615 Sheridan Street
Port Townsend, WA 98368
www.JeffersonCountyPublicHealth.org
Consent Agenda

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 #10 with the Department of Health; January 1 2022 – December 31, 2024; additional $205,027 for a total of $4,330,576

STATEMENT OF ISSUE:

Jefferson County Public Health (JCPH) requests Board approval of Consolidated Contract Amendment #10 between JCPH and State of Washington Department of Health (DOH); January 1, 2022 – December 31, 2024; additional $205,027 for a total of $4,330,576.

ANALYSIS/STRATEGIC GOALS/PRO'S and CON'S:

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

- Foundational Public Health Services – updates allocation of funds to match actual funds requested and distributed for SFY22 (plus additional funding of $32,681)
- Office of Immunization COVID-19 Vaccine – modifies activities, deliverables and deliverable due dates for COVID-19 vaccine activities
- Sexual & Reproductive Health Program – extends funding period, minor edits to deliverables (additional $40,357)
- WIC Nutrition Program – women, infants and children nutrition services, additional training requirement (additional $131,989)

FISCAL IMPACT/COST BENEFIT ANALYSIS :

Total consideration for this Contract Amendment is an increase of $205,027 for a total of $4,330,576. The Consolidated Contract is funded by DOH, and comprises both Federal and State funds.

RECOMMENDATION:

JCPH Management recommends BOCC approval of Consolidated Contract Amendment #10; January 1 2022 – December 31, 2024; additional $205,027 for a total of $4,330,576.

REVIEWED BY:

Mark McCauley, County Administrator — Date 1/20/23

JEFFERSON COUNTY PUBLIC HEALTH
2022-2024 CONSOLIDATED CONTRACT

CONTRACT NUMBER: CLH31013 **AMENDMENT NUMBER: 10**

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:

   Foundational Public Health Services (FPHS) - Effective January 1, 2022
   Office of Immunization COVID-19 Vaccine - Effective January 1, 2022
   Sexual & Reproductive Health Program - Effective January 1, 2022
   WIC Nutrition Program - Effective January 1, 2022

   ☐ Deletes Statements of Work for the following programs:

2. Exhibit B-10 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-9 Allocations as follows:

   ☒ Increase of **$205,027** for a revised maximum consideration of **$4,330,576.**

   ☐ 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

Greg Brotherton, Chair Date

APPROVED AS TO FORM ONLY
P.C. Hunsucker January 19, 2023
Philip C. Hunsucker, Date
Chief Civil Deputy Prosecuting Attorney

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

Date

APPROVED AS TO FORM ONLY
Assistant Attorney General

Jefferson County Public Health

EXHIBIT B-10
ALLOCATIONS
Contract Term: 2022-2024

Contract Number: CLH31013
Date: December 1, 2022

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

Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**	Statement of Work LHJ Funding Period Start Date	Statement of Work LHJ Funding Period End Date	DOH Use Only Chart of Accounts Funding Period Start Date	DOH Use Only Chart of Accounts Funding Period End Date	Amount	Funding Period SubTotal	Chart of Accounts Total
FFY23 USDA BFPC Prog Mgmt	**NGA Not Received**	**Amd 10**	**10.557**	**333.10.55**	**10/01/22**	**09/30/23**	**10/01/22**	**09/30/23**	**$28,238**	**$37,651**	**$81,040**
FFY23 USDA BFPC Prog Mgmt	NGA Not Received	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 10**	**10.557**	**333.10.55**	**10/01/23**	**12/31/23**	**10/01/23**	**12/31/23**	**$25,238**	**$25,238**	**$211,077**
FFY23 USDA WIC Client Svs Contracts	**NGA Not Received**	**Amd 10**	**10.557**	**333.10.55**	**10/01/22**	**09/30/23**	**10/01/22**	**09/30/23**	**$75,713**	**$99,463**	
FFY23 USDA WIC Client Svs Contracts	NGA Not Received	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	**NGA Not Received**	**Amd 10**	**10.557**	**333.10.57**	**01/01/23**	**09/30/23**	**10/01/22**	**09/30/23**	**$2,800**	**$2,800**	**$2,800**
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	$516
PS SSI 1-5 OSS Task 4	01J18001	Amd 7	66.123	333.66.12	01/01/22	06/30/23	07/01/17	06/30/23	($1,654)	$233,844	$233,844
PS SSI 1-5 OSS Task 4	01J18001	Amd 2, 5	66.123	333.66.12	01/01/22	06/30/23	07/01/17	06/30/23	$235,498		
FFY22 Swimming Beach Act Grant IAR (ECY)	NGA Not Received	Amd 2	66.472	333.66.47	03/01/22	10/31/22	01/01/22	11/30/22	$15,000	$15,000	$15,000
FFY22 PHEP BP4 LHJ Funding	NU90TP922043	Amd 7	93.069	333.93.06	07/01/22	06/30/23	07/01/22	06/30/23	$34,384	$34,384	$48,138
FFY21 PHEP BP3 LHJ 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
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	$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
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		
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 LHJ 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 LHJ 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 LHJ Allocation	NU50CK000515	Amd 2	93.323	333.93.32	01/01/22	10/18/22	05/19/20	10/18/22	$82,712		

Jefferson County Public Health

EXHIBIT B-10
ALLOCATIONS
Contract Term: 2022-2024

Contract Number: **CLH31013**
Date: **December 1, 2022**

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

Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**	Statement of Work LHJ Funding Period Start Date	Statement of Work LHJ Funding Period End Date	DOH Use Only Chart of Accounts Funding Period Start Date	DOH Use Only Chart of Accounts Funding Period End Date	Amount	Funding Period SubTotal	Chart of Accounts Total
FFY20 ELC EDE LHJ 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 LHJ 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 LHJ Allocation	NU50CK000515	Amd 2, 9	93.323	333.93.32	01/01/22	07/31/23	01/15/21	07/31/24	$439,039		
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		
FFY23 MCHBG LHJ Contracts	NGA Not Received	Amd 7	93.994	333.93.99	10/01/22	09/30/23	10/01/22	09/30/23	$36,700	$36,700	$64,225
FFY22 MCHBG LHJ 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	
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
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**	**$124,109**
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		
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		
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 9	N/A	334.04.93	01/01/22	06/30/23	07/01/21	06/30/23	$7,000	$17,500	$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 1	N/A	334.04.93	07/01/22	06/30/23	07/01/21	06/30/23	$15,000	$15,000	$37,500
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	
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	$30,000
SFY23 FPHS-LHJ-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-LHJ-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-LHJ-Proviso (YR2)		Amd 1	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	$550,000		
FPHS-LHJ-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-LHJ-Proviso (YR1)		Amd 4	N/A	336.04.25	01/01/22	06/30/22	07/01/21	06/30/23	($137,500)		
FPHS-LHJ-Proviso (YR1)		Amd 1	N/A	336.04.25	01/01/22	06/30/22	07/01/21	06/30/23	$550,000		
YR24 SRF - Local Asst (15%) (FO-SW) SS		Amd 1	N/A	346.26.64	01/01/22	12/31/22	07/01/21	06/30/23	$1,400	$1,400	$1,400
Sanitary Survey Fees (FO-SW) SS-State		Amd 1	N/A	346.26.65	01/01/22	12/31/22	07/01/21	06/30/23	$1,400	$1,400	$1,400
YR24 SRF - Local Asst (15%) (FO-SW) TA		Amd 1	N/A	346.26.66	01/01/22	12/31/22	07/01/21	06/30/23	$1,000	$1,000	$1,000

Jefferson County Public Health

EXHIBIT B-10
ALLOCATIONS
Contract Term: 2022-2024

Contract Number: **CLH31013**
Date: **December 1, 2022**

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

Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**	Statement of Work LHJ Funding Period Start Date	Statement of Work LHJ Funding Period End Date	DOH Use Only Chart of Accounts Funding Period Start Date	DOH Use Only Chart of Accounts Funding Period End Date	Amount	Funding Period SubTotal	Chart of Accounts Total
TOTAL									**$4,330,576**	**$4,330,576**	
Total consideration:	**$4,125,549**									**GRAND TOTAL**	**$4,330,576**
	$205,027										
GRAND TOTAL	**$4,330,576**									**Total Fed**	**$2,066,986**
										Total State	**$2,263,590**

*Catalog of Federal Domestic Assistance

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

Exhibit A
Statement of Work
Contract Term: 2022-2024

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

Local Health Jurisdiction Name: Jefferson County Public Health

Contract Number: CLH31013

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

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

Funding Source	Federal Compliance (check if applicable)	Type of Payment
☐ Federal <Select One>		☐ Reimbursement
☒ State	☐ FFATA (Transparency Act)	☒ Periodic Distribution
☐ Other	☐ Research & Development	

Statement of Work Purpose: The purpose of this statement of work (SOW) is to specify how state funds for Foundational Public Health Services (FPHS) will be used for the period of performance. Per RCW 43.70.512, these funds are for the governmental public health system to deliver FPHS services statewide in the most effective, efficient and equitable manner possible with the funds available.

The FPHS Steering Committee with input from FPHS Subject Matter Expert (SME) Workgroups and the Tribal Technical Workgroup is the decision making body for FPHS. For SFY22, the Steering Committee is using an iterative approach to decision making. Determining investments for SFY22 (July 1, 2021 – June 30, 2022). This means that additional tasks and/or funds may be added to an LHJ's FPHS SOW as these decisions are made.

These funds are to be used as directed and allocated by the FPHS Steering Committee. As the global COVID-19 pandemic and the public health response to it continues and begins to abate, these FPHS funds can be braided with and used to supplement other short-term pandemic response funding as needed for FPHS activities during this period of performance through 06/30/22. Responding to pandemics, epidemics and public health emergencies are foundational services of the governmental public health system.

Note:

The total SFY22 funding allocation is for the period of July 1, 2021 through June 30, 2022. The funding allocations will be divided into two six-month lump sum amounts that will be disbursed at the beginning of each six month period as follows: July 1, 2021; January 1, 2022. The July payment will be disbursed upon completion of the FPHS Annual Report.

The SFY22 July 1, 2021 disbursement of funds was completed in the 2018-2021 consolidated contract and is included in this statement of work for informational purposes only.

FPHS funds must be spent in the state fiscal year (SFY) in which they are appropriated by the legislature, allocated, and disbursed. Legislative appropriations lapse at the end of each state fiscal year. (RCW 43.88.140)

Spending and spending projections must be reported as required by the FPHS Steering Committee. Funds that are projected to be unspent by the close of the state fiscal year must be reallocated per the process developed by the FPHS Steering Committee to assure that all funds appropriated by the legislature can be spent by the governmental public health system to deliver FPHS within the year that the funds are appropriated. Unspent funds revert to the state treasury and must be returned to DOH by July 15th of each year for return to the Office of Financial Management.

Revision Purpose: The purpose of this revision is to update allocation to match actual funds requested and distributed for SFY22.

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 Increase (+)	Total Allocation
FPHS-LHJ-PROVISO (YR1) Note: Total YR1 allocation is for SFY22 (07/01/21-06/30/22)	99202111	N/A	336.04.25	01/01/22	06/30/22	412,500	32,681	445,181
						0	0	0
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						**412,500**	**32,681**	**445,181**

BARS Expenditure. Code 562.xx	FPHS	Tasks / Activities / Short Description	Funds to provide FPHS in: Your jurisdiction	Funds to provide FPHS in: Other jurisdictions	SFY22
10-17, 20, 21, 23-29 40-53, 93	All – CD, EPH, CCC, Assessment	Reinforcing Capacity (Assessment, CD, EPH, CCC)	X		192,000
10	Assessment	CHA/CHIP	X		30,000
20, 21, 23-29, 93	CD	Communicable Disease (CD)	X		138,000
40-53, 93	EPH	Environmental Public Health (EPH)	X		190,000
				Funding Adjustment	-137,500 *32,681*
				TOTAL	~~*$412,500*~~ *$445,181*

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	In coordination with FPHS Steering Committee and Subject Matter Expert (SME) workgroups FPHS funds are to be used to increase delivery of FPHS services statewide as measured through FPHS annual reporting, indicators, metrics and other data compiled and analyzed by contractors, DOH and Subject Matter Expert (SME) Workgroups. Resuts are published in the annual FPHS Investment Report. FPHS indicator metrics available here.	Routine reporting of spending and spending projections. Process and reporting template TBD and provided by the FPHS Steering Committee via DOH. FPHS annual reporting (template provided by the FPHS Steering Committee via DOH)	TBD For SFY22 (07/01/21 – 06/30/22) due by 08/15/22	Each year, the July payment will be disbursed upon completion of the FPHS Annual Report.

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	**Reinforcing Capacity** – These funds are to **each** LHJ to deliver FPHS in **their own jurisdiction** – In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, provide FPHS Communicable Disease (CD), Environmental Public Health (EPH), Assessment (Surveillance & Epidemiology) and / or any or all of the other FPHS Cross-cutting Capabilities (CCC) as defined in the most current version of the FPHS definitions. Suggested BARS expenditure codes: 652.xx - 10-17, 20, 21, 23-29, 40-53.			
2	**Assessment – CHA/CHIP** (FPHS definitions G.3) – These funds are to **each** LHJ to deliver FPHS in **their own jurisdiction** – In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, conduct and complete a comprehensive community health assessment and identify health priorities arising from that assessment, including analysis of health disparities and the social determinants of health as defined in the most current version of the FPHS definitions. • Conduct a local and/or regional comprehensive community health assessment (CHA) every three to five years in conjunction with community partners. • Develop a local and/or regional community health improvement plan (CHIP) in conjunction with community partners. These funds can be used for any CHA/CHIP activity or service (e.g., data analysis, focus groups, report writing, process facilitation) and may be used to contract with other LHJs for staff time or services. Coordinate with the Spokane Regional Health District to participate in County Health Insights. Suggested BARS expenditure codes: 562.11.			
3	**Communicable Disease (CD)** (FPHS definitions C.1, 2, 3, 4, 6) – These funds are to **each** LHJ to deliver FPHS in **their own jurisdiction** – In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, provide FPHS CD services as defined in the most current version of the FPHS definitions. These funds can (and actually are intended to) be braided with temporary pandemic emergency funding such that when those funds run out, FPHS funds can be used to retain staff there were hired with pandemic emergency funds if the jurisdictions desires to retain them and/or to hire additional staff if needed and/or contract with other LHJs for staff time or services for delivering FPHS CD. As the pandemic response wains, staff funded with FPHS funds are to shift focus to providing some or all or the FPHS CD services. This includes maintaining access to and use of data systems created during the pandemic and others under development and case investigation and contact tracing for sexually transmitted disease and other communicable and notifiable conditions within the mandated timeframes. Emphasis should be placed on addressing syphilis and gonorrhea cases. **1.** Provide timely, statewide, locally relevant and accurate information statewide and to communities on prevention and control of communicable disease and other notifiable conditions. **2.** Identify statewide and local community assets for the control of communicable diseases and other notifiable conditions, develop and implement a prioritized control plan addressing communicable diseases and other notifiable conditions and seek resources and advocate for high priority prevention and control policies and initiatives regarding communicable diseases and other notifiable conditions. **3.** Promote immunization through evidence-based strategies and collaboration with schools, health care providers and other community partners to increase immunization rates. **4.** Ensure disease surveillance, investigation and control for communicable disease and notifiable conditions in accordance with local, state and federal mandates and guidelines. Suggested BARS expenditure codes: 562.xx – 20, 21, 23-29.			
4	**Environmental Public Health (EPH)** (FPHS definitions B.3 & 4) – These funds are to **each** LHJ to deliver services in **their own jurisdiction**. In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, these funds are for each LHJ to deliver FPHS EPH services in their jurisdiction as defined in the most current version of the FPHS definitions and supplement existing funding specifically for: • Develop, implement and enforce laws, rules, policies and procedures for maintaining the health and safety of retail food service inspections and shellfish monitoring, that address environmental public health concerns. (B.3.b)			

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

- Develop, implement and enforce laws, rules, policies and procedures for ensuring the health and safety of wastewater and facilities, including onsite septic design and inspections, wastewater treatment and reclaimed water, that address environmental public health concerns. (B.3.e)
- Develop, implement and enforce laws, rules, policies and procedures for ensuring the health and safety of solid waste and facilities, including hazardous waste streams (e.g. animal waste, solid waste permitting and solid waste inspections), that address environmental public health concerns. (B.3.f)
- Develop, implement and enforce laws, rules, policies and procedures for ensuring the health and safety of schools, including through education and plan review that address environmental public health concerns. (B.3.g)

These funds can be used to retain, hire and/or contract with other LHJs for staff time or services and for staff training as needed to provide the following FPHS EPH services that are not appropriately funded with fees. Each LHJ will be responsible to report on their progress on FPHS deliverables even if contracted with other LHJs (FPHS funds are intended to build capacity and not intended to justify the reduction of existing fee revenue):

- Food Safety (FPHS definitions B.3.b.) – Respond to food safety concerns that are not appropriately funded such as foodborne illness threats, requests for technical assistance and addressing new and emerging business models. Every local jurisdiction in Washington is expected to respond to foodborne illness outbreaks, food safety inquiries and provide preventative education for the general public and technical assistance.
- Sewage Safety (FPHS definitions B.3.e-f) – Respond to sewage concerns and public health threats and provide technical assistance that are not appropriately funded to ensure that sewage is handled appropriately to limit potential exposure to sewage. Every local jurisdiction in Washington is expected to ensure sewage is properly managed. On-Site Septic (OSS) permitting, enforcement and providing technical assistance and education to OSS owners are fee funded activities and should be funded through fees or local government who sets the fees. These FPHS funds provide resources to support activities for which a fee cannot be charged such as: responding to OSS failures, surfacing sewage, OSS safety concerns, and similar issues. These funds can also be used for concerns related to large on-site sewage systems, other OSS-related concerns that do not involve locally permittable systems, and other sewage-related issues, regardless of whether they are related to a fee-for-service activity. Examples of activities FPHS funds can be used for:
  - Work with partners to educate and inform public on OSS monitoring and maintenance
  - Work with the public, policy makers and partners to assess needs and develop plans and solutions for wastewater management in their communities.
  - Respond to complaints, act as needed, and assure that failing OSS are identified and promptly repaired.
  - Conduct Pollution Identification and Correction (PIC) investigations where water quality is impaired to identify failing septic systems and other pollution sources.
  - Ensure that sewage from both OSS and other sources is adequately handled to create barriers to potential exposure to sewage.
  - Adequate qualified staff to evaluate proposals, inspect new installations and repairs, assess cause of OSS failure, and comply with requirements in state law.
- Schools Safety (FPHS definition B.3.g) – Assure safe and effective learning environments for children attending K-12 schools – public, private and parochial. Every local jurisdiction in Washington is expected to work collaboratively with DOH, ESDs and local school districts and use the model program to assure consistency to regularly evaluate each K-12 for health and safety concerns and provide mandated services per WAC 246-366. Initial priorities include:
  - Build partnerships with school officials, local boards of education, parent teacher associations, education service districts, and other school focused entities.
  - Participate with statewide public health groups to standardize school program implementation.
  - Focus on schools that have not previously been inspected to assess current conditions
  - Focus on existing elementary schools for first phase of inspections program
    - Indoor Air Quality
    - Classroom
    - Healthy cleaning and indoor environments
    - Playground
    - Drinking water (lead)

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Suggested BARS expenditure codes: 562.xx – 40-53.			

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

Program Manual, Handbook, Policy References:
All FPHS Resources – www.doh.wa.gov/fphs or FPHS | Powered by Box

Special References (i.e., RCWs, WACs, etc.):
Link to RCW 43.70.512 – RCW 43.70.512: Public health system—Foundational public health services—Intent. (wa.gov)

Link to RCW 43.70.515 – RCW 43.70.515: Foundational public health services—Funding. (wa.gov)

Definitions:
FPHS Definitions – https://wsalpho.box.com/s/qb6ss10mxbrajx0fla742lw6zcfxzohk

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

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

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

Public Health Budgeting, Accounting and Reporting System (BARS) Resources: www.doh.wa.gov/lhjfunding

DOH Program Contact
Marie Flake, Special Projects, Foundational Public Health Services, Washington State Department of Health
Mobile Phone 360-951-7566 / marie.flake@doh.wa.gov

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)** 2

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

Funding Source	Federal Compliance (check if applicable)	Type of Payment
☒ Federal Subrecipient ☐ State ☐ Other	☒ FFATA (Transparency Act) ☐ Research & Development	☒ Reimbursement ☐ 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 modify activities, deliverables, and deliverable due dates.

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
COVID19 Vaccines R4	74310230	93.268	333.93.26	01/01/22	06/30/24	709,606	0	709,606
COVID19 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.	~~*Mid-term*~~ 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	~~*Final*~~ written report, showing the strategies used and the final progress of the reach (template to be provided)	~~*December 31*~~ *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). 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)	~~*Quarterly*~~ reports summarizing quantity, type, and frequency of activities	~~*March*~~ *December* 31~~, annually~~ June 30, ~~*annually*~~	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
3.E	At the LHJ discretion, provide incentives to persons receiving COVID vaccine, adhering to *LHJ Guidance for COVID Initiatives Application* requirements and allowable/unallowable use of federal funds.	a. LHJ Incentive Plan Proposal b. ~~*Quarterly*~~ report that summarizes quantity of incentives purchased and distributed	a. Prior to implementing b. ~~*March 31, Annually*~~ 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 non-COVID vaccination activities concurrent to COVID-19*	*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
	vaccination activities. For example, COVID vaccine storage and distribution may also support monkeypox vaccine storage and distribution, concurrently		*e. Download as needed (retain temperature data on site for 3 years)*	

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: Sexual & Reproductive Health Program - 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 December 31, 2024

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

Statement of Work Purpose: The purpose of this statement of work (SOW) is to provide sexual and reproductive health services (SRH) to Washington State residents. These services will comply with all state, federal, and DOH SRHP Manual requirements. It highlights specific requirements, but all must be complied with. Budgets are based on an approved allocation formula with funds available.

This Statement of Work spans Year 1 and Year 2 of the contract, which runs January 1, 2022 – March 31, 2024

For state funding, due dates after June 30, 2023 are for reporting only. LHJs may not bill under this contract for work done after June 30, 2023.

Revision Purpose: The purpose of this revision is to extend the funding period for FFY23 Sexual &Rep Hlth Cost Share from 12/31/22 to 06/30/23 and add $40,357, extend the period of performance from March 31, 2023 through December 31, 2024, and make minor edits to task deliverables and due dates.

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 Increase (+)	Total Allocation
SFY22 Sexual & Rep Hlth Cost Share	78430120	N/A	334.04.91	01/01/22	06/30/22	44,100	0	44,100
FFY22 Title X Dire Needs	78430222	93.217	333.93.21	01/14/22	03/31/22	4,066	0	4,066
FFY22 Title X Family Planning	78430225	93.217	333.93.21	04/01/22	03/31/23	27,137	0	27,137
SFY23 Sexual & Rep Hlth Cost Share	78430130	N/A	334.04.91	07/01/22	06/30/23	39,652	40,357	80,009
						0	0	0
						0	0	0
TOTALS						**114,955**	**40,357**	**155,312**

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.	**Sexual and Reproductive Health Program (SRHP) & Title X (TX) Services—excluding abortion and other surgical procedures related to SRHP.** A. Comply with Washington State 2022 SRHP Manual, federal Title X requirements and all state and federal laws. Also see Program	• A19 invoice vouchers submitted in a timely manner accompanied by an R&E workbook showing revenue and expenses for the month billed and any other required back up documentation per DOH policy.	No more than monthly and no less than quarterly.	Billing must be based on a current cost methodology approved by DOH (see Reporting Requirements table).

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Manual, Handbook, Policy References under 3. Reporting Requirements below. B. Complete required Agency Information Dashboard that includes Title X Assurance of Compliance 1. Compile all National Provider Identifier (NPI) billing numbers for SRHP services and submit to DOH. DOH will compile and send to Health Care Authority (HCA) in order for LHJ to qualify for the Medicaid Enhanced rate C. Provide medical services, community education and outreach, and staff training, consistent with state requirements: 1. LHJ is responsible for making sure all staff have the knowledge to carry out the requirements of the SOW. 2. Medical, laboratory, and other services related to abortion are not covered by this task. 3. Community education services must be based on the needs of the community. LHJ must have an Information & Education (I&E) committee with no fewer than five (5) members and up to as many members as the LHJ determines; be broadly representative of the population or community for which materials are intended; review all educational materials for clients; meet at least annually and establish a written record of its determination. (42 CFR 59 [59.6]) 4. Outreach is to ensure all populations in your community understands the services available. Focus your outreach efforts on increasing equity. Washington State Sexual and Reproductive Health Network priority populations are:	• All reports described in Reporting Requirements table below. • Other data and documentation in format requested by DOH. (Includes copies of program and financial audits and reviews including summaries conducted by other entities.) • To facilitate DOH/TX desk reviews—requested documentation available to DOH in requested format. • To facilitate DOH/TX site-visits—appropriate staff and documentation readily available prior to and during review. DOH performs site visits. Follow-up site visits are performed until identified issues are resolved.	As described in Reporting Requirements table below. As requested by DOH As requested by DOH	DOH reserves the right to withhold payment until: • Compliance issues related to this or a previous SOW are resolved in a way accepted by DOH • Current data is submitted to, and accepted by, Ahlers. • A19 back up documentation required by DOH has been submitted and approved. • Other deliverables have been met. Payment is limited to the maximum funds available for funding source. DOH will reimburse for: • Actual allowable costs according to your approved cost methodology (see Reporting Requirements table). or • The amount remaining in the SOW divided by the number of months remaining in the funding source, plus one, whichever is less.

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	• Teens • People who are uninsured or underinsured, and/or low-income (at or below 250% of the federal poverty line) • Rural communities • Hispanic • Black, Indigenous, People of Color Extra efforts should be made to provide information and services to people who intersect with multiple priority population categories. Provide all services in accordance with: • DOH SRHP & Title X Manual • Other state and federal requirements • LHJ's Current Scope Report (defined under 3. Reporting Requirements below)			Payment will be calculated by R&E provided by DOH (see Reporting Requirements table). All services through ~~03-31-23~~ *06-30-23* must be billed by ~~04-30-23~~ *07-30-23*
	D. Collect, maintain, and provide data about each family planning clinic visit as defined in the SRH CVR Manual. 1. Maintain a computer system that includes normal safety precautions against loss of information. 2. Ensure data entry personnel protect confidentiality of CVR data. 3. Have ability to retrieve all information for auditing and monitoring by DOH or its designee.	CVR data submitted to DOH data contractor (Ahlers & Associates) electronically in a format compatible with Ahlers software. • Data for each month • Corrected CVR data	The last day of the next month. Within thirty (30) days of receiving error/rejection report or request from DOH Sexual and Reproductive Health data manager.	
	E. Notify DOH contract manager of all: • Key staff and organizational changes. • Proposed clinic site additions. New clinic sites must be approved by DOH before offering services supported by SOW funding. • Expected clinic site closures. Note: DOH may, at its sole discretion, recalculate LHJ's funding allocation if it closes a clinic site. • Any other change that might affect LHJ's ability to provide the sexual and	Email briefly describing change.	As needed to keep information current.	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	reproductive services described in this SOW.			
2.	**Abortion and other surgical procedures related to SRHP** A. LHJ may choose to use up to 3% of its total SOW state funds for medical and surgical abortions and other SRHP related surgical procedures. B. LHJ must notify the DOH contract manager prior to providing services with SOW state funds. DOH will move the appropriate amount to the appropriate funding source. This may or may not require an amendment. C. Comply with Washington State 2022 SRHP requirements and all state laws. Also see Program Manual, Handbook, Policy References section below. D. Eligible clients are those with incomes at or below 250% FPL. If LHJ bills for services provided by someone outside their organization the outside provider must agree to accept DOH payment as payment in full. LHJ is responsible for ensuring that the outside provider does not seek additional payment from the client or any other person or organization. (Also see Payment column.)	Surgical A19 accompanied by Surgical Services Summary and Health Insurance Claim Forms form for each visit billed. DOH will provide Surgical Services Summary forms and surgical A19s as part of R&E workbook for all LHJs who receive surgical funds.	No more than six (6) months after date service was provided.	DOH will only reimburse LHJ for these services if this SOW includes state surgical funds outside of the Title X Project. DOH will pay for services at Health Care Authority (HCA) Medicaid reimbursement amounts. • This will be considered payment in full. LHJ will not seek additional payment from the client or any other person or organization.
3. Reporting Requirements				
	1. Agency Information Dashboard Information required at the beginning of this SOW period. This information ensures that DOH has accurate information about LHJ's organization and the services it provides.	**This information must be reported using the template or format provided by DOH. All signatures and forms must be completed by ~~10-31-22~~ *04-30-23* It will include:** Information about your agency contacts and your organization's staffing A. Head of Organization	~~10-31-22~~ *04-30-23* AND As needed *or requested* to maintain accuracy of information.	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	In addition, elements of this report allow DOH to ensure that SRHP & Title X requirements regarding client fees, required services, requirements are met. It also provides other information to assist DOH to manage this SOW and the Sexual & Reproductive Health Network as a whole.	B. Head of Finance C. Medical Director D. The following (one person might fill more than one role) a. Contract Coordinator b. Clinical representative c. Billing contact d. Outreach and education contact e. Contact for CVR data f. Contact for EHR information *E. NPI numbers used to bill Medicaid* Information regarding sexual and reproductive health related services offered at each clinic site: A. Cost analysis: How LHJ determines what it costs to provide services. LHJ uses this to help construct its fee schedule. A cost analysis must be performed by LHJ no more than three years prior to the start date of this SOW. B. Sliding fee schedule that includes all services required in the SRH Manual. Additional Task 1 SRH-related services may also be included on LHJ's sliding fee schedule. a. Sliding fee schedule must be based on cost analysis described above. b. LHJ may use the last fee schedule approved prior to this SOW as long it was approved later than 04-01-2~~1~~2. LHJ must email the DOH contract manager letting them know it is using a prior approved fee schedule. c. LHJ must not implement a revised fee schedule until it has been approved in writing by DOH. d. Income conversion tables must be updated annually and approved by DOH Information related to current Community Outreach Plan: LHJ's community outreach plan follows a 5-year cycle. In the first year LHJ must assess, document and disseminate community health needs assessment, this process must include the following steps: A. Define the populations LHJ serves and identify opportunities to expand reach within those	Submit ~~2022 sliding fee scale to DOH by 06-30-22~~ *2023 income conversion chart by 03-15-23*	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		populations and to unreached populations in each community it serves. B. Identify organizations and people representing the broad interests of the community and identify opportunities for partnership and collaboration. C. Gather available data and current assessments (secondary data) D. Seek community perspectives by gathering input from the various populations in LHJ's community (collect primary data) E. Aggregate secondary and primary data and analyze aggregated data F. Prioritize health issues, define areas of unmet need, and incorporate both in plans for outreach and education materials and activities G. Document and disseminate the community health needs assessment to LHJ's SRH consultant and appropriate stakeholders Information related to billing and client fees Cost methodology: How LHJ determines appropriate expenses for the purpose of billing DOH. If LHJ cost methodology was approved by DOH after 04-01-2~~0~~2, LHJ does not have to resubmit unless changes were made. LHJ does need to email DOH contract manager informing them that no changes were made.		
	2. Family Planning Annual Report (FPAR) Information DOH is requesting to develop trend data. All information is for calendar year 2022 (January through December 2022). The subsequent agreements sent to the agency will request that these data be collected and reported on within the statement of work period of performance.	**Organization-level data on clinical services emailed to DOH SRH data manager** Number of: A. Pap tests with an ASC or higher result B. Pap tests with an HSIL or higher result C. HIV Positive confidential tests D. HIV Anonymous tests E. FTE required to provide sexual and reproductive health services: • Physicians • Physician assistants + nurse practitioners + certified nurse midwives • Registered nurses with expanded scope of practice who are trained and permitted by state specific	Data to be collected *annually* through the end of the contract period ~~(03-31-23).~~	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		regulations to perform all aspects of the physical assessment. Financial data emailed to DOH Contract Manager R&E showing Other Revenue through ~~6-30-22~~ *12-31-23* as described ~~in item 5~~, below. Subsequent agreements will request that data be collected and reported on during the appropriate contract period of performance. (FPAR due ~~01-31-23~~ *01-31 annually through 2027*)		
	3. Clinic Visit Reports (CVRs)	**Clinic visit records must include all elements specified in the Clinic Visit Record (CVR) Manual available at: https://www.doh.wa.gov/Portals/1/Documents/Pubs/930-139-CVRManual.pdf.** CVR data must be submitted to DOH data contractor (Ahlers & Associates) electronically in a format compatible with Ahlers software. - Each month's CVR data - Corrected CVR data	The last day of the next month Within thirty (30) days of receiving error or rejection report or request from DOH SRH data manager.	
	4. Revenue and Expense Reports (R&E)	**Completed R&E for time period that shows all revenue (including program income) that support Task 1 SRH Services and all expenses related to providing those services. R&E workbook will be provided by DOH.** A. Expenses must match General Ledger. B. Other revenue/program income must reflect revenue actually received in the reporting month. All entries on "Other" rows must be accompanied by a description of the revenue source or expense, including any calculations uses.	Submitted with each invoice (A19). No more than monthly and no less than quarterly. R&E showing all sources of revenue that support services for: January 202~~3~~*3*-June 2023 due within 30 days after ~~03-31-23~~ *06-30-23*	

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

Program Manual, Handbook, Policy References:
LHJ must comply with all state and DOH SRH requirements, policies, and regulations and with their DOH approved Current Scope Report.
Reference documents include:

- DOH SRHP Manual (DOH publication 930-122, available at https://www.doh.wa.gov/portals/1/Documents/Pubs/930-122-FPRHManualComplete.pdf). Some provisions of this manual are highlighted in this SOW, but all provisions of the manual must be complied with.
- Clinic Visit Record Manual (https://www.doh.wa.gov/Portals/1/Documents/Pubs/930-139-CVRManual.pdf)
- LHJ's approved Current Scope Report

Billing Requirements:
See Payment column of Tasks and Deliverables table and R&E report description in Reporting Requirements table

Special Instructions:
Accessibility of Services

- Clients must not be denied services or subjected to variation in quality of services because of inability to pay.
- LHJ must make sure their communities are informed of the services available.
- LHJ must make sure that all services provided are accessible to target populations.
    - Facilities must be geographically accessible to the populations served.
    - As much as possible, services will be available at times convenient to those seeking services.
    - Clinics must comply with the Americans with Disabilities Act.
    - Facilities must meet applicable standards established by the Federal, State, and local governments, including local fire, building, and licensing codes.
    - Clinic settings must ensure respect for the privacy and dignity of the individual.
- Clients must be accepted on referral from any source.
- Services must be provided solely on a voluntary basis. Acceptance of SRH services must not be a prerequisite to eligibility for, or receipt of, services in any non-SRH programs of the LHJ.

Availability of Emergency Services
The LHJ must have written plans and procedures for the management of on-site medical emergencies, including emergencies that require transport and after-hours management of contraceptive emergencies. (See DOH SRH Manual)

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: WIC Nutrition Program - Effective January 1, 2022

Local Health Jurisdiction Name: Jefferson County Public Health
Contract Number: CLH31013

SOW Type: Revision **Revision # (for this SOW)** 5

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

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

Statement of Work Purpose: The purpose is to provide Women, Infants, and Children (WIC) Nutrition Program services by following WIC federal regulations, WIC state office policies and procedures, WIC directives, and other rules. Refer to the Program Specific Requirements section of this document.

Revision Purpose: To add FFY23 and FFY24 USDA WIC Client Services Contracts funds, FFY23 USDA WIC Program Management CSS funds and a special requirement, FFY23 USDA BFPC Program Management funds, and to update the caseload.

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 Increase (+)	Total Allocation
FFY22 USDA WIC CLIENT SVS CONTRACTS	76101234	10.557	333.10.55	07/01/22	09/30/22	86,376	0	86,376
FFY23 USDA WIC CLIENT SVS CONTRACTS	76101244	10.557	333.10.55	10/01/22	09/30/23	23,750	75,713	99,463
FFY22 USDA BFPC PROG MGMT	76214231	10.557	333.10.55	01/01/22	09/30/22	43,389	0	43,389
FFY22 USDA FMNP PROG MGMT	76540237	10.572	333.10.57	05/01/22	09/30/22	516	0	516
FFY23 USDA BFPC PROG MGMT	76214241	10.557	333.10.55	10/01/22	09/30/23	9,413	28,238	37,651
FFY23 USDA WIC PROG MGMT CSS	76101242	10.557	333.10.55	01/01/23	09/30/23	0	2,800	2,800
FFY24 USDA WIC CLIENT SVS CONTRACTS	TBD	10.557	333.10.55	10/01/23	12/31/23	0	25,238	25,238
						0	0	0
TOTALS						**163,444**	**131,989**	**295,433**

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	**WIC Nutrition Program**			See "Billing Requirements" below.
1.1	Maintain authorized participating caseload at 100% based on quarterly average as determined from monthly caseload management reports generated at state WIC office. The Department of Health (Department) State WIC Nutrition Program has the option of reducing authorized participating caseload and corresponding funding when: 1. Unanticipated funding situations occur.	Outcomes based on monthly participation data from state WIC caseload management reports.	**Authorized participating caseload for January 2022 through December 2024 = 250**	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	2. Reallocations are necessary to redistribute caseload statewide. 3. Caseload declines.		***Revised authorized participating caseload for January 2023 through December 2024 = 265***	
1.2	Submit the annual Nutrition Services Plan for each year of the contract.	Nutrition Services Plan	First year due 9/30/22 Second year due 9/30/23	Payment withheld if not received by due date.
1.3	Submit the annual Nutrition Services Expenditure Report for each year of the contract.	Nutrition Services Expenditure Report	11/30/22 11/30/23	Payment withheld if not received by due date.
1.4	Tell participants about other health services in the agency. If needed, develop written agreements with other health care agencies and refer participants to these services.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.5	Provide nutrition education services to participants and caregivers in accordance with federal and state requirements.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.6	Issue WIC benefits while assuring adequate WIC card security and reconciliation.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.7	Collect data, maintain records, and submit reports to effectively enforce the non-discrimination laws (Refer to Civil Rights Assurances below).	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.8a	Submit entire WIC and Breastfeeding Peer Counseling Budget Workbook for each year of the contract	Budget Workbook	First year due 9/30/22 Second year due 9/30/23	
1.8b	Submit Rev-Exp Report spreadsheet from the WIC Budget Workbook monthly with A-19	Revenue and Expense Report and A-19	First year due monthly through December 31, 2022 Second year due monthly through December 31, 2023	
2	**Breastfeeding Promotion**			See "Billing Requirements" below.
2.1	Provide breastfeeding promotion activities in accordance with federal and state requirements.	Status report of chosen activities in Nutrition Services Plan. Documentation must be available for review by WIC monitor staff.	First year due 11/30/22 Second year due 11/30/23 Biennial WIC Monitor	
2.2	Work with community partners to improve practices that affect breastfeeding. Choose one or more of the following projects: ▪ Provide staff, health care providers and community partners virtual breastfeeding training resources. ▪ Work with employers who likely employ low-income people to create worksite environments that support breastfeeding.	Status report of chosen activities in Nutrition Services Plan. Documentation must be available for review by WIC monitor staff.	First year due 8/30/22 Second year due 8/30/23 Biennial WIC Monitor	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	▪ Work with birthing hospitals to improve maternity care practices that affect WIC participant breastfeeding rates. ▪ Provide participants access to lactation consultants. Other projects will need pre-approval from the State WIC Office			
3	**Breastfeeding Peer Counseling Program (BFPC)**			See "Billing Requirements" below.
3.1	Provide Breastfeeding Peer Counseling Program activities in accordance with federal and state requirements. The WIC Breastfeeding Peer Counseling Program is meant to enhance, not replace, WIC Breastfeeding promotion and support activities.	Breastfeeding Peer Counseling Annual Report and expenditures from the previous federal fiscal year. Documentation must be available for review by WIC monitor staff.	First year due 12/31/22 Second year due 12/31/23 Biennial WIC Monitor	
3.2	Track Breastfeeding Peer Counseling Program expenditures and bill separately from the WIC grant.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
4	**Farmers Market Nutrition Program (FMNP)**			See "Billing Requirements" below.
4.1	Distribute all Farmers Market Nutrition Program checks to eligible WIC participants between June and September 30 of current year.	Send completed readable copy of FMNP check registers to State WIC office on a weekly basis following FMNP procedures. Documentation must be available for review by WIC monitor staff.	Weekly June-Sept. 2022 and June-Sept. 2023 All sent by Oct. 1, 2022 and by Oct. 1, 2023 Biennial WIC Monitor	

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

Program Manual, Handbook, Policy References:
The LHJ shall be responsible for providing services according to rules, regulations and other information contained in the following:

- WIC Federal Regulations, USDA, and FNS 7CFR Part 246.
- Washington State WIC Nutrition Program Policy and Procedure Manual

- Office of Management and Budget, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, 2 CFR 200
- Farmers Market Nutrition Program Federal Regulations, USDA, FNS 7CFR Part 248
- Other directives issued during the term of the contract

Staffing Requirements:
The LHJ shall:

- Use Competent Professional Authority staff, as defined by WIC policy, to determine participant eligibility, prescribe an appropriate food package and offer nutrition education based on the participants' needs.
- Use a Registered Dietitian (RD) or other qualified nutritionist to provide nutrition services to high risk participants, to include development of a high-risk care plan. The RD is also responsible for quality assurance of WIC nutrition services. See WIC Policy for qualifications for a Registered Dietitian and other qualified nutritionist.
- Assign a qualified person to be the Breastfeeding Coordinator to organize and direct local agency efforts to meet federal and state policies regarding breastfeeding promotion and support. The Breastfeeding Coordinator must be an International Board-Certified Lactation Consultant or attend an intensive lactation management course, or other state approved training.

Restrictions on Funds:
The LHJ shall follow the instructions found in the Policy and Procedure Manual under WIC Allowable Costs and 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

Special References:
What is the WIC program?

1. The WIC program in the state of Washington is administered by the Department of Health.
2. The WIC program is a federally funded program established in 1972 by an amendment to the Child Nutrition Act of 1966. The purpose of the program is to provide nutrition and health assessment; nutrition education; nutritious food; breastfeeding counseling; and referral services to pregnant, breastfeeding, and postpartum women, infants, and young children in specific risk categories.
3. Federal regulations governing the WIC program (7 CFR Part 246) require implementation of standards and procedures to guide the state's administration of the WIC program. These regulations define the rights, responsibilities, and legal procedures of WIC employees, participants, persons acting on behalf of a participant, and retailers. They are designed to promote:
   a. High quality nutrition services;
   b. Consistent application of policies and procedures for eligibility determination;
   c. Consistent application of policies and procedures for food benefit issuance and delivery; and
   d. WIC program compliance.
4. The WIC program implements policies and procedures stated in program manuals, handbooks, contracts, forms, and other program documents approved by the USDA Food and Nutrition Service.
5. The WIC program may impose sanctions against WIC participants for not following WIC program rules stated on the WIC rights and responsibilities.
6. The WIC program may impose monetary penalties against persons who misuse WIC benefits or WIC food but who are not WIC participants.

Monitoring Visits:
Program and fiscal monitoring are done on a biennial (every two years) basis and are conducted onsite.
The LHJ must maintain on file and have available for review, audit and evaluation:

- All criteria used for certification, including information on income, nutrition risk eligibility and referrals
- Program requirements
- Nutrition education
- All financial records

Assurances/Certifications:

1. **Computer Equipment Loaned by the Department of Health WIC Nutrition Program**

In order to perform WIC program activities, the Department requires computer equipment, such as computers, signature pads, document scanners, card readers and printers to be in local WIC clinics or to be transported to mobile clinics. This equipment ("Loaned Equipment") is owned by the Department and loaned to the local agency (Contractor). The Loaned Equipment is supported by the Department. This equipment shall be used for WIC business only or according to WIC Policy and Procedures.

An inventory of Loaned Equipment is kept by the Department. Each time Loaned Equipment is changed, the parties shall complete the Equipment Transfer Form and the Department updates the inventory. A copy of the Transfer Form will be provided to the contractor. Copies of the updated inventory list may be requested at any time.

The LHJ agrees to:

a. Defend, protect and hold harmless the Department or any of its employees from any claims, suits or actions arising from the use of this Loaned Equipment.
b. Assume responsibility for any loss or damage from abnormal wear or use, or from inappropriate storage or transportation. The Department may enforce this by:
   1) Requiring reimbursement from the LHJ of the value of the Loaned Equipment at the time of the loss or damage.
   2) Requiring the LHJ to replace the Loaned Equipment with equipment of the same type, manufacturer, and capabilities (as pre-approved by the Department), or
   3) Assertion of a lien against the Contractor's property.
c. Notify the Department immediately of any damage to Loaned Equipment.
d. Notify the Department prior to moving or replacing any Loaned Equipment.

The Department recommends Contractors carry insurance against possible loss or theft.

2. **Civil Rights Assurance**

a. The LHJ shall perform all services and duties necessary to comply with federal law in accordance with the following Civil Rights Assurance.
b. "The Program applicant hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.); all provisions required by the implementing regulations of the Department of Agriculture; Department of Justice Enforcement Guidelines, 28 CFR 50.3 and 42; and FNS directives and guidelines, to the effect that, no person shall, on the ground of race, color, national origin, sex, age or handicap, be excluded from participation in, be denied benefits of, or otherwise be subject to discrimination under any program or activity for which the Program applicant receives Federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.
c. "By accepting this assurance, the Program applicant agrees to compile data, maintain records and submit reports as required, to permit effective enforcement of the nondiscrimination laws and permit authorized USDA personnel during normal working hours to review such records, books and accounts as needed to ascertain compliance with the nondiscrimination laws. If there are any violations of this assurance, the Department of Agriculture, Food and Nutrition Service, shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the Program applicant, its successors, transferees, and assignees, as long as it receives assistance or retains possession of any assistance from the Department. The person or persons whose signatures appear on the contract are authorized to sign this assurance on behalf of the Program applicant."

3. **2CFR 200**

The LHJ shall comply with all the fiscal and operations requirements prescribed by the state agency as directed by Federal WIC Regulations (7CFR part 246.6), 2CFR part 200, the debarment and suspension requirements of 2CFR part 200.213, if applicable, the lobbying restrictions of 2CFR part 200.245, and FNS guidelines and instructions and shall provide on a timely basis to the state agency all required information regarding fiscal and program information.

Billing Requirements:

1. Definitions

Contract Period: January 1, 2022 - December 31, 2024

Contract Budget Period: The time period for which the funding is budgeted.

- There are four federal budget periods

  January 1, 2022 through September 30, 2022;
  October 1, 2022 through September 30, 2023;

October 1, 2023 through September 30, 2024;
October 1, 2024 through December 31, 2024.

2. Billing Information:
   a. Billings are submitted on an A-19-1A invoice. These invoices are provided by the Department in the WIC Budget Workbook and include accounting codes for different budget categories.
   b. A-19s are submitted monthly and must be received by the Department within 60 days following the close of each calendar month. Additional A-19s may be submitted at any time, but must be received within 90 days of the close of the federal budget period.
   c. Funds are allocated by budget categories and by federal budget periods (refer to the budget spreadsheet).
   d. Funds are encumbered or spent only during the budget period; no carry forward from previous time periods or borrowing from future time periods is allowed.
   e. Payments are limited to the amounts allocated for the budget period for each budget category.
   f. Billings are based on actual costs for completed activities. Advance payments are not allowed. Back up documentation must be retained by the LHJ and available for inspection by the Department or other appropriate authorities.
   g. Payments will be made only for WIC approved expenditures. Refer to the Washington State WIC Nutrition Program Policy and Procedure Manual Volume 2, Chapter 4 – Allowable Costs and 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.
   h. If billing for indirect costs, a Cost Allocation Plan or Federal Indirect Cost Agreement must be submitted prior to payment.

Special Instructions:
The LHJ shall:
1. Maintain complete, accurate, and current accounting of all local, state, and federal program funds received and expended.
2. Provide, as necessary, a single audit in accordance with the provisions of 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. This circular requires all recipients and sub-recipients of federal funds to have a single audit performed should they spend $750,000 or more of federal grants or awards from all sources. Contractors spending less than $750,000 in federal grants or awards may also be subject to audit.
3. Use Breastfeeding Peer Counseling (BFPC) Program funds only to support the peer counseling program. Once the program is established and peer counselors are trained, the majority of the salary costs must be paid to peer counselors to provide direct services to WIC participants. For a list of allowable costs see Volume 2, Chapter 4 – Allowable Costs. The priority use of BFPC funds is to hire and train peer counselors to provide breastfeeding peer counseling services to WIC participants.

SPECIAL REQUIREMENTS			
Contract Funding Period	**Time Period special requirement funds are available**	**Amount**	**Special Requirement Description**
January 2022 to September 2024	January 2022 to September 2022	$2,800	Added in the USDA WIC Client Services Contracts category to cover training and travel expenses for all local WIC staff to participate in WIC-related trainings.
January 2023 - September 2023	*January 2023 - September 2023*	*$2,800*	*This funding is for all WIC staff to participate in WIC-related training. Added in the USDA WIC Client Services Contracts category to cover training registrations, travel expenses, staff time to participate in training (salary/benefits or contractor), and other approved WIC training expenses.*

Other:
Any program requirements that are not followed may be subject to corrective action and may result in monetary fines or repayment of funds.