Call to Order: Welcome to this Regular Session of the Island County Board of Health.

Additions or Changes to the Agenda:

Approval of the Minutes: January 16th, 2018 Regular Session
   January 16th, 2018 Special Session
Attachment: Draft Minutes

Public Input /Comments: The Board values the public’s input. This time is set aside to hear from the public on subjects of a health related nature, not on the scheduled agenda. All information given is taken under advisement. Unless emergent in nature no action is taken. To ensure proper recording of comments, state your name and address clearly into the microphone. Limit your comment to three minutes. The Board may entertain public comment on specific agenda items when discussed.

Presentations: None

Contracts: Keith Higman, Public Health Director will present one item as follows:

1. WA State Department of Health: 2018-2020 Consolidated - Contract No. CLH18246
   Attachment: 2018-2020 Consolidated Contract No. CLH18246
2. ABC Dental Services Island County Amendment No: 03
   Attachment: HCA Contract Number: K761: Amendment Number 03

Legislative Update: None

Report from Public Health:
Keith Higman/Brad Thomas

Board Announcements:

Adjourn: The next Regular Session of the Island County Board of Health will be held at 1:00pm on March 20th at 1:00pm in the Commissioners’ Hearing Room (B-102) in the Coupeville Annex Building.
Members Present: Commissioner Richard M. Hannold, Chair; Commissioner Helen Price Johnson; Commissioner Jill Johnson; Capt. Martha Cutshall (Ex-officio member); Whidbey Health Commissioner Kurt Blankenship; and Dr. Brad Thomas, Executive Secretary to the Board.

Members Absent: Dr. Grethe Cammermeyer (excused). Mayor Bob Severns (excused)

Call to Order: Commissioner Richard M. Hannold, Chair, called to order this Regular Session of the Island County Board of Health at 1:07 p.m.

Additions or Changes to the Agenda: None. Commissioner Helen Price Johnson moved to approve the Agenda as presented; Kurt Blankenship seconded the motion. Agenda approved unanimously as presented.

Approval of Minutes: Commissioner Helen Price Johnson moved to approve the meeting minutes of December 19th, 2017 as presented. Commissioner Jill Johnson seconded the motion. Minutes December 19th, 2017 approved unanimously as presented.

Public Input or Comment: None.

Presentations:
1. Laura Luginbill presented the Community Health Improvement Plan and the final booklet for distribution. There will be release events in Coupeville and Camano to share the final product with community members who helped in the assessment and planning as well as the community at large. The plan was well received by the board and they would like continued feedback as the process continues.

Contracts: Keith Higman, Health Services Director, presented one contract as follows:

Commissioner Helen Price Johnson moved to approve Contract# 132429_G003813 as presented. Commissioner Jill Johnson seconded the motion. Contract #: 132429_G003813 approved unanimously

Legislative Update: None.

Report from Public Health:

Keith Higman, Health Services Director

1. The Washington State Health Assessment is nearly done and identified similar priorities to the Island County Community Health Improvement Plan with additional areas of concern being: tobacco, drug and alcohol use, child immunizations, and diabetes.

2. Washington State Association of Local Public Health Officials (WSALPHO) … foundational public health, passing the capital budget, opioid epidemic, maintaining authority at the local level to enforce local public health codes and rules, raise age to purchase tobacco to 21, legislative pushback on the food code, updated legislation for Onsite Sewage Systems and ultimately fiscal sustainability for county operations.
3. Washington State Association of Counties released their Bill Watch focusing on bills related to: the development of a medication take-back program, on-site sewage systems, hazardous substance tax, water availability and the Hirst decision. Local partners interested in medication take-back will await the state decision before implementing county programs.

4. Review and discussion of requests from the Freeland Water and Sewer Commissioners. In follow up to the presentation from Commissioner Eric Hansen at the December board meeting there will be subsequent conversations with district commissioners and Public Health.

Brad Thomas, MD, Health Officer

1. Island County is currently NOT experiencing a huge influenza burden, unlike some surrounding counties.
2. There is a state wide discussion about the Prescription Monitoring Program (for monitoring dispensing practices of drugs of abuse).

Board Announcement/Comments:

1. Commissioner Jill Johnson brought up two topics she would like to see discussed at future Board of Health meetings: 1. Opioid use reduction and the role of the board locally; 2. Code Enforcement Policy setting through the Board of Health

Adjourn: There being no further business before the Island County Board of Health, meeting adjourned at 1:57 p.m.

The next Regular Session of the Island County Board of Health will be held Tuesday, February 20th at 1:00 pm in the Commissioners’ Hearing Room (B-102) in the Coupeville Annex Building.

Submitted: _____________________________  Minutes approved this _____ day of ______ 2018

Brad Thomas, MD

ISLAND COUNTY BOARD OF HEALTH

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Richard M. Hannold, Chair
This is a special session of the Island County Board of Health to celebrate the release of the Community Health Improvement Plan.

**Members Present:** Commissioner Helen Price-Johnson, Commissioner Richard Hannold, Commissioner Jill Johnson

5:15 p.m. **Call to Order and Welcome:** Commissioner Richard M. Hannold called the Board of Health Meeting to order by welcoming all the guests and thanking participants for their hard work.

5:20 p.m. **Presentation:** Laura Luginbill, Assessment and Healthy Communities Director, presented the final Community Health Improvement Plan and the process by which it was created. She gave special thanks and acknowledgement to all members of the community who participated and particularly the members of CHAB, Community Health Advisory Board, for their many hours of effort and commitment.

Commissioner Helen Price Johnson, 2017 Chair of the Board of Health during this process, celebrated this plan as an opportunity to help guide interventions for healthier, more productive lives for our community members.

A summary of each of the four priority areas was presented by: Heidi Saunders, Access to Health Care; Joanne Pelant, Housing; Ryan O’Donnell, Depression and Suicide; and Cynde Robinson, Interpersonal Abuse.

6:25 p.m. **Adjourn:** Commissioner Richard M. Hannold adjourned the meeting at the end of the event.

Submitted:                                             Minutes approved this ____ day of ____ 2018

Brad Thomas, MD

ISLAND COUNTY BOARD OF HEALTH

______________________________
Richard M. Hannold, Chair
2018 - 2020

WASHINGTON STATE
DEPARTMENT OF HEALTH

CONSOLIDATED CONTRACT
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CONSOLIDATED CONTRACT
between
STATE OF WASHINGTON
DEPARTMENT OF HEALTH
(Referred to as “DOH”)
and
ISLAND COUNTY PUBLIC HEALTH DEPARTMENT
(Referred to as “LHJ”)
for
THE DELIVERY OF PUBLIC HEALTH SERVICES
FOR THE PERIOD OF
January 1, 2018 through December 31, 2020

1. Purpose
This Contract is entered into in accordance with RCW 43.70.520, RCW 43.70.580, the general statutory powers of the Secretary of the Department of Health (DOH), including at RCW 43.70.040, the general statutory powers of local health jurisdictions (LHJs), including at RCW 70.05.060, RCW 70.08.020, and RCW 70.46.060, and the authority for joint or cooperative action provided for under chapter 39.34 RCW. The purpose of this Contract is to define the parties’ joint and cooperative relationship. The contract and all statements of work adopted under its provisions are intended to implement applicable objectives under the Public Health Improvement Plan and to facilitate the delivery of public health services to the people in Washington State. This Contract is the result of cooperative planning efforts between the LHJ and DOH.

2. Statements of Work
The individual program activities, requirements, and outcomes/deliverables to be achieved by the parties under this Contract are described in Exhibit A, Statements of Work. Each statement of work shall comply with the performance-based criteria under RCW 43.70.580(2)(b).

The LHJ shall furnish the necessary personnel, equipment, material and/or services and otherwise do all things necessary for or incidental to the performance of the work as set forth in Exhibit A, Statements of Work.

3. Exhibits
This Contract incorporates by reference the following Exhibits:
- Exhibit A - Statements of Work
- Exhibit B - Allocations
- Exhibit C - Schedule of Federal Awards

4. Definitions
As used throughout this Contract and unless amended for a particular Statement of Work, the following terms shall have the meanings set forth below:

“Budget, Accounting, and Reporting System (BARS)”: The system designed by the State Auditor's office for collecting, consolidating, and reporting financial budgeting and accounting information from all local governmental units.

“Client”: An agency, firm, organization, individual or other entity applying for or receiving services provided by the LHJ under this Contract.

“Catalog of Federal Domestic Assistance (CFDA)”: The unique identifying code assigned to a federal assistance program which identifies the awarding agency.

“Confidential Information”: Information protected from disclosure under federal or state law.
“Contract Coordinator”: Each party’s designated contact for all notices required or permitted under this Contract.

“Contracting Officer”: The DOH Contracts and Procurement Office Director and his/her delegates within that office authorized to execute this agreement on behalf of DOH.

“Contractor”: An entity that provides goods or services to DOH and others. A contractor normally operates its business in a competitive environment, provides its goods and/or services to many different purchasers during normal business hours, and is not subject to the compliance requirements of the federal program.

“Equipment”: When used in this Contract is defined as an article of non-expendable, tangible property other than land, buildings, or fixtures which is used in operations and having a useful life of more than one year and an acquisition cost of $5,000 or more or as otherwise provided in the Exhibit A, Statements of Work.

“Federal Assistance”: Assistance provided by a federal agency in the form of grants, contracts, loans, loan guarantees, property, cooperative agreements, interest subsidies, insurance, or direct appropriations, but does not include direct federal cash assistance to individuals.

“Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act)”: A federal act to make information available online so the public can see how federal funds are spent.

“Fixed Assets”: Fixed assets are property and/or equipment obtained through donation, gift, purchase, capital lease, or construction with a service life of more than one year.

“Program Contact”: Each party’s designated contact for those purposes identified in the Exhibit A, Statements of Work.

“Subcontractor”: Any individual or group contracted with the LHJ to perform all or part of the services included in this Contract. This term will also apply to situations where an LHJ’s subcontractor contracts with another individual or group to perform all or part of the services included in its agreement with the LHJ.

“Subrecipient” or “Subgrantee”: A non-federal entity that receives a subaward of federal grant money or goods directly or indirectly from DOH and makes decisions regarding who can receive what federal assistance; has its performance measured against the objectives contained in the DOH agreement with the federal government; makes decisions on how to operate the program to accomplish the program goals; has the obligation to comply with federal subrecipient requirements; and/or use federal funds to carry out a program for the public purpose specified in the authorizing statute.

5. **Funding and Billing**

A. DOH shall pay the LHJ for services as set forth in the Exhibit A, Statements of Work, not to exceed funding amounts as detailed in the Contract Allocations, Exhibit B, for those services provided herein.

The LHJ will advise the Program Contact identified in the applicable Statement of Work in writing 90 calendar days prior to the end of the funded period, or as soon as practicable thereafter, if the LHJ anticipates not using all Contract funding.

B. If the Exhibit A, Statement of Work, is supported by federal funds that require compliance with FFATA (the Transparency Act), the corresponding checkbox on the statement of work will be checked.

C. Total consideration for this Contract is **$823,637**, or as amended.

The LHJ will submit accurate and timely billings which, for clarity and consistency, will be prepared using the form provided and following the instructions located on the DOH website, www.doh.wa.gov. 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.
D. The LHJ will submit a BARS A financial report by April 15 for the prior calendar year.

6. Contract Management
   Unless otherwise specified in the Contract, the following individuals are the contacts (“Contract Coordinators”) for all notices required or permitted under this Contract:

<table>
<thead>
<tr>
<th>LHJ Contract Coordinator:</th>
<th>DOH Contract Coordinator:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: Amber Jones</td>
<td>Name: Brenda Henrikson</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>Mailing Address:</td>
</tr>
<tr>
<td>PO Box 5000, Coupeville WA 98239-5000</td>
<td>PO Box 47905, Olympia WA 98504-7905</td>
</tr>
<tr>
<td>Physical Address:</td>
<td>Physical Address:</td>
</tr>
<tr>
<td>1 NE 6th Street, Coupeville WA 98239</td>
<td>101 Israel Rd. SE, Tumwater WA 98501-5570</td>
</tr>
<tr>
<td>Phone: 360-679-7350 Fax: 360-679-7390</td>
<td>Phone: 360-236-3933 Fax: 360-236-2401</td>
</tr>
<tr>
<td>Email Address:</td>
<td>Email Address:</td>
</tr>
<tr>
<td><a href="mailto:a.jones@co.island.wa.us">a.jones@co.island.wa.us</a></td>
<td><a href="mailto:brenda.henrikson@doh.wa.gov">brenda.henrikson@doh.wa.gov</a></td>
</tr>
</tbody>
</table>

A party may change its Contract Coordinator or its Program Contact by providing written notice to the other party. DOH Program Contacts can be found in the Exhibit A, Statements of Work, and on the DOH website at www.doh.wa.gov.

7. Access to Records
   To the extent authorized by applicable federal and state law, the parties shall provide access to records relevant to this Contract to each other, the Joint Legislative Audit and Review Committee, the State Auditor, and authorized federal officials, at no additional cost. Inspections shall occur at reasonable times and upon reasonable notice.

8. All Writings Contained Herein
   This Contract contains all the terms and conditions agreed upon by the parties. No other understandings, oral or otherwise, regarding the subject matter of this Contract shall be deemed to exist or to bind any of the parties hereto. The individuals signing this Contract certify by their signatures that they are authorized to sign this Contract on behalf of their respective entity.

9. Assignment
   Except for subcontracting as authorized in this Contract, the LHJ shall not assign or delegate, in whole or in part, this Contract or any of its rights, duties, obligations, or responsibilities, without the prior written consent of DOH’s Contracting Officer, which consent shall not be unreasonably withheld.

10. Assurances
    The parties agree that all activity pursuant to this Contract shall be in accordance with all applicable current federal, state and local laws, rules, and regulations.

    The LHJ acknowledges its agreement to comply with federal certifications and assurances by signing and returning the following:
    1. Standard Federal Certifications and Assurances
    2. Federal Assurances for Non-Construction Programs
11. Confidential Information

The parties agree to comply with all state and federal statutes and regulations relating to Confidential Information. DOH and LHJ will limit access to the Confidential Information to the fewest number of people necessary to complete the work. Everyone having access to Confidential Information covered by this Contract must agree to protect the confidentiality of the information.

Either party to this Contract may designate certain Confidential Information as “Confidential Information/Notice Requested.” The designation shall be made by clearly stamping, watermarking, or otherwise marking each page of the Confidential Information. If a third party requestor seeks information that has been marked “Confidential Information/Notice Requested,” notice shall be given to the marking party prior to release of the information. Such notice shall be provided to the program contact no less than five (5) business days prior to the date of disclosure, to allow the party objecting to disclosure to seek a protective order from the proper tribunal.

DOH and LHJ agree to establish, document and maintain security practices and safeguards consistent with state and federal laws, regulations, standards, and guidelines to prevent unauthorized access, use, or disclosure of Confidential Information in any form. In accordance with federal and state contracting requirements, DOH may monitor, audit, or investigate LHJ management of Confidential Information relating to this Contract. Working together, the LHJ and DOH may use any and all tools available to track Contract related Confidential Information.

If one of the parties becomes aware of an actual or suspected breach of confidentiality, that party will promptly notify the Contract Coordinator for the other party of the facts. The parties will work within their respective organizations to take any steps necessary to determine the scope of the breach and to restore reasonable security to the Confidential Information. Both parties agree to mitigate any known harmful effects of a breach in confidentiality, including notifying affected individuals to the extent required by law. The parties will also reasonably cooperate with law enforcement as appropriate.

12. Ethics

Both parties and their officers shall comply with all ethics laws applicable to their activities under this Contract, including Chapters 42.23 and 42.52 RCW. If a violation occurs and is not cured within a reasonable time after notice, the other party shall have the right to terminate this Contract. This section is expressly subject to the Disputes section of this Contract.

13. Debarment Certification

The LHJ, by signing this Contract, certifies that the LHJ is not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participating in this Contract by any federal department or agency. The LHJ also agrees to include the above requirement in all subcontracts into which it enters. The LHJ will notify DOH of any such events that may occur during the term of the Contract.

14. Disputes

Except as otherwise provided in this contract, when a dispute arises between the parties and it cannot be resolved by direct negotiation, the parties agree to participate in good faith in non-binding mediation. The mediator shall be chosen by agreement of the parties. If the parties cannot agree on a mediator, the parties shall use a mediation service located in Washington State that selects a qualified mediator for the parties. Each party shall bear its own costs for mediation and each party shall contribute equally to the mediator’s fee, if any. The parties agree that mediation shall precede any action in a judicial tribunal.

Nothing in this contract shall be construed to limit the parties’ choice of a mutually acceptable alternate dispute resolution method in addition to the dispute resolution procedure outlined above.

15. Equipment Purchases

Equipment purchased by the LHJ for use by the LHJ or its subcontractors during the term of this Contract using federal funds, in whole or in part, shall be the property of the LHJ. The use, management and disposal of the equipment must comply with federal requirements. These requirements are found in the Office of Management and Budget’s (OMB’s)
16. Governing Law and Venue
The laws of the state of Washington govern this Contract. In the event of a lawsuit by the LHJ against DOH arising under this Contract, venue shall be proper only in Thurston County, Washington. In the event of a lawsuit by DOH against the LHJ arising under this Contract, venue shall be proper only in the county in which the LHJ is located or in either of the two nearest judicial districts within the meaning of RCW 36.01.050.

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

18. Insurance
The LHJ certifies that it is self-insured, is a member of a risk pool, or maintains insurance coverage as required by this Contract. Each party shall pay for losses for which it is found liable. The LHJ agrees to require all subcontractors to maintain insurance in types and with limits as may be determined by the LHJ and/or its risk manager, unless the LHJ and DOH agree otherwise.

19. Licensing, Accreditation and Registration
The LHJ shall comply with all applicable local, state, and federal licensing, accreditation and registration requirements and standards, necessary for the performance of this Contract.

20. Maintenance of Records
Each party to this Contract shall maintain books, records, documents and other evidence that sufficiently and properly reflect all direct and indirect costs expended by it. All books, records, documents, and other material relevant to this Contract will be retained for six (6) years after expiration. If any litigation, claim or audit is started before the expiration of the six-year period, the records shall be retained until all litigation, claims, or audit findings involving the records have been resolved.

Each party will use reasonable security procedures and protections to assure that records and documents provided by the other party are not erroneously disclosed to third parties. Both parties agree to continue protecting records until such time as the information is destroyed in accordance with applicable state and federal records retention laws.

21. Modifications and Waivers
This Contract, or any term or condition, may be modified only by a written amendment signed by the DOH Contracting Officer and the authorized representative for the LHJ. Either party may propose an amendment.

Failure or delay on the part of either party to exercise any right, power, privilege or remedy provided under this Contract shall not constitute a waiver. No provision of this Contract may be waived by either party except in a writing signed by the DOH Contracting Officer or the authorized representative of the LHJ.

22. No Third-Party Rights Created
This Contract, or any program hereunder, is entered into solely for the benefit of the two parties thereto and shall not be construed as giving rise to any right, remedy or expectancy of any kind or nature on the part of any third party.

23. Nondiscrimination
During the performance of this Contract, the LHJ and DOH shall comply with all federal and state nondiscrimination laws, regulations and policies. In the event of the LHJ’s noncompliance or refusal to comply with any nondiscrimination law, regulation or policy, this Contract may be rescinded, canceled or terminated in whole or in part, and the LHJ may be declared
ineligible for further contracts with DOH. The LHJ shall, however, be given a reasonable time in which to cure this noncompliance. Any dispute may be resolved in accordance with the “Disputes” procedure set forth herein.

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

- Applicable state and federal statutes, and local laws, rules and regulations.
- Terms and conditions of this Contract.
- Statements of Work.
- Any other provisions of this Contract, including other materials incorporated by reference.

25. Ownership of Material/Rights in Data
Records and other documents relevant to this Contract, in any medium, furnished by one party to this Contract to the other party, will remain the property of the furnishing party, unless otherwise agreed. Data which is delivered under the Contract shall be transferred to DOH with a nonexclusive, royalty-free, perpetual, irrevocable license to publish, translate, reproduce, modify, deliver, perform, dispose of, and to authorize others to do so; provided that such license shall be limited to the extent which the LHJ has a right to grant such a license. The LHJ shall exert all reasonable effort to advise DOH, at the time of delivery of data furnished under this Contract, of all known or potential invasions of privacy contained therein and of any portion of such document which was not produced in the performance of this Contract. DOH shall receive prompt written notice of each notice or claim or copyright infringement received by the LHJ with respect to any data delivered under this Contract. DOH shall have the right to modify or remove any restrictive markings placed upon the data by the LHJ, provided that if DOH modifies or removes such markings without the LHJ’s approval, it assumes all liability for doing so.

26. Publications
Any program reports, articles, and publications that result from information gathered through use of state and federal funds must acknowledge receiving support from DOH and/or the appropriate federal agencies. Correspondingly, such documents resulting from information gathered through use of local funds must acknowledge receipt of such local support.

27. Responsibility for Actions
Each party to this Contract shall be solely responsible for the acts and omissions of its own officers, employees, and agents in the performance of this Contract. Neither party to this Contract will be responsible for the acts and omissions of entities or individuals not party to this Contract. DOH and the LHJ shall cooperate in the defense of tort lawsuits, when possible.

28. Loss or Reduction of Funding
In the event funding from state, federal, or other sources is withdrawn, reduced, or limited in any way after the effective date of this contract and prior to normal completion, DOH may elect to suspend or terminate the contract, in whole or in part, under the "Termination for Convenience" clause with a ten (10) business day notice to LHJ, to the extent possible, subject to renegotiation at DOH’s discretion under those new funding limitations and conditions.

29. Severability
If any term or condition of this Contract is held invalid, such invalidity shall not affect the validity of the other terms or conditions of this Contract, provided, however, that the remaining terms and conditions can still fairly be given effect.

30. Subcontracts
The LHJ may subcontract any or all of the services or other obligations specified in this Contract. The LHJ will require the subcontractor to comply with all the applicable terms and conditions of this Contract, including all terms, conditions, certifications and assurances. The LHJ agrees it is responsible for assuring adequate performance on the part of the subcontractor.
The parties agree that all subcontractors must be responsible for any liabilities created by their actions or omissions. In the event DOH, LHJ, and subcontractor are found by a jury or trier of fact to be jointly and severally liable for personal injury damages arising from any act or omission, then each entity shall be responsible for its proportionate share.

31. Subrecipient
For those activities designated as “subrecipient” on Exhibit A, Statements of Work, the LHJ must comply with applicable federal requirements, including but not limited to OMB’s Uniform Guidance at 2 CFR 200, Subparts D (Administrative Requirements), E (Cost Principles) and F (Audit Requirements), and program specific federal regulations. If the LHJ expends $500,000 or more in federal awards from all sources, it is responsible for obtaining appropriate audits. If the LHJ expends $750,000 or more in federal grants or awards from all sources, it is responsible for obtaining the required single audit.

32. Survivability
The terms and conditions contained in this Contract, which by their sense and context are intended to survive the expiration of the Contract, shall survive. Surviving terms include, but are not limited to: Access to Records, Confidential Information, Disputes, Responsibility for Actions, Maintenance of Records, Ownership of Material/Rights in Data, Subcontracts, Termination for Convenience, Termination for Default, and Termination Procedure.

33. Term
This Contract will be in effect following execution by the parties from January 1, 2018 through December 31, 2020, unless terminated earlier as provided herein.

34. Termination for Convenience
Except as otherwise provided in this Contract, either party may terminate or suspend this Contract, or any program hereunder, for convenience by providing at least thirty (30) days’ advance written notice to the other party.

If DOH elects to suspend the Contract, in whole or in part, LHJ shall stop work as of the effective date of DOH’s written notice of suspension. During suspension, each Party will reasonably notify the other of any conditions that may affect resumption of performance. Upon DOH’s written notice to resume performance, LHJ shall resume work unless the LHJ provides notice to DOH that services cannot be resumed. If LHJ cannot resume performance, the Contract or affected Exhibit A, Statement of Work, will be deemed terminated upon the date the LHJ received notice to suspend performance.

35. Termination for Default
(a) In the event of a default by either party under this Contract, the nondefaulting party may give written notice to the defaulting party that it intends to terminate this Contract, or any program hereunder, if the default is not cured within thirty (30) days of the date of the notice, or such longer period of time as may be reasonable under the circumstances. If the default is not cured within that time, the nondefaulting party may then notify the defaulting party in writing that this Contract is terminated. In the event of such termination, the nondefaulting party shall have all rights and remedies available to it under general law.

(b) A disputed termination for default is expressly subject to the Disputes section of this Contract.

36. Termination Procedure
Upon termination DOH may require the LHJ to deliver to DOH any non-LHJ-owned equipment, data, or other property specifically produced or acquired for the performance of such part of this Contract as has been terminated.

DOH shall pay to the LHJ the agreed upon price, if separately stated, for completed work and services accepted by DOH. In addition DOH shall pay the amount determined by DOH’s Contracting Officer for (a) completed work and services for which no separate price is stated, (b) partially completed work and services, (c) other property or services which are accepted by DOH, and (d) the protection and preservation of the property. Disagreement by the LHJ with the determination of DOH’s Contracting Officer that relates to the obligations or amounts due to the LHJ shall be considered a dispute within the meaning of the “Disputes” clause of this Contract.
DOH may withhold from any amounts due the LHJ for such completed work or services such sum as DOH’s Contracting Officer reasonably determines to be necessary to protect DOH against potential loss or liability. The rights and remedies of DOH provided in this section shall not be exclusive and are in addition to any other rights and remedies provided by law or under this Contract.

After receipt of a written notice of termination, the LHJ shall:

- Stop work under the Contract on the date and to the extent specified in the notice;
- Place no further orders or subcontracts for materials, services, or facilities, except as necessary to complete such portion of the work not terminated;
- Assign to DOH, to the extent reasonably directed by DOH’s Contracting Officer and to the extent that the LHJ has the legal right to do so, all of the right, title, and interest of the LHJ under the orders and subcontracts in which case DOH has the right, at its reasonable discretion, to settle or pay any or all claims arising out of the termination of such orders and subcontracts.
- Settle all outstanding liabilities and all claims arising out of orders or subcontracts, with the approval or ratification of DOH’s Contracting Officer to the extent he/she may reasonably require, which approval or ratification shall be final for all the purposes of this clause;
- Transfer title to DOH and deliver, as reasonably directed by DOH’s Contracting Officer, any property which, if the Contract had been completed, would have been required to be furnished to DOH;
- Complete performance of such part of the work not terminated by DOH’s Contracting Officer; and,
- Take such action as may be necessary, or as DOH’s Contracting Officer may reasonably direct, for the protection and preservation of the property related to this Contract which is in the possession of the LHJ, or its subcontractors, and in which DOH has or may acquire an interest.

IN WITNESS WHEREOF, the parties have executed this Contract

ISLAND COUNTY BOARD OF
COUNTY COMMISSIONERS

____________________________________________
Chair
Board of Island County Commissioners

____________________________________________
Print Name

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

____________________________________________
Signature

____________________________________________
Date

Print Name

Title

IN ISLAND COUNTY BOARD OF
HEALTH

____________________________________________
Chair
Board of Health

____________________________________________
Print Name

Title

2018-2020 Consolidated Contract
Standard Federal Certifications and Assurances

Following are the Assurances, Certifications, and Special Conditions that apply to all federally-funded (in whole or in part) agreements administered by the Washington State Department of Health.

CERTIFICATIONS

1. CERTIFICATION REGARDING DEBARMENT AND SUSPENSION

The undersigned (authorized official signing for the contracting organization) certifies to the best of his or her knowledge and belief, that the contractor, defined as the primary participant in accordance with 45 CFR Part 76, and its principals:

A. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or agency;

   Have not within a 3-year period preceding this contract been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

B. Are not presently indicted or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (b) of this certification; and

C. Have not within a 3-year period preceding this contract had one or more public transactions (Federal, State, or local) terminated for cause or default.

Should the contractor not be able to provide this certification, an explanation as to why should be placed after the assurances page in the contract.

The contractor agrees by signing this contract that it will include, without modification, the clause titled Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion—Lower Tier Covered Transactions in all lower tier covered transactions (i.e., transactions with sub-grantees and/or contractors) and in all solicitations for lower tier covered transactions in accordance with 45 CFR Part 76.

2. CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The undersigned (authorized official signing for the contracting organization) certifies that the contractor will, or will continue to, provide a drug-free workplace in accordance with 45 CFR Part 76 by:

A. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee’s workplace and specifying the actions that will be taken against employees for violation of such prohibition;

B. Establishing an ongoing drug-free awareness program to inform employees about:

   1) The Dangers of drug abuse in the workplace;
   2) The contractor’s policy of maintaining a drug-free workplace;
   3) Any available drug counseling, rehabilitation, and employee assistance programs; and
   4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

C. Making it a requirement that each employee to be engaged in the performance of the contract be given a copy of the statement required by paragraph 1) above;
D. Notifying the employee in the statement required by paragraph 1), above, that, as a condition of employment under the contract, the employee will:

1) Abide by the terms of the statement; and

2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

E. Notifying the agency in writing within ten calendar days after receiving notice under paragraph D. 2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every contract officer or other designee on whose contract activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

F. Taking one of the following actions, within 30 calendar days of receiving notice under paragraph D. 2) with respect to any employee who is so convicted:

1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

G. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (A), (B), (C), (D), (E), and (F).

For purposes of paragraph (E) regarding agency notification of criminal drug convictions, DOH has designated the following central point for receipt of such notices:

Compliance and Internal Control Officer
Office of Grants Management
WA State Department of Health
PO Box 47905
Olympia, WA 98504-7905

3. CERTIFICATION REGARDING LOBBYING

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (nonappropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING $100,000 in total costs (45 CFR Part 93).

The undersigned (authorized official signing for the contracting organization) certifies, to the best of his or her knowledge and belief, that:

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

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

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

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

4. CERTIFICATION REGARDING PROGRAM FRAUD CIVIL REMEDIES ACT (PFCRA)

The undersigned (authorized official signing for the contracting organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the contracting organization will comply with the Public Health Service terms and conditions of award if a contract is awarded.

5. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children’s services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children’s services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to $1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the contracting organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The contracting organization agrees that it will require that the language of this certification be included in any subcontracts which contain provisions for children’s services and that all subrecipients shall certify accordingly.

The Public Health Services strongly encourages all recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

6. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS - INSTRUCTIONS FOR CERTIFICATION

By signing and submitting this proposal, the prospective contractor is providing the certification set out below.

A. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective contractor shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective contractor to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
B. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective contractor knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause of default.

C. The prospective contractor shall provide immediate written notice to the department or agency to whom this contract is submitted if at any time the prospective contractor learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

D. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the person to whom this contract is submitted for assistance in obtaining a copy of those regulations.

E. The prospective contractor agrees by submitting this contract that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by DOH.

F. The prospective contractor further agrees by submitting this contract that it will include the clause titled Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion -- Lower Tier Covered Transaction, provided by HHS, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

G. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List (of excluded parties).

H. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

I. Except for transactions authorized under paragraph 6. of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, DOH may terminate this transaction for cause or default.

7. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS - PRIMARY COVERED TRANSACTIONS

A. The prospective contractor certifies to the best of its knowledge and belief, that it and its principals:

1) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;

2) Have not within a three-year period preceding this contract been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

3) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph 1. B. of this certification; and

4) Have not within a three-year period preceding this contract had one or more public transactions (Federal, State or local) terminated for cause or default.
B. Where the prospective contractor is unable to certify to any of the statements in this certification, such prospective contractor shall attach an explanation to this contract.

**AUTHORIZED SIGNATURE REQUIRED**

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<thead>
<tr>
<th>SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL</th>
<th>TITLE</th>
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<td>PLEASE PRINT OR TYPE NAME:</td>
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<tr>
<td>ORGANIZATION NAME: (if applicable)</td>
<td>DATE</td>
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</table>
Federal Assurances – Non-Construction Programs

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

Note: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the contractor, I certify that the contractor:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management, and completion of the project described in this application.

2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.

3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.

5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).

6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

7. Will comply, or has already complied, with the requirements of Titles II and III of the uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with the provisions of the Hatch Act (5 U.S.C. § 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.


10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.

11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§ 1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. §§ 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).


14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§ 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Uniform Guidance at 2 CFR 200, Subpart F.

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

**AUTHORIZED SIGNATURE REQUIRED**

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<td>DOH Program Name or Title</td>
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<tr>
<td>Maternal &amp; Child Health Block Grant- Effective January 1, 2018</td>
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<td>Office of Drinking Water Group A Program - Effective January 1, 2018</td>
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<td>Office of Drinking Water Group B Program - Effective January 1, 2018</td>
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<tr>
<td>Office of Emergency Preparedness &amp; Response - Effective January 1, 2018</td>
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<tr>
<td>Office of Immunization &amp; Child Profile - Effective January 1, 2018</td>
<td>17</td>
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<tr>
<td>OSS LMP Implementation - Effective January 1, 2018</td>
<td>23</td>
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<tr>
<td>Recreational Shellfish Activities - Effective January 1, 2018</td>
<td>26</td>
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<tr>
<td>WIC Nutrition Program - Effective January 1, 2018</td>
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DOH Program Name or Title: Maternal & Child Health Block Grant - Effective January 1, 2018

Local Health Jurisdiction Name: Island County Public Health Department

Contract Number: CLH18246

Contract Term: 2018-2020

SOW Type: Original

Revision # (for this SOW)

Period of Performance: January 1, 2018 through September 30, 2018

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

Revision Purpose: N/A

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<tr>
<th>Chart of Accounts Program Name or Title</th>
<th>CFDA #</th>
<th>BARS Revenue Code</th>
<th>Master Index Code</th>
<th>Funding Period (LHJ Use Only) Start Date</th>
<th>End Date</th>
<th>Current Consideration</th>
<th>Change Increase (+)</th>
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<th>Task/Activity/Description</th>
<th>*May Support PHAB Standards/Measures</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
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</thead>
<tbody>
<tr>
<td>1a</td>
<td>Participate in calls, at a minimum of every quarter, with DOH contract manager. Dates and time for calls are mutually agreed upon between DOH and LHJ</td>
<td>Designated LHJ staff will participate in contract management calls.</td>
<td>September 30, 2018</td>
<td>Reimbursement for actual costs, not to exceed total funding consideration. Action Plan and Progress Reports must only reflect activities paid for with funds provided in this statement of work for the specified funding period. See Program</td>
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<tr>
<td>1b</td>
<td>Report actual expenditures for October 1, 2017 through March 31, 2018</td>
<td>Submit actual expenditures using the MCHBG Budget Workbook to DOH contract manager</td>
<td>May 26, 2018</td>
<td></td>
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<tr>
<td>1c</td>
<td>Develop 2018-2019 MCHBG Budget Workbook for October 1, 2018 through September 30, 2019 using DOH provided template.</td>
<td>Submit MCHBG Budget Workbook to DOH contract manager</td>
<td>September 5, 2018</td>
<td></td>
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<tr>
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<td><strong>MCHBG Assessment and Evaluation</strong></td>
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<td>2a</td>
<td>Participate in project evaluation activities developed and coordinated by DOH, as requested.</td>
<td></td>
<td>Documentation using report template provided by DOH</td>
<td>September 30, 2018</td>
<td>Reimbursement for actual costs, not to exceed total funding consideration. See Program Specific Requirements and Special Billing Requirements.</td>
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<tr>
<td>2b</td>
<td>Report program level strategy measure data (CSHCN, UDS, ACEs).</td>
<td></td>
<td>Documentation using report template provided by DOH</td>
<td>January 15, 2018, April 15, 2018, July 15, 2018</td>
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<td><strong>MCHBG Implementation</strong></td>
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<td>3a</td>
<td>Develop 2018-2019 MCHBG Action Plan for October 1, 2018 through September 30, 2019 using DOH-provided template.</td>
<td></td>
<td>Submit MCHBG Action Plan to DOH contract manager</td>
<td>Draft August 17, 2018, Final September 5, 2018</td>
<td>Reimbursement for actual costs, not to exceed total funding consideration. Action Plan and Progress Reports must only reflect activities paid for with funds provided in this statement of work for the specified funding period. See Program Specific Requirements and Special Billing Requirements.</td>
</tr>
<tr>
<td>3b</td>
<td>Report activities and outcomes of 2017-2018 MCHBG Action Plan using DOH-provided template.</td>
<td></td>
<td>Submit Action Plan monthly reports to DOH contract manager</td>
<td>Monthly, on or before the 15th of the following month</td>
<td></td>
</tr>
<tr>
<td>Task Number</td>
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<tr>
<td>4a</td>
<td>Complete Child Health Intake Form (CHIF) using the CHIF Automated System on all infants and children served by the CSHCN Program as referenced in CSHCN Program Manual. Ensure client data is collected on all children served by CSHCN contractors, including neurodevelopmental centers, regional maxillofacial coordinators, and the DOH Newborn Screening Program.</td>
<td></td>
<td>Submit CHIF data into Secure File Transport (SFT) website: <a href="https://sft.wa.gov">https://sft.wa.gov</a></td>
<td>January 15, 2018 April 15, 2018 July 15, 2018</td>
<td>Reimbursement for actual costs, not to exceed total funding consideration. Action Plan and Progress Reports must only reflect activities paid for with funds provided in this statement of work for the specified funding period. See Program Specific Requirements and Special Billing Requirements.</td>
</tr>
<tr>
<td>4b</td>
<td>Administer requested DOH Diagnostic and Treatment funds for infants and children per CSHCN Program Manual when funds are used.</td>
<td></td>
<td>Submit completed Health Services Authorization forms and Central Treatment Fund requests directly to the CSHCN Program as needed.</td>
<td>30 days after forms are completed.</td>
<td></td>
</tr>
<tr>
<td>4c</td>
<td>Participate in the CSHCN Regional System and quarterly meetings as described in the CSHCN Program Manual.</td>
<td></td>
<td>Submit Action Plan monthly reports including number of regional meetings attended to the DOH contract manager.</td>
<td>Monthly, on or before the 15th of the following month</td>
<td></td>
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</tbody>
</table>

*For Information Only:*
Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: [http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf](http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf)

**Program Specific Requirements/Narrative**

Special Requirements

**Federal Funding Accountability and Transparency Act (FFATA)**

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

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

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

**Program Manual, Handbook, Policy References**

Restrictions on Funds (what funds can be used for which activities, not direct payments, etc)
1. At least 30% of federal Title V funds must be used for preventive and primary care services for children and at least 30% must be used services for children with special health care needs. [Social Security Law, Sec. 505(a)(3)].
2. Funds may not be used for:
   a. Inpatient services, other than inpatient services for children with special health care needs or high risk pregnant women and infants, and other patient services approved by Health Resources and Services Administration (HRSA).
   b. Cash payments to intended recipients of health services.
   c. The purchase or improvement of land, the purchase, construction, or permanent improvement of any building or other facility, or the purchase of major medical equipment.
   d. Meeting other federal matching funds requirements.
   e. Providing funds for research or training to any entity other than a public or nonprofit private entity.
   f. Payment for any services furnished by a provider or entity who has been excluded under Title XVIII (Medicare), Title XIX (Medicaid), or Title XX (social services block grant). [Social Security Law, Sec 504(b)].
3. If any charges are imposed for the provision of health services using Title V (MCH Block Grant) funds, such charges will be pursuant to a public schedule of charges; will not be imposed with respect to services provided to low income mothers or children; and will be adjusted to reflect the income, resources, and family size of the individual provided the services. [Social Security Law, Sec. 505 (1)(D)].

Monitoring Visits (frequency, type)
Telephone calls with contract manager at least one every quarter, and annual site visit.

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

DOH Program Contact
Kara Seaman
Community Consultant
Office of Family and Community Health Improvement
Washington State Department of Health
Street Address: 310 Israel Rd SE, Tumwater, WA 98501
Mailing Address: PO Box 47848, Olympia, WA 98504
Telephone: 360-236-3963/ Fax: 360-236-3646
Email: kara.seaman@doh.wa.gov
DOH Program Name or Title: Office of Drinking Water Group A Program - Effective January 1, 2018

Local Health Jurisdiction Name: Island County Public Health Department

Contract Number: CLH18246

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: N/A

<table>
<thead>
<tr>
<th>Chart of Accounts Program Name or Title</th>
<th>CFDA #</th>
<th>BARS Revenue Code</th>
<th>Master Index Code</th>
<th>Funding Period (LHJ Use Only)</th>
<th>Current Consideration</th>
<th>Change Increase (+)</th>
<th>Total Consideration</th>
</tr>
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<tbody>
<tr>
<td>Yr 20 SRF - Local Asst (15%) (FS) SS</td>
<td>N/A</td>
<td>346.26,64</td>
<td>24139220</td>
<td>01/01/18</td>
<td>0</td>
<td>24,000</td>
<td>24,000</td>
</tr>
<tr>
<td>Yr 20 SRF - Local Asst (15%) (FS) TA</td>
<td>N/A</td>
<td>346.26,66</td>
<td>24139220</td>
<td>01/01/18</td>
<td>0</td>
<td>2,000</td>
<td>2,000</td>
</tr>
<tr>
<td>TOTALS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0</td>
<td>26,000</td>
<td>26,000</td>
</tr>
</tbody>
</table>

Task Number | Task/Activity/Description | *May Support PHAB Standards/Measures | 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. |   | Provide Final* Sanitary Survey Reports to ODW Regional Office. Complete Sanitary Survey Reports shall include: 1. Cover letter identifying significant deficiencies, significant findings, observations, recommendations, and referrals for further ODW follow-up. 2. Completed Small Water System checklist. 3. Updated Water Facilities Inventory (WFI). 4. Photos of water system with text identifying features | 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 $250 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 $500 for each sanitary survey of a non-community system with four or more connections and each community system. 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. |
<table>
<thead>
<tr>
<th>Task Number</th>
<th>Task/Activity/Description</th>
<th>*May Support PHAB Standards/Measures</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DOH will provide a tablet and GPS unit for the LHJ to gather source data during a routine sanitary survey. DOH expects the LHJ to commit to using the tablet and GPS for a five-year period.</td>
<td></td>
<td>5. Any other supporting documents. *Final Reports reviewed and accepted by the ODW Regional Office. The LHJ surveyor will record at least two (2) GPS data points, for each source, into the preloaded Excel template on the tablet and submit that data file with the associated sanitary survey.</td>
<td></td>
<td>Late or incomplete reports may not be accepted for payment.</td>
</tr>
<tr>
<td>2</td>
<td>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.</td>
<td></td>
<td>Provide completed SPI Report and any supporting documents and photos to ODW Regional Office.</td>
<td>Completed SPI Reports must be received by the ODW Regional Office within 2 working days of the service request.</td>
<td>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.</td>
</tr>
<tr>
<td>3</td>
<td>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.</td>
<td></td>
<td>Provide completed TA Report and any supporting documents and photos to ODW Regional Office.</td>
<td>Completed TA Report must be received by the ODW Regional Office within 30 calendar days of providing technical assistance.</td>
<td>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.</td>
</tr>
<tr>
<td>Task Number</td>
<td>Task/Activity/Description</td>
<td>*May Support PHAB Standards/Measures</td>
<td>Deliverables/Outcomes</td>
<td>Due Date/Time Frame</td>
<td>Payment Information and/or Amount</td>
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<tr>
<td>4</td>
<td>LHJ staff performing the activities under tasks 1, 2 and 3 must have completed the mandatory Sanitary Survey Training. See Special Instructions for task activity.</td>
<td></td>
<td>Prior to attending the training, submit an “Authorization for Travel (Non-Employee)” DOH Form 710-013 to the ODW Program Contact below for approval (to ensure that enough funds are available).</td>
<td>Annually</td>
<td>LHJ shall be paid mileage, per diem, lodging, and registration costs as approved on the pre-authorization form in accordance with the current rates listed on the OFM Website <a href="http://www.ofm.wa.gov/resources/travel.asp">http://www.ofm.wa.gov/resources/travel.asp</a></td>
</tr>
</tbody>
</table>

*For Information Only:*
Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: [http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf](http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf)

**Program Specific Requirements/Narrative**

**Special References (RCWs, WACs, etc)**
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 **$24,000** 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 **Task 1**, submit the list of WS Name, ID #, Amount Billed, Survey Date and Letter Date that 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 the 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 2 surveys of non-community systems with three or fewer connections to be completed between January 1, 2018 and December 31, 2018.
- No more than 47 surveys of non-community systems with four or more connections and all community systems to be completed between January 1, 2018 and December 31, 2018.

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. LHJ staff performing the activities under tasks 1, 2 and 3 must have completed, with a passing score, the ODW Online Sanitary Survey Training and the ODW Sanitary Survey Field Training. LHJ staff performing activities under tasks 1, 2, and 3 must attend the Annual ODW Sanitary Survey Workshop, and are expected to attend the Regional ODW LHJ Drinking Water Meetings.

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.

http://www.doh.wa.gov/Portals/1/Documents/Pubs/331-486.pdf

DOH Program Contact
Brian Boye
DOH Office of Drinking Water
20425 – 72nd Ave S, Suite 310
Kent, WA 98032
Brian.Boye@doh.wa.gov
(253) 395-6778

DOH Fiscal Contact
Karena McGovern
DOH Office of Drinking Water
243 Israel Rd SE
Tumwater, WA 98501
Karena.McGovern@doh.wa.gov
(360) 236-3094
DOH Program Name or Title: Office of Drinking Water Group B Program - Effective January 1, 2018

Local Health Jurisdiction Name: Island County Public Health Department

Contract Number: CLH18246

Statement of Work Purpose: The purpose of this statement of work is to provide financial support to LHJs implementing local Group B water system programs.

Revision Purpose: N/A

<table>
<thead>
<tr>
<th>Task Number</th>
<th>Task/Activity/Description</th>
<th>*May Support PHAB Standards/Measures</th>
<th>Deliverables/Outcomes</th>
<th>Memorandum of Agreement Number</th>
<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Implement a Group B water system program through a local ordinance.</td>
<td></td>
<td>An executed memorandum of agreement (MOA) identifying responsibilities of a full Group B program through a local ordinance.</td>
<td>Reference DOH MOA #N21143</td>
<td>Lump sum payment (See Special Billing Requirements)</td>
</tr>
</tbody>
</table>

*For Information Only:

Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: [http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf](http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf)

Program Specific Requirements/Narrative

Special Billing Requirements
The LHJ shall submit a $10,000 invoice before May 15, 2018.
DOH Program Name or Title: Office of Emergency Preparedness & Response - Effective January 1, 2018

Local Health Jurisdiction Name: Island County Public Health Department

Contract Number: CLH18246

SOW Type: Original Revision # (for this SOW)

Period of Performance: January 1, 2018 through June 30, 2018

Statement of Work Purpose: The purpose of this statement of work is to establish the funding and tasks for the Public Health Emergency Preparedness and Response program for the 2017 grant period.

Revision Purpose: N/A

<table>
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<tr>
<th>Chart of Accounts Program Name or Title</th>
<th>CFDA #</th>
<th>BARS Revenue Code</th>
<th>Master Index Code</th>
<th>Funding Period (LHJ Use Only) Start Date</th>
<th>End Date</th>
<th>Current Consideration</th>
<th>Change Increase (+)</th>
<th>Total Consideration</th>
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<tr>
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<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Attend emergency preparedness events, (e.g. trainings, meetings, conference calls, and conferences) as necessary to advance LHJ preparedness or complete the deliverables in this statement of work.</td>
<td></td>
<td>Submit end of year progress report.</td>
<td>June 30, 2018</td>
<td>Reimbursement for actual costs not to exceed total funding consideration amount.</td>
</tr>
<tr>
<td>2</td>
<td>Complete reporting templates as requested by DOH to comply with program and federal grant requirements (e.g. performance measures, gap analysis, mid-year and end-of-year reporting templates, etc.)</td>
<td></td>
<td>Submit completed templates to DOH</td>
<td>June 30, 2018</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Use established procedures to activate a public health emergency response plan within the jurisdiction. Test the following: How the command structure is utilized to manage emergency response. The relationship between the LHJ and the county Emergency Operations Center (EOC) during a response. An EOC location from which public health</td>
<td></td>
<td>Submit end of year progress report.</td>
<td>June 30, 2018</td>
<td>Submit the most recent Public Health Emergency Response Plan. Submit documentation of the use of the Public Health Emergency Response Plan during an incident and/or exercise. Documents</td>
</tr>
<tr>
<td>Task Number</td>
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<tr>
<td></td>
<td>will coordinate the Public Health Emergency Response Plan</td>
<td>should include an Incident Action Plan (IAP), After Action Report (AAR), Situation Reports (SitRep), Corrective Action Plans (CAP).</td>
<td>Submit agenda and sign in sheets of trainings, including attendee signatures and contact information, conducted on Public Health Emergency Response Plan</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• The process for notifying and mobilizing staff during an incident.</td>
<td></td>
<td>Agenda and sign in sheets of trainings conducted, with attendee signatures and contact information, or registrations if training is not conducted by the LHJ</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.1)</td>
<td>Provide training for appropriate staff who serve in the EOC and the Emergency Support Function #8 (ESF#8) role on the Incident Command System (ICS) recent Public Health Emergency Response plans and policies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.2)</td>
<td>Train appropriate public health emergency response staff on Web EOC or applicable information management system utilized by local emergency management in the county.</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>4</td>
<td>Use established decision making protocol to support the Local Health Officer (LHO) and the Public Health Administrator in making policy level decisions during an emergency.</td>
<td>Submit end of year progress report.</td>
<td>Submit documented use of the decision making protocol used during an emergency to DOH</td>
<td>June 30, 2018</td>
<td></td>
</tr>
<tr>
<td>4.1</td>
<td>Document that Public Health, Medical and Mortuary Response is identified in the Public Health Emergency Plan and is integrated with the City and County Emergency Plans.</td>
<td></td>
<td>Public Health, Medical and Mortuary Response documentation showing inclusion in city and county plans.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Maintain Washington Secure Electronic Communication, Urgent Response and Exchange System (WASECURES) program as the primary emergency notification system within the LHJ and include all critical LHJ positions as registered users.</td>
<td>Submit end of year progress report.</td>
<td>A list of registered users to include their title and role in the emergency response plan.</td>
<td>June 30, 2018</td>
<td></td>
</tr>
<tr>
<td>5.1)</td>
<td>Conduct a notification drill using WASECURES.</td>
<td></td>
<td>Results of notification drill.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Notes:</td>
<td>Registered users must log in quarterly at a minimum. DOH will provide on-site technical assistance to LHJs, as needed, on utilizing WASECURES. LHJs may choose to utilize other notification systems in addition to WASECURES to alert staff during incidents.</td>
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</tr>
<tr>
<td>Task Number</td>
<td>Task/Activity/Description</td>
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<td>Deliverables/Outcomes</td>
<td>Due Date/Time Frame</td>
<td>Payment Information and/or Amount</td>
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</tr>
</tbody>
</table>
| 6           | Use established procedures for your LHJ to request assistance from the local Emergency Operations Center (EOC), neighboring LHJs, and DOH during disasters.  
  • Identify how resources are coordinated with the local EOC.  
  • Identify how to coordinate the logistical issues to receive resources from DOH and other partners. (If LHJs rely on local Emergency Management (EM) or other partners to coordinate logistical issues for receiving resources, and the local EM plan documents this fact, that documentation will suffice.) | | Submit end of year progress report.  
Submit AARs and IAPs that includes documentation of the elements listed. | June 30, 2018 |                                     |
| 7           | Use established procedures and plans to inform the public of threats to health and safety by various means. Include a list of the various mechanisms used by your LHJ for releasing information to the public during drills, exercises or incident response.  
  7.1) Create and maintain templates for news releases for categories of public health hazards. | | Submit end of year progress report.  
Submit AARs and messaging used to inform the public during drills, exercise or incident response.  
Include a summary of how communication tools were used.  
Submit sample templates. | June 30, 2018 |                                     |
| 8           | Participate in evaluation of response capabilities based on a standard evaluation tool created by DOH.                                                                                                                 | | Submit end of year progress report. | June 30, 2018 |                                     |
| 9           | Use established procedures to gain and maintain situational awareness during an incident.  
Use forms and processes for collecting key data elements during disasters including:  
  • The functionality of critical public health operations  
  • The functionality of critical healthcare facilities and the services they provide  
  • The functionality of critical infrastructure serving public health and healthcare facilities (roads, water, sewer, power, communications)  
  • Number of disease cases  
  • Number of fatalities attributed to an incident  
  • If key elements are collected by others, such as local EM or Health Care Coalition (HCC), describe how the LHJ gains access to that information. | | Submit end of year progress report.  
Submit an AAR which includes how these plans and forms were used to maintain situational awareness during all drills, exercises and real world incidents  
Submit SitReps that include the data elements listed and a summary of how it was disseminated.  
Data collection form templates. | June 30, 2018 |                                     |
<table>
<thead>
<tr>
<th>Task Number</th>
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<th>*May Support PHAB Standards/Measures</th>
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</tr>
</thead>
<tbody>
<tr>
<td>9.1</td>
<td>Create an ESF#8 situation report form based on an established planning cycle to include, at a minimum, the data elements listed above.</td>
<td></td>
<td>Submit ESF#8 SitReps used during drills, exercises or real world incidents.</td>
<td></td>
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</tr>
<tr>
<td>9.2</td>
<td>Demonstrate disseminating situation reports to ESF#8 response partners</td>
<td></td>
<td>Submit agenda and sign in sheets, including attendee signatures and contact information, for trainings conducted on situational awareness.</td>
<td></td>
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</tr>
<tr>
<td>9.3</td>
<td>Train staff on all procedures established to maintain situational awareness during an incident.</td>
<td></td>
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</tr>
<tr>
<td>10</td>
<td>Participate in one or more exercises or real world incidents testing each of the following:</td>
<td></td>
<td>Submit end of year progress report. Submit AAR and Improvement Plan for each drill/exercise/incident.</td>
<td>June 30, 2018</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• The process for requesting and receiving mutual aid resources</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>• The process for gaining and maintaining situational awareness</td>
<td></td>
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<tr>
<td></td>
<td>• Development of an ESF#8 situation report, or compilation of situational awareness information to be included in a County situation report</td>
<td></td>
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<tr>
<td></td>
<td>• EOC or ICS activation</td>
<td></td>
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<tr>
<td></td>
<td>• The COOP plan for the LHJ</td>
<td></td>
<td></td>
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<tr>
<td>11</td>
<td>Update or develop procedures to request, receive and dispense medical countermeasures.</td>
<td></td>
<td>Submit end of year progress report. Submit up to date procedure to request, receive and dispense medical countermeasures.</td>
<td>June 30, 2018</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Use established procedures and plans to manage spontaneous health and medical volunteers during disaster response, including roles non-vetted volunteers can perform.</td>
<td></td>
<td>Submit end of year progress report. Submit documentation of management of medical volunteers during a response.</td>
<td>June 30, 2018</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Implement the Continuity of Operations Plan (COOP) plan for the local health jurisdiction. Demonstrate the following:</td>
<td></td>
<td>Submit end of year progress report. Submit the most current COOP and AAR documenting COOP implementation demonstrating the elements listed.</td>
<td>June 30, 2018</td>
<td></td>
</tr>
<tr>
<td>Task Number</td>
<td>Task/Activity/Description</td>
<td>*May Support PHAB Standards/Measures</td>
<td>Deliverables/Outcomes</td>
<td>Due Date/Time Frame</td>
<td>Payment Information and/or Amount</td>
</tr>
<tr>
<td>------------</td>
<td>------------------------------------------------------------------------------------------</td>
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<td>----------------------------------</td>
</tr>
<tr>
<td>14</td>
<td>Provide notification to DOH for all instances involving a public health response by the LHJ to an emergency utilizing emergency response plans and structures.</td>
<td></td>
<td>Submit end of year progress report. Submit Incident Action Plans, Situation Reports and After Action Reports.</td>
<td>June 30, 2018</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Provide LHJ situation reports to DOH during all incidents involving an emergency response by the LHJ.</td>
<td></td>
<td>Submit end of year progress report. Provide Situation Reports.</td>
<td>June 30, 2018</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Submit essential elements of information (EEIs) during incident response upon request by DOH.</td>
<td></td>
<td>Submit end of year progress report. Provide information upon request.</td>
<td>June 30, 2018</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Participate in the regional healthcare coalition and attend coalition meetings as necessary</td>
<td></td>
<td>Submit end of year progress report. Provide a summary of participation in coalition activities.</td>
<td>June 30, 2018</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Provide notification to the DOH Duty Officer at 360-888-0838 or <a href="mailto:hanalert@doh.wa.gov">hanalert@doh.wa.gov</a> for all response.</td>
<td></td>
<td>Submit end of year progress report. Documentation that notification to DOH was provided; or statement that no incident response occurred.</td>
<td>June 30, 2018</td>
<td></td>
</tr>
</tbody>
</table>

*For Information Only:*
Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf

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

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

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

DOH Program Contact:
Jennifer Albertson, Contract and Finance Specialist
Department of Health
P O Box 47960, Olympia, WA 98504-7960
jennifer.albertson@doh.wa.gov
PHEP/HPP Deliverable Submission email address: concondeliverables@doh.wa.gov
DOH Program Name or Title: Office of Immunization & Child Profile - Effective January 1, 2018

Local Health Jurisdiction Name: Island County Public Health Department

Contract Number: CLH18246

SOW Type: Original

Period of Performance: January 1, 2018 through June 30, 2018

Statement of Work Purpose: The purpose of this statement of work is to define required immunization tasks, deliverables, and funding for the period January 1, 2018 through June 30, 2018.

Revision Purpose: N/A

Chart of Accounts Program Name or Title | CFDA # | BARS Revenue Code | Master Index Code | Funding Period (LHJ Use Only) | Current Consideration | Change Increase (+) | Total Consideration |
---|---|---|---|---|---|---|---|
FFY17 VFC Ops | 93.268 | 333.93.26 | 74310271 | 01/01/18 - 06/30/18 | 0 | 1,485 | 1,485 |
FFY17 317 Ops | 93.268 | 333.93.26 | 74310270 | 01/01/18 - 06/30/18 | 0 | 805 | 805 |
FFY17 AFIX | 93.268 | 333.93.26 | 74310272 | 01/01/18 - 06/30/18 | 0 | 2,980 | 2,980 |
TOTALS | | | | | 0 | 5,270 | 5,270 |

Task | Task/Activity/Description | *May Support PHAB Standards/Measures | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
---|---|---|---|---|---|
1 | Facilitate annual renewal of the provider agreement for receipt of state supplied vaccine for all healthcare providers receiving state-supplied childhood vaccines. | | Provider Agreements for Receipt of State Supplied Vaccine received online via the Washington Immunization Information System. | Annually, per Annual VFC Provider Agreement Update Schedule | Reimbursement for actual costs incurred, not to exceed total funding consideration amount. Funds available for this task*: FFY17 AFIX 74310272 |
<table>
<thead>
<tr>
<th>Task Number</th>
<th>Task/Activity/Description</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Enroll new providers. Conduct an enrollment site visit to all new providers, and gather information needed to complete Program enrollment</td>
<td>Provider Agreement for Receipt of State Supplied Vaccine with original signature – DOH 348-002 (NOTE: a photocopy will not be accepted)</td>
<td>Within ten (10) days after the date of the provider enrollment visit</td>
<td>Reimbursement for actual costs incurred, not to exceed total funding consideration amount. Funds available for this task*: FFY17 AFIX 74310272</td>
</tr>
<tr>
<td>3</td>
<td>Use and facilitate provider use of the Washington Immunization Information System to place and approve provider vaccine orders. Monitor provider orders for appropriateness (including: accuracy of shipping information, order frequency, timing, quantity and type) and approve vaccine order online after assuring the appropriateness of the order.</td>
<td>Electronic submission of provider vaccine orders via the Washington Immunization Information System</td>
<td>Based on provider order schedules</td>
<td>Reimbursement for actual costs incurred, not to exceed total funding consideration amount. Funds available for this task*: FFY17 VFC Ops 74310271 FFY17 317 Ops 74310270</td>
</tr>
<tr>
<td>4</td>
<td>Monitor and assure electronic or paper submission of vaccine accountability reports for compliance with Provider Agreement related to vaccine management (ordering, inventory management, reconciliation, compliance with storage and handling, and reporting of all vaccine incidents and returns).</td>
<td>a) Monthly Vaccine Accountability Report (DOH 348-006)</td>
<td>a) By the 25th of each month</td>
<td>Reimbursement for actual costs incurred, not to exceed total funding consideration amount. Funds available for this task*:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b) Report of Vaccine Storage Incidents (DOH 348-154) complete with reason and corrective action as needed.</td>
<td>b) Within seven (7) days of the incident</td>
<td></td>
</tr>
<tr>
<td>Task Number</td>
<td>Task/Activity/Description</td>
<td>*May Support PHAB Standards/Measures</td>
<td>Deliverables/Outcomes</td>
<td>Due Date/Time Frame</td>
</tr>
<tr>
<td>-------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------</td>
<td>---------------------------------------------------------------------------------------</td>
<td>---------------------</td>
</tr>
<tr>
<td>5</td>
<td>Provide communication, technical assistance, consultation, and education to providers about vaccine quality assurance, accountability, program participation and vaccine management.</td>
<td>*May Support PHAB Standards/Measures</td>
<td>c) Report all cases (or suspected cases) of vaccine fraud or abuse.</td>
<td>c) Within seven (7) days of the incident</td>
</tr>
<tr>
<td>6</td>
<td>Conduct a total of two (2) VFC Compliance Site Visits at the assigned provider site(s) within your jurisdiction. DOH will assign provider site(s) via the VFC Site Visit Selection Tool. Site visits should address all requirements outlined in the Provider Agreement, the CDC Vaccines for Children Operations Guide, and messages from the Childhood Vaccine Program. Conduct VFC Compliance Site Visit Follow-Up to assure providers resolve all follow-up actions identified during the initial visit. Follow-up actions may include another physical site visit or verification by email, fax, or mail that follow-up actions were completed. Documentation for each VFC Site Visit follow-up action must be uploaded into PEAR and/or properly notated in the Reviewer Notes section of PEAR.</td>
<td>a) Enter responses from the VFC Compliance Site Visit Reviewer Guide into the VFC Provider Education, Assessment, and Reporting (PEAR) online system for each Compliance Site Visit. Follow all corrective action and follow-up guidance provided by PEAR and the Childhood Vaccine Program for each incorrect response. b) Attach copy of signed Acknowledgement of Receipt form to the Site Visit in PEAR. c) Attach a copy of any documents and/or emails</td>
<td>a) At the time of the VFC Compliance Site Visit or within five (5) business days of the site visit. b) Within five (5) days of the site visit c) Within five (5) days of receiving</td>
<td>Reimbursement for actual costs incurred, not to exceed total funding consideration amount. Funds available for this task*: FFY17 VFC Ops 74310271 FFY17 317 Ops 74310270 *See Restrictions on Funds below</td>
</tr>
<tr>
<td>Task Number</td>
<td>Task/Activity/Description</td>
<td>*May Support PHAB Standards/Measures</td>
<td>Deliverables/Outcomes</td>
<td>Due Date/Time Frame</td>
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</tr>
<tr>
<td>All assigned VFC Compliance Site Visits including follow-up actions must be completed by May 15, 2018 for the January – June contract period.</td>
<td></td>
<td></td>
<td>submitted by the provider to resolve follow-up actions to the site visit in PEAR.</td>
<td></td>
</tr>
</tbody>
</table>
| 7 | **NOTE:** During this period of performance, **no new AFIX visits shall be conducted.** This task will focus on follow-up of AFIX visits that were conducted during the previous contract year. Conduct AFIX follow-up visits with all provider sites that received an AFIX visit between April 1, 2017 and December 31, 2017. Follow-up visits can be conducted in-person, by telephone, or by webinar. All AFIX follow-up visits must be completed six (6) months after the feedback visit. Continue following up with provider sites until they fully implement their selected quality improvement activities. | | Enter the following data in the Exchange tab of the AFIX Online Tool for follow-up visits:  
• Clinic progress on implementing quality improvement strategies.  
• Follow-up coverage assessment results (from CoCASA reports). | Within five (5) days of visit. | Reimbursement for actual costs incurred, not to exceed total funding consideration amount.  
Funds available for this task*:  
FFY17 AFIX 74310272  
*See Restrictions on Funds below |
| 8 | a) In coordination with hospitals, health care providers, and health plans (if applicable), conduct activities to prevent perinatal hepatitis B infection in accordance with the Perinatal Hepatitis B Prevention Program Guidelines, including the following:  
1) identification of HBsAg-positive pregnant women, and pregnant women with unknown HBsAg status  
2) reporting of HBsAg-positive women and their infants  
3) Case management for infants born to HBsAg-positive women to ensure administration of HBIG and hepatitis B vaccine within 12 hours of birth, the completion of the 3-dose hepatitis B vaccine series, and post-vaccination serologic testing.  
b) Provide technical assistance to birthing hospitals to encourage administration of the hepatitis B birth dose to all newborns within 12 | | a) Enter information for each case identified into the Perinatal Hepatitis B module of the WA Immunization Information System  
b) Annual Perinatal Hepatitis B Outreach Summary (DOH 348-268) | a) By the last day of each month | Reimbursement for actual costs incurred, not to exceed total funding consideration amount.  
Funds available for this task*:  
FFY17 317 Ops 74310270  
*See Restrictions on Funds below |
<table>
<thead>
<tr>
<th>Task Number</th>
<th>Task/Activity/Description</th>
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<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>hours of birth, in accordance with ACIP recommendations.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c). Report all perinatal hepatitis B investigations, including HBsAg-positive infants, in the Perinatal Hepatitis B Module of the Washington State Immunization Information System.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*For Information Only:
Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: [http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf](http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf)

**Program Specific Requirements/Narrative**
This section is for program specific information not included elsewhere.
- All LHJ staff who conducts VFC Compliance Site Visits and AFIX visits must participate in an annual VFC and AFIX training, conducted by DOH Office of Immunization and Child Profile (OICP) staff or their designee.
- All new LHJ site visit reviewers are required to have at least one (1) observational visit conducted by DOH OICP staff or their designee. DOH OICP staff (or designee) will periodically conduct observational VFC/AFIX site visits with all other LHJ reviewers who conduct VFC Compliance Site Visits.
- LHJ staff who conducts VFC Compliance Site Visits must participate in at least one (1) joint (observational) VFC compliance visit with DOH staff every other year. The observational visit will occur during a regularly scheduled site visit conducted by the LHJ reviewer. DOH will determine the Observational visit.
- Tasks in this statement of work may not be subcontracted without prior written approval from DOH OICP.

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

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

**Program Manual, Handbook, Policy References**
Office of Immunization and Child Profile References and Resources for vaccine management, VFC compliance site visits, AFIX visits, and Perinatal Hepatitis B activities can be found at this [link](http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf) to our website.

VFC Operations Guide - A copy will be provided by the Office of Immunization and Child Profile. (Note: All site visit reviewers are required to have access to the most current CDC VFC Operations Guide at every VFC compliance site visit).

**Staffing Requirements**
Provide notification via email to [oicpcontracts@doh.wa.gov](mailto:oicpcontracts@doh.wa.gov) within fifteen (15) days of any changes to staffing for those who conduct work outlined in this statement of work.
Restrictions on Funds (what funds can be used for which activities, not direct payments, etc.)
Allowable expenses with 317 and VFC FA Operations Funds (dated September 16, 2016) document is posted on the DOH Consolidated Contract website at this link. In addition to the funding listed in the Payment Information and/or Amount column for each task, FFY18 317 Ops funding may be used for any activity in this statement of work conducted between January 1, 2018 and June 30, 2018, per funding availability and period of performance.

These federal funds may not be used for expenses related to travel or attendance at any CDC-sponsored conference, training, or event without prior written approval from the DOH Office of Immunization and Child Profile.

DOH Program Contact
Tawney Harper, MPA
Budget and Operations Manager
Office of Immunization and Child Profile
Department of Health
PO Box 47843, Olympia WA 98504-7843
tawney.harper@doh.wa.gov, 360-236-3525

DOH Fiscal Contact
Vanessa Mojica, Special Projects Coordinator
Office of Immunization and Child Profile
PO Box 47843, Olympia WA 98504-7843
Vanessa.mojica@doh.wa.gov, 360-236-3802

Deliverables may be sent electronically via email at oicpcontracts@doh.wa.gov, by fax to 360-236-3590, or by mail to PO Box 47843, Olympia WA 98504-7843
**DOH Program Name or Title:** OSS LMP Implementation - Effective January 1, 2018  

**Local Health Jurisdiction Name:** Island County Public Health Department  

**Contract Number:** CLH18246

**SOW Type:** Original  

**Revision # (for this SOW):** N/A

**Period of Performance:** January 1, 2018 through June 30, 2019

**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).

**Revision Purpose:** N/A

### Chart of Accounts Program Name or Title

<table>
<thead>
<tr>
<th>Program Name or Title</th>
<th>CFDA #</th>
<th>BARS Revenue Code</th>
<th>Master Index Code</th>
<th>Funding Period (LHJ Use Only)</th>
<th>Current Consideration</th>
<th>Change Increase (+)</th>
<th>Total Consideration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wastewater Management-GFS</td>
<td>N/A</td>
<td>334.04.93</td>
<td>26701100</td>
<td>01/01/18</td>
<td>06/30/19</td>
<td>0</td>
<td>60,000</td>
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<tr>
<td>TOTALS</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>0</td>
<td>60,000</td>
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<table>
<thead>
<tr>
<th>Task Number</th>
<th>Task/Activity/Description</th>
<th>*May Support PHAB Standards/Measures</th>
<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Operation and Maintenance (O&amp;M) Program</td>
<td>O&amp;M Program activities will include, but will not be limited to, contract/indirect administration, staff training, staff participation in DOH regional projects/meetings, advertising, brochures, surveys, website development, hardware, software, costs and fees associated with all supporting databases.</td>
<td>All tasks support portions of PHAB Standard 3 to “Inform and Educate about Public Health Issues and Functions”. O&amp;M Program activities will be tracked and reported to demonstrate progress and will detail accomplishments.</td>
<td>Report Due Date: July 15, 2018 January 15, 2019 June 30, 2019</td>
<td>Task is ongoing throughout the project period.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$20,000</td>
</tr>
<tr>
<td>2</td>
<td>Home Owner Septic Training (HOST) Program</td>
<td>Continued development, advertisement, and delivery of Septic education classes. Classes are open to all of Island County residents..</td>
<td>All tasks support PHAB Standard 4.2 to “Promote the community’s understanding of and support for policies and strategies that will improve the public’s health”. Septic classes will be offered in person along with links to online classes. All classes, numbers of community members in attendance, and test results will be tracked and reported.</td>
<td>Report Due Date: July 15, 2018 January 15, 2019 June 30, 2019</td>
<td>Task is ongoing throughout the project period.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$10,000</td>
</tr>
<tr>
<td>3</td>
<td>Onsite Sewage Systems (OSS) Professionals</td>
<td>Continued development and delivery of educational</td>
<td>All tasks support the Puget Sound</td>
<td>Industry meeting agendas and attendance will be reported.</td>
<td>Report Due Date: July 15, 2018</td>
</tr>
</tbody>
</table>

**Funding Source**  
- Federal <Select One>  
- State  
- Other

**Federal Compliance (check if applicable)**  
- FFATA (Transparency Act)  
- Research & Development

**Type of Payment**  
- Reimbursement  
- Fixed Price
<table>
<thead>
<tr>
<th>Task Number</th>
<th>Task/Activity/Description</th>
<th>*May Support PHAB Standards/Measures</th>
<th>Deliverables/Outcomes</th>
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<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>OSS Data Quality Control</td>
<td>Partnership Action Agenda Strategy and related Near Term Actions to “Prevent, reduce and control the source of pollutants entering the Puget Sound”.</td>
<td>The continued integration of databases and GIS data into the O&amp;M Program will allow for easily accessible and reportable data.</td>
<td>January 15, 2019 June 30, 2019 Task is ongoing throughout the project period.</td>
<td>$20,000</td>
</tr>
</tbody>
</table>

*For Information Only:*
Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: [http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf](http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf)

**Program Specific Requirements/Narrative**

**Restrictions on Funds (what funds can be used for which activities, not direct payments, etc)**
These funds can NOT be used for local match to federal grants.

**Special References (RCWs, WACs, etc)**
WAC 246-272A and RCW 70.118A

State funds from the Aquatic Lands Enhancement Account must be used to implement elements and activities of the local on-site sewage management plans that do not conflict with and are consistent with the goals, strategies, objectives, and actions of the Puget Sound Action Agenda.

**Definitions**
Failure: A condition of an on-site sewage system or component that threatens the public health by inadequately treating sewage or by creating a potential for direct or indirect contact between sewage and the public. Examples of failure include: (a) Sewage on the surface of the ground; (b) Sewage backing up into a structure caused by slow soil absorption of septic tank effluent; (c) Sewage leaking from a sewage tank or collection system; (d) Cesspools or seepage pits where evidence of ground water or surface water quality degradation exists; (e) Inadequately treated effluent contaminating ground water or surface water; or (f) Noncompliance with standards stipulated on the permit.
Maintenance and Monitoring: The actions necessary to keep the on-site sewage system components functioning as designed. Periodic or continuous checking of an on-site sewage system, which is performed by observations and measurements, to determine if the system is functioning as intended and if system maintenance is needed. Monitoring also includes maintaining accurate records that document monitoring activities.

**Special Billing Requirements**

Billing Information

1. Billings are submitted on an A19-1A form, which is provided by DOH.
2. A19-1A forms may be submitted monthly and must be submitted bi-monthly at minimum.

**Special Instructions**

Semiannual progress reports, including marine recovery area (MRA) mapping data, are due to DOH via email to christie.durkin@doh.wa.gov and randy.freeby@doh.wa.gov.

Progress Report Due Dates: July 15, 2018, January 15, 2019, and June 30, 2019

The report format will be provided by DOH and may be modified throughout the contract period via email announcement.

**DOH Program Contact:** Christie Durkin, Office of Environmental Health and Safety, PO Box 47824, Olympia WA  98504-7824; 360-236-3396; christie.durkin@doh.wa.gov

**DOH Fiscal Contact:** Kristy Warner, Environmental Public Health, PO Box 47820, Olympia WA  98504-7820, 360-236-3742, kirsty.warner@doh.wa.gov
Exhibit A  
Statement of Work  
Contract Term: 2018-2020

DOH Program Name or Title: Recreational Shellfish Activities - Effective January 1, 2018

Local Health Jurisdiction Name: Island County Public Health Department

Contract Number: CLH18246

SOW Type: Original  Revision # (for this SOW)

Period of Performance: January 1, 2018 through June 30, 2019

Statement of Work Purpose: The purpose of this statement of work is to provide funds for shellfish harvesting safety.

Revision Purpose: N/A

<table>
<thead>
<tr>
<th>Chart of Accounts Program Name or Title</th>
<th>CFDA #</th>
<th>BARS Revenue Code</th>
<th>Master Index Code</th>
<th>Funding Period (LHJ Use Only) Start Date</th>
<th>End Date</th>
<th>Current Consideration</th>
<th>Change Increase (+)</th>
<th>Total Consideration</th>
</tr>
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<tbody>
<tr>
<td>Rec. Shellfish/Biotoxin</td>
<td>N/A</td>
<td>334.04.93</td>
<td>26402600</td>
<td>01/01/18</td>
<td>06/30/19</td>
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<td>0</td>
<td>3,400</td>
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<tr>
<th>Task Number</th>
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<th>Payment Information and/or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td><strong>Biotoxin Monitoring</strong></td>
<td></td>
<td>Submit report on DOH approved format of activities for the year, including the number and names of beaches posted for classification.</td>
<td>Email Report to DOH by: February 15, 2019 (See Special Instructions below.)</td>
<td>$3,000</td>
</tr>
<tr>
<td></td>
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<td></td>
<td><strong>Outreach</strong></td>
<td></td>
<td>Submit report including the number of events staffed, and amount of educational materials distributed.</td>
<td>Email Report to DOH by: February 15, 2019 (See Special Instructions below.)</td>
<td>$400</td>
</tr>
</tbody>
</table>
*For Information Only:
Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf

Program Specific Requirements/Narrative

Department of Health’s Biotoxin Monitoring Plan

Special References (RCWs, WACs, etc)
Chapter 246-280 WAC
http://www.doh.wa.gov/CommunityandEnvironment/Shellfish/RecreationalShellfish
http://www.doh.wa.gov/AboutUs/ProgramsandServices/EnvironmentalPublicHealth/EnvironmentalHealthandSafety/ShellfishProgram/Biotoxins

Special Instructions
Report for work done the previous year must be submitted via email to Liz Maier by February 15, 2019.
The report format will be provided by DOH and may be modified throughout the period of performance via email announcement.

DOH Program Contact: Liz Maier, Office of Environmental Health and Safety, PO Box 47824, Olympia WA 98504-7824; 360.236.3308; liz.maier@doh.wa.gov
DOH Fiscal Contact: Kristy Warner, Environmental Public Health, PO Box 47820, Olympia WA 98504-7820; 360-236-3742; kristy.warner@doh.wa.gov
DOH Program Name or Title: WIC Nutrition Program - Effective January 1, 2018

Local Health Jurisdiction Name: Island County Public Health Department

Contract Number: CLH18246

SOW Type: Original  Revision # (for this SOW)

Period of Performance: January 1, 2018 through December 31, 2020

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: N/A

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<tr>
<th>Chart of Accounts Program Name or Title</th>
<th>CFDA #</th>
<th>BARS Revenue Code</th>
<th>Master Index Code</th>
<th>Funding Period (LHJ Use Only)</th>
<th>Current Consideration</th>
<th>Change Increase (+)</th>
<th>Total Consideration</th>
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<th>Deliverables/Outcomes</th>
<th>Due Date/Time Frame</th>
<th>Payment Information and/or Amount</th>
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<tbody>
<tr>
<td>1</td>
<td>WIC Nutrition Program</td>
<td>*</td>
<td></td>
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<td>See “Special Billing Requirements” below.</td>
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<tr>
<td>1.1</td>
<td>Maintain authorized participating caseload at 100% based on quarterly average as determined from monthly caseload management reports generated at the state WIC office. The Department of Health (DOH) State WIC Nutrition Program has the option of reducing authorized participating caseload and corresponding funding when: 1. Unanticipated funding situations occur. 2. Reallocations are necessary to redistribute.</td>
<td>7.2</td>
<td>Outcomes based on monthly participation data from state WIC caseload management reports.</td>
<td></td>
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<tr>
<td>Task Number</td>
<td>Task/Activity/Description</td>
<td>*May Support PHAB Standards/Measures</td>
<td>Deliverables/Outcomes</td>
<td>Due Date/Time Frame</td>
<td>Payment Information and/or Amount</td>
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<tr>
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<td>------------------------------------</td>
<td>-------------------------------</td>
<td>--------------------</td>
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</tr>
<tr>
<td>1.2</td>
<td>Submit the annual Nutrition Services Plan for each year of the Contract.</td>
<td>9.2</td>
<td>Nutrition Services Plan</td>
<td>First year due 11/30/18  Second year due 11/30/19  Third year due 11/30/20</td>
<td>Payment withheld if not received by due date.</td>
</tr>
<tr>
<td>1.3</td>
<td>Submit the annual Nutrition Services Expenditure Report for each year of the Contract.</td>
<td>11.2</td>
<td>Nutrition Services Expenditure Report</td>
<td>First year due 11/30/18  Second year due 11/30/19  Third year due 11/30/20</td>
<td>Payment withheld if not received by due date.</td>
</tr>
<tr>
<td>1.4</td>
<td>Tell clients about other health services in the agency. If needed, develop written agreements with other health care agencies and refer clients to these services.</td>
<td>3.1</td>
<td>Documentation must be available for review by WIC monitor staff.</td>
<td>Biennial WIC monitor</td>
<td></td>
</tr>
<tr>
<td>1.5</td>
<td>Provide nutrition education services to clients and caregivers in accordance with federal and state requirements.</td>
<td>3.1</td>
<td>Documentation must be available for review by WIC monitor staff.</td>
<td>Biennial WIC monitor</td>
<td></td>
</tr>
<tr>
<td>1.6</td>
<td>Issue WIC checks while assuring adequate check security and reconciliation.</td>
<td>11.2</td>
<td>Documentation must be available for review by WIC monitor staff.</td>
<td>Biennial WIC monitor</td>
<td></td>
</tr>
<tr>
<td>1.7</td>
<td>Collect data, maintain records, and submit reports to effectively enforce the non-discrimination laws (Refer to Civil Rights Assurances below).</td>
<td>7.1</td>
<td>Documentation must be available for review by WIC monitor staff.</td>
<td>Biennial WIC monitor</td>
<td></td>
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<tr>
<td>1.8a</td>
<td>Submit WIC and Breastfeeding Peer Counseling Budget Workbook for each year of the contract.</td>
<td>11.2</td>
<td>Budget Workbooks</td>
<td>First year due 09/30/18  Second year due 09/30/19  Third year due 09/30/20</td>
<td></td>
</tr>
<tr>
<td>1.8b</td>
<td>Revise and submit WIC Budget Workbook mid-year for each year of the contract.</td>
<td>11.2</td>
<td>Revised Budget Workbook</td>
<td>Mid-year revision due 04/30/18  Mid-year revision due 04/30/19  Mid-year revision due 04/30/20</td>
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</tr>
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<td>Task Number</td>
<td>Task/Activity/Description</td>
<td>*May Support PHAB Standards/Measures</td>
<td>Deliverables/Outcomes</td>
<td>Due Date/Time Frame</td>
<td>Payment Information and/or Amount</td>
</tr>
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</tr>
<tr>
<td>2 Breastfeeding Promotion</td>
<td></td>
<td></td>
<td>Status report of chosen activities in Nutrition Services Plan.</td>
<td>First year due 11/30/18</td>
<td>See “Special Billing Requirements” below</td>
</tr>
<tr>
<td>2.1</td>
<td>Provide breastfeeding promotion and support activities in accordance with federal and state requirements</td>
<td>3.1</td>
<td>Documentation must be available for review by WIC monitor staff.</td>
<td>First year due 11/30/18</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Second year due 11/30/19</td>
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<td></td>
<td>Third year due 11/30/20</td>
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<td></td>
<td></td>
<td></td>
<td>Biennial WIC monitor</td>
<td></td>
</tr>
<tr>
<td>2.2 Work with community partners to improve practices that affect breastfeeding. Choose one or more of the following projects:</td>
<td></td>
<td></td>
<td>Status report of chosen activities in Nutrition Services Plan.</td>
<td>First year due 11/30/18</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Second year due 11/30/19</td>
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<td></td>
<td></td>
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<td></td>
<td>Third year due 11/30/20</td>
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<td></td>
<td>Biennial WIC monitor</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>Other projects will need pre-approval from the State WIC Office.</td>
<td></td>
</tr>
<tr>
<td>3 Breastfeeding Peer Counseling Program</td>
<td></td>
<td></td>
<td>Annual Report and expenditures from the previous federal fiscal year.</td>
<td>First year due 12/31/18</td>
<td>See “Special Billing Requirements” below</td>
</tr>
<tr>
<td>3.1</td>
<td>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.</td>
<td>3.1</td>
<td>Documentation must be available for review by WIC monitor staff.</td>
<td>First year due 12/31/18</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Second year due 12/31/19</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Third year due 12/31/20</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Biennial WIC monitor</td>
<td></td>
</tr>
<tr>
<td>Task Number</td>
<td>Task/Activity/Description</td>
<td>*May Support PHAB Standards/Measures</td>
<td>Deliverables/Outcomes</td>
<td>Due Date/Time Frame</td>
<td>Payment Information and/or Amount</td>
</tr>
<tr>
<td>-------------</td>
<td>---------------------------</td>
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</tr>
<tr>
<td>3.2</td>
<td>Track Breastfeeding Peer Counseling Program expenditures and bill separately from the WIC grant.</td>
<td>3.1</td>
<td>Documentation must be available for review by WIC monitor staff</td>
<td>Biennial WIC monitor</td>
<td></td>
</tr>
</tbody>
</table>

*For Information Only:*
Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: [http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf](http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf)

**Program Specific Requirements/Narrative**

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

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

**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, FNS 7CFR Part 246, 3016, 3017 and 3018
- Other directives issued during the term of the Contract

**Staffing Requirements:**
The LHJ must:

- Use Competent Professional Authority staff, as defined by WIC policy, to determine client eligibility, prescribe an appropriate food package and offer nutrition education based on the clients’ needs.
- Use a Registered Dietitian (RD) or other qualified nutritionist to provide nutrition services to high risk clients, 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.

**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:
1) All criteria used for certification, including information on income, nutrition risk eligibility and referrals
2) Program requirements
3) Nutrition education
4) All financial records

Definitions:
What is the WIC program?
(1) The WIC program in the state of Washington is administered by DOH.

(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, clients, persons acting on behalf of a client, 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 clients 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 checks or WIC food but who are not WIC clients.

Assurances/Certifications:
1. Computer Equipment Loaned by the DOH WIC Nutrition Program
   In order to perform WIC program activities, DOH requires computers and printers to be in local WIC clinics or to be transported to mobile clinics. This equipment (“Loaned Equipment”) is owned by DOH, and loaned to the local agency (LHJ). The Loaned Equipment is supported by DOH. This equipment shall be used for WIC business only or according to WIC Policy and Procedures.

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

   The LHJ agrees to:
   a. Defend, protect and hold harmless DOH 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.

   DOH 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 DOH), or
   3) Assertion of a lien against the LHJ's property.
c. Notify DOH immediately of any damage to Loaned Equipment.
d. Notify DOH prior to moving or replacing any Loaned Equipment.

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

2. Civil Rights Assurance
The LHJ shall perform all services and duties necessary to comply with federal law in accordance with the following Civil Rights Assurance:

a. “The LHJ 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 LHJ receives Federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this Contract.

b. “By accepting this assurance, the LHJ 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 LHJ, its successors, transferees, and assignees, as long as it receives assistance or retains possession of any assistance from DOH. The person or persons whose signatures appear on the contract are authorized to sign this assurance on behalf of the LHJ.”

3. 7CFR Parts 3016, 3017, 3018
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), 7CFR part 3016, the debarment and suspension requirements of 7CFR part 3017, if applicable, the lobbying restrictions of 7CFR part 3018, and FNS guidelines and instructions and shall provide on a timely basis to the state agency all required information regarding fiscal and program information.

Special Billing Requirements:
1. Definitions
   Contract Period: January 1, 2018 - December 31, 2020
   Contract Budget Period: The time period for which the funding is budgeted.
      • There are four federal budget periods
         January 1, 2018 through September 30, 2018;
         October 1, 2018 through September 30, 2019;
         October 1, 2019 through September 30, 2020;
         October 1, 2020 through December 31, 2020.

2. Billing Information
   a. Billings are submitted on an A19-1A form, which is coded and provided by DOH prior to each federal fiscal budget period. Submit summary level financial data to support each individual program billing.
   b. A19-1A forms are submitted monthly following the close of each calendar month or upon completion of services, before the end of the federal contract budget period.
   c. Funds are allocated by budget categories (refer to Chart of Accounts Program names) and by state and federal budget periods (refer to the allocation sheet).
   d. Expenses are incurred only during the budget period; no carry forward from previous time periods, or borrowing from future time periods is allowed. Advance payments are not allowed.
e. Payments for a budget period are limited to the amounts allocated for the budget period for each budget category.

f. Billings are based on actual costs, with back up documentation retained by the LHJ and available for inspection by DOH 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.

**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 the LHJ to have a single audit performed should LHJ spend $750,000 or more of federal grants or awards from all sources. The LHJ is a subrecipient of federal funds.

3) Staff must 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 clients. 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 clients.

**Special Requirements:**

<table>
<thead>
<tr>
<th>Contract Funding Period</th>
<th>Time Period Special Requirement Funds Available</th>
<th>Amount</th>
<th>Description of Special Requirement</th>
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<td>January 2018 - September 2018</td>
<td>January 2018 - September 2018</td>
<td>$12,291</td>
<td>Added in the USDA/WIC Breastfeeding Peer Counseling category to complete the requirements of operating a USDA Loving Support Breastfeeding Peer Counseling program.</td>
</tr>
</tbody>
</table>

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

**DOH Program Contact**
Kathi LLoyd, HSC3  
WIC Nutrition Program  
PO Box 47886, Olympia, WA 98504-7886  
Kathi.LLoyd@doh.wa.gov  
360-236-3965 or 1-800-841-1410 x 3965

**DOH Fiscal Contact**
Danielle VanDerhoof, Fiscal Analyst  
WIC Nutrition Program  
PO Box 47886, Olympia, WA 98504-7886  
Danielle.VanDerhoof@doh.wa.gov  
360-236-3676 or 1-800-841-1410 x 3676
Island County Public Health Department

Indirect Rate as of January 2018: 24%

<table>
<thead>
<tr>
<th>Chart of Accounts Program Title</th>
<th>Federal Award Identification #</th>
<th>Amend #</th>
<th>CFDA*</th>
<th>Revenue Code**</th>
<th>Statement of Work Funding Period</th>
<th>DOH Use Only Chart of Accounts Funding Period</th>
<th>Amount</th>
<th>Funding Period</th>
<th>Chart of Accounts Total</th>
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<td>N/A</td>
<td>10.557</td>
<td>333.10.55</td>
<td>01/01/18 09/30/18</td>
<td>10/01/17 09/30/18</td>
<td>$12,291</td>
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<td>$12,291</td>
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<tr>
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<td>N/A</td>
<td>10.557</td>
<td>333.10.55</td>
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<td>333.10.55</td>
<td>10/01/19 09/30/20</td>
<td>10/01/19 09/30/20</td>
<td>$212,960</td>
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<td>NGA Not Received</td>
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<td>10.557</td>
<td>333.10.55</td>
<td>10/01/18 09/30/19</td>
<td>10/01/18 09/30/19</td>
<td>$212,960</td>
<td>$212,960</td>
<td>$212,960</td>
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<td>NGA Not Received</td>
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<td>333.10.55</td>
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<td>$823,637</td>
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Total consideration: $823,637

GRAND TOTAL $823,637

**Catalog of Federal Domestic Assistance

**Federal revenue codes begin with "333". State revenue codes begin with "334".
<table>
<thead>
<tr>
<th>Chart of Accounts Program Title</th>
<th>BARS</th>
<th>DOH Federal Award Date</th>
<th>Total Amt Federal Award</th>
<th>Allocation Period Start Date</th>
<th>End Date</th>
<th>Contract Amt</th>
<th>CFDA</th>
<th>CFDA Program Title</th>
<th>Federal Agency Name</th>
<th>Federal Award Identification Number</th>
<th>Federal Grant Award Name</th>
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<td>Department of Agriculture Food and Nutrition Service</td>
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<td>5NH23IP000762-05-00</td>
<td>IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM</td>
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<td>IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM</td>
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<td>5NH23IP000762-05-00</td>
<td>IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM</td>
</tr>
<tr>
<td>FFY18 MCHBG LHJ CONTRACTS</td>
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</tbody>
</table>
Federal Funding Accountability and Transparency Act Data Collection Form

This contract is supported by federal funds that require compliance with the Federal Funding Accountability and Transparency Act. The purpose of the Transparency Act is to make information available online so the public can see how federal funds are spent. To comply with the act and be eligible to enter into this contract, your organization must have a Data Universal Numbering System (DUNS®) number. If you do not already have one, you may receive a DUNS® number free of charge by contacting Dun and Bradstreet at www.dnb.com. The Department of Health (DOH) also encourages registration with the System for Award Management (SAM) to reduce data entry by both DOH and your organization. You may register with SAM free of charge at federalcontractorregistry.com. Information about your organization and this contract will be reported by DOH to the federal government as required by P.L. 109-282. This information will then be made available to the public by the federal government on USASpending.gov.

**SUBRECIPIENT**

<table>
<thead>
<tr>
<th>1. Legal Name</th>
<th>2. DUNS Number</th>
</tr>
</thead>
</table>

3. Principle Place of Performance

<table>
<thead>
<tr>
<th>3a. City</th>
<th>3b. State</th>
</tr>
</thead>
<tbody>
<tr>
<td>3c. Zip+4</td>
<td>3d. Country</td>
</tr>
</tbody>
</table>

4. Are you registered in SAM? □ YES (skip to signature block. Sign, date and return) □ NO

5. In the preceding fiscal year did your organization:
   a. Receive 80% or more of annual gross revenue from federal contracts, subcontracts, grants, loans, subgrants, and/or cooperative agreements; **and**
   b. $25,000,000 or more in annual gross revenues from federal contracts, subcontracts, grants, loans, subgrants, and/or cooperative agreements; **and**
   c. The public does not have access to this information about the compensation of the senior executives of your organization through periodic reports filed under section 13(a) or 15(d) of the Securities and Exchange Act of 1934 (15 U.S.C. §§ 78m(a), 78o(d) or section 6104 of the Internal Revenue Code of 1986.

□ NO (skip to signature block. Sign, date and return)
□ YES (You must report the names and total compensation of the top 5 highly compensated officials of your organization).

<table>
<thead>
<tr>
<th>Name Of Official</th>
<th>Total Compensation</th>
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<tbody>
<tr>
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<td>2.</td>
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<td>4.</td>
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<td>5.</td>
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**Note:** “Total compensation” for purposes of this requirement generally means the cash and non-cash value earned by the executive during the past fiscal year and includes salary and bonus; awards of stock, stock options and stock appreciation rights; and other compensation such as severance and termination payments, and value of life insurance paid on behalf of the employee, and as otherwise provided by FFATA and applicable OMB guidance.

By signing this document, the Authorized Representative attests to the information.

<table>
<thead>
<tr>
<th>Signature of Authorized Representative</th>
<th>Print Name</th>
<th>Date</th>
</tr>
</thead>
</table>

The Department of Health will not endorse your sub-award until this form is completed and returned.
FOR DEPARTMENT OF HEALTH USE ONLY

DOH Contract Number
CLH18246

Sub-award Project Description (see instructions and example below)

Instructions for Sub-award Project Description:
In the first line of the description provide a title for the sub-award that captures the main purpose of the subrecipients work. Then, indicate the name of the subrecipient and provide a brief description that captures the overall purpose of the sub-award, how the funds will be used, and what will be accomplished.

Example of a Sub-award Project Description:
Increase Healthy Behaviors: Educational Services District XYZ will provide training and technical assistance to chemical dependency centers to assist the centers to integrate tobacco use into their existing addiction treatment programs. Funds will also be used to assist centers in creating tobacco free treatment environments.
THIS AMENDMENT TO THE CONTRACT is between the Washington State Health Care Authority and the party whose name appears below, and is effective as of the date set forth below.

<table>
<thead>
<tr>
<th>CONTRACTOR NAME</th>
<th>CONTRACTOR CONTACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Island County Health Department</td>
<td>Amber Jones</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CONTRACTOR ADDRESS</th>
<th>CONTRACTOR CONTACT EMAIL ADDRESS</th>
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<tbody>
<tr>
<td>P O Box 5000, Soupeville, WA  98239</td>
<td><a href="mailto:a.jones@co.island.wa.us">a.jones@co.island.wa.us</a></td>
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WHEREAS, HCA and Contractor previously entered into a Contract for utilization of dental services early in life, improved oral health, and Apple Health/Medicaid cost savings, and;

WHEREAS, HCA and Contractor wish to amend the Contract pursuant to Section 4 Consideration and Section 5 Term, and;

NOW THEREFORE, the parties agree the Contract is amended as follows:

1. Section 4. Special Terms and Conditions. Consideration. The consideration is increased by the same amount allocated from the previous contract period. Maximum consideration is hereby increased for this amendment by $9,550.


3. This Amendment will be effective January 1, 2018 (“Effective Date”).

4. All capitalized terms not otherwise defined herein have the meaning ascribed to them in the Contract.

5. All other terms and conditions of the Contract remain unchanged and in full force and effect.

The parties signing below warrant that they have read and understand this Amendment and have authority to execute the Amendment. This Amendment will be binding on HCA only upon signature by HCA.

<table>
<thead>
<tr>
<th>CONTRACTOR SIGNATURE</th>
<th>PRINTED NAME AND TITLE</th>
<th>DATE SIGNED</th>
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<table>
<thead>
<tr>
<th>HCA SIGNATURE</th>
<th>PRINTED NAME AND TITLE</th>
<th>DATE SIGNED</th>
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<tbody>
<tr>
<td></td>
<td>James W. Gayton</td>
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</tr>
<tr>
<td></td>
<td>Contracts Administrator</td>
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