing to ensure accurate tracking methods for all OSS in the county. Specific tasks include: - Continue to ‘clean-up’ the existing data post data conversion in Energov permitting database - Configure Energov database for SOM workflows, reports, automation tasks. - Develop Application Program Interface (API) between database and Online-RME. - Develop replacement Homeowner Inspector Authorization website	a. Provide narrative of data clean-up tasks completed and in-progress. b. Provide narrative of progress on configuring Energov database for SOM workflows, reports, automation tasks. c. Provide narrative of API development tasks completed and in-progress. d. Provide narrative of Homeowner Inspector Authorization website tasks completed and in-progress.	a-d. Report in semi-annual progress report in Subtask 1.2.	Reimbursement up to \$58,394 based on actual costs.

Task #	Task/Activity/Description	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
2.2	Operations and Maintenance (O&M) Program Administration - Mail inspection reminders to homeowners as needed. - Inspection Compliance tracking/mapping. - Failure and repair tracking/mapping. - Compliance enforcement. - Complaint response. - O&M data reports about inventory and deficiencies.	a. Enforcement Protocol. b. Data on the following: - Number of OSS with current inspections - Number of OSS failures and calculated risk using DOH-provided risk assessment. - Number of repairs.	a. September 1, 2023. b. Report in semi-annual progress report in Subtask 1.2.	
2.3	Education and Outreach Education and outreach is conducted for OSS owners, realtors, etc. Specific tasks include: - Communicate via social media, website, and mailings - Provide in-person homeowner septic inspector classes for property owners - Provide online homeowner inspector training and authorization for property owners	a. Track number of social media posts and mailings b. Track attendance of in-person homeowner septic inspector classes c. Track number of homeowner inspectors trained and authorized online	a-c. Report in semi-annual progress report in Subtask 1.2.	
2.4	Professional Development and Coordination - The LHJ will participate in LMP and West Side Coordinators Meetings and will network between counties. - The LHJ will support professional development through: - Attending DOH OSS Program trainings. - Environmental Heath Conferences - Annual Education Conference (AEC) - Two (2) Staff members. - Washington On-Site Sewage Association (WOSSA) Conference - Two (2) Staff members.	a. Attendance and contribution at four (4) meetings per year. b. Conference and Training participation as available.	a-b. Report attendance semi-annually, as scheduled in Task 1.2.	
Task 3. Homeowner Inspection Rebates/Incentives Program Provide low-income rebates to homeowners. Provide inspection compliance incentives to homeowners in priority areas.				
3.1	Low-Income Homeowner Inspection Rebates The LHJ will provide rebates to homeowners for pumping, inspection and minor repairs. Rebates issued will be up to \$350.	a. Provide draft and final process/policy documents to DOH. b. Report number of rebates provided for pumping, monitoring inspections and access risers.	a. Prior to issuing any rebates. b. By grant closeout.	Reimbursement up to \$36,138 based on actual costs.
3.2	Homeowner Inspection Incentives Promote pumping, inspection and minor repairs with rebates to homeowners in priority areas. Rebates issued will be up to \$350.	a. Provide draft and final process/policy documents to DOH. b. Report number of rebates for pumping, monitoring inspections and access risers to grade provided to priority-area homeowners.	a. Prior to issuing any incentives. b. By grant closeout.	

Budget	
Category	Amount
Personnel/Salaries	\$28,775
Fringe Benefits	\$16,625
Travel	\$3,500
Supplies	
Contracts	
Other	
• Registration Fees	\$2,498
• Rebates/Incentives	\$36,138
Total Direct Charges	\$87,536
Indirect Charges (federally approved rate)	\$11,100
TOTAL – Not to Exceed	\$98,636

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.

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: School-Based Health Centers Program -
Effective July 1, 2023

Local Health Jurisdiction Name: Jefferson County Public Health

Contract Number: CLH31013

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

Period of Performance: July 1, 2023 through December 31, 2024

Funding Source ☐ Federal <Select One> ☒ State ☐ Other	Federal Compliance (check if applicable) ☐ FFATA (Transparency Act) ☐ Research & Development	Type of Payment ☒ Reimbursement ☐ Fixed Price
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Statement of Work Purpose: The purpose of this statement of work (SOW) is to fulfill the legislative mandate, RCW 43.70.825, and formalize a grant award to Jefferson County Public Health for a School-Based Health Centers (SBHC) operations/expansion/improvement grant. A school-based health center is defined in the law as “a student-focused health center located in or adjacent to a school that provides integrated medical, behavioral health, and other health care services such as dental care.”

Jefferson County Public Health will complete infrastructure and capacity building tasks and activities outlined in the contract to operate, expand, and/or improve a school-based health center at Quilcene, Chimacum, and Port Townsend School Districts. Activities include participation in trainings, technical assistance, and contract meetings; expanding, sustaining, and/or improving SBHC services; engaging the community about the SBHC; and reporting on performance.

Revision Purpose: The purpose of this revision is to increase the amount of the grant award to restore the year two budget to close to the amount of the year one award (\$150,000 per year for start-up grants) and revise task deliverable due date and payment amounts and update Billing Requirements.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date End Date	Current Allocation	Allocation Change Increase (+)	Total Allocation
SFY24 SBHC PROVISIO	78310840	N/A	334.04.90	07/01/23 06/30/24	110,000	35,000	145,000
SFY25 SBHC PROVISIO	TBD	N/A	334.04.90	07/01/24 12/31/24	62,000	0	62,000
					0	0	0
					0	0	0
					0	0	0
					0	0	0
TOTALS					172,000	35,000	207,000

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1a	Implement sustainability plan. Create workplan that outlines tasks and activities for the project, including: • Exploration of expansion of Port Townsend SBHC services to Blue Heron Middle School • Securing funding for permanent Student Engagement/Equity Coordinator position	SBHC Operations project workplan Updated sustainability plan	September 30, 2023	\$25,000

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Workplan will identify the due date, staff that will work on each task, and staff's role for each task			
1b	Review and update sustainability workplan for 2024-2025 school year. Continue previous project/focus area or identify a new focus. Update tasks, activities, roles, and due dates.	SBHC Operations project workplan and sustainability plan updates	September 30, 2024	\$25,000
1c	Provide updates to DOH on progress of SBHC operations, project, and workplan completion. - Include status report of SBHC operations (hours of operation, staffing model, and services provided) - Include milestones, successes, challenges, and barriers	Quarterly report	Quarterly, October 15 January 15 April 15 July 15	\$24,000 (\$4,000 per report)
2	Attend bi-monthly contract meetings, starting by August 31, 2023, with DOH to discuss progress, support needs, barriers/challenges. Participate in at least one key training, support, and/or technical assistance activity per quarter, as recommended by DOH or WA School-Based Health Alliance (SBHA). Identify additional resources or training needed; collaborate with DOH to participate in and/or get access to resources, if needed.	Quarterly report that includes: - List of contract meetings attended during the reporting period - List of trainings and TA meetings attended during the reporting period - List of any additional resources or training needed	Quarterly, October 15 January 15 April 15 July 15	\$12,000 (\$2,000 per report)
3a	Update health equity plan each school year.	Updated health equity plan	September 30, 2023 September 30, 2024	\$20,000 (\$10,000 each)
3b	Implement health equity plan and provide progress updates: - Can include pictures, products, stories, and/or testimonials - Include successes, challenges, and any barriers to completing this activity	Quarterly report	Quarterly, October 15 January 15 April 15 July 15	\$15,000 (\$2,500 per report)
4a	In collaboration with DOH SBHC epidemiologist, draft SBHC evaluation plan for SBHC operations and identified project. Include reporting mechanism for identified evaluation measures.	Evaluation plan	December 31, 2023 September 30, 2023	\$30,000 \$11,000
4b	Provide updates on implementation of evaluation plan; review and update evaluation plan, as needed. Include successes, challenges, and any barriers to completing this activity.	Quarterly report	Quarterly, October 15 January 15 April 15 July 15	\$12,000 (\$2,000 per report)
4c	Collect and report on required performance measures, using provided DOH performance measure spreadsheet.	Quarterly performance measure report	Quarterly, October 15 January 15 April 15 July 15	\$18,000 (\$3,000 per report)

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
4d	Write plan that outlines steps, barriers, and resources needed for participation in SBHC statewide data platform.	Draft data reporting plan	March 30, 2024	\$26,000 \$10,000

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

Program Specific Requirements

Special Requirements: Quarterly progress reports will be submitted to the Department contract manager via email on a quarterly basis, using a provided template.

- Reports should include progress on deliverables to date, successes, barriers/challenges, and support needs and include:
 - General updates on the progress on other deliverables
 - Challenges/barriers to completing deliverables
 - Support needs from DOH
 - Specific deliverables/products requested
- Specific/separate reports should be submitted separately and on the specified due date.

Special References (i.e., RCWs, WACs, etc.): In accordance with RCW 43.70.825: Concerning School Based Health Centers (2021), the Washington State Department of Health (DOH) contemplates awarding a contract to Jefferson County Public Health Department (LHJ) to operate, expand, and/or improve their School-Based Health Centers.

Definitions: A school-based health center is defined in the law as “a student-focused health center located in or adjacent to a school that provides integrated medical, behavioral health, and other health care services such as dental care.” Upon execution of the contract, the SBHC must meet the minimum requirements outlined below:

- Be open during regular school hours
- Provide on-site primary care services by a nurse practitioner, physician’s assistant, medical doctor, and/or doctor of osteopathy, at least once a week
- Coordinate clinic services
- Provide behavioral health care services by a behavior health provider that is on-site, through telehealth, and/or through mobile units. If a behavioral health provider is not licensed, they must be supervised by a licensed behavioral health provider.

Billing Requirements:

- The LHJ will invoice no more than monthly and no less than quarterly.
- Due dates and deliverables can be negotiated on and changed, as needed, with prior approval from the contract manager.
- Invoices will be submitted on the DOH A19-1A Invoice Voucher form with a copy of the general ledger (or grant budget and spending documentation) and agreed upon back-up documentation. Invoices must reference this contract number and provide detailed information as requested.
- All invoices must be approved by DOH prior to payment; approval will not be unreasonably withheld. DOH will authorize payment only upon satisfactory completion and acceptance of deliverables and for allowable costs as outlined in the statement of work and/or budget. DOH will issue payment within 30 days of receiving a correct and complete invoice and approving the deliverable(s).
- DOH will return all incorrect or incomplete invoices and will not pay for services that occur outside the period of performance.
- The LHJ will not invoice for services if they are entitled to payment, have been, or will be paid by any other source for that service.
- The LHJ may bill incrementally for progress on objectives, but the entire product will be delivered for the amount specified regardless of time spent on the tasks for each objective.
- Quarterly report deadlines and invoice amounts are as follows (invoice amount listed below is an estimate and is flexible based on deliverables completed):
 - Year 1, Q1 deliverables (July-September) due by October 15, 2023: ~~\$48,500~~ ~~\$59,500~~

- Year 1, Q2 deliverables (October-December) due by January 15, 2024: ~~\$43,500~~ ~~\$13,500~~
- Year 1, Q3 deliverables (January-March) due by April 15, 2024: ~~\$39,500~~ ~~\$23,500~~
- Year 1, Q4 deliverables (April-June) due by July 15, 2024: \$13,500
- Year 2, Q1 deliverables (July-September) due by October 15, 2024: \$48,500
- Year 2, Q2 deliverables (October-December) due by January 15, 2025: \$13,500
- DOH must receive correct and complete invoices within 60 days of the contract expiration date. Late invoices will be paid at the discretion of DOH and are contingent upon the availability of funds.
 - Submit all final billings within 45 days of the end of the contract
 - Submit all required program reports and deliverables within 60 days