

SKAMANIA COUNTY BOARD OF HEALTH

Agenda for December 14, 2021

1:30 PM

Skamania County Courthouse
240 NW Vancouver Avenue, Room 18
Stevenson, WA 98648

Board of Health Meetings are open to public attendance with limited available seating to ensure physical distancing. Meeting attendees must wear a proper face covering even if vaccinated and maintain 6 feet of physical distance between other persons. Seating will be on a first come, first serve basis. If there is more attendance than seating, you will be asked to leave the Courthouse and phone in using ZOOM with the following numbers:

1 346 248 7799 US 1 312 626 6799 US
1 646 558 8656 US 1 669 900 9128 US
1 253 215 8782 US
1 301 715 8592 US

Meeting ID: 889 0632 1210 – New Meeting ID as of 6/01/2020

Join Zoom Meeting

- Audio only from your computer <https://us02web.zoom.us/j/88906321210>

WRITTEN PUBLIC COMMENTS ACCEPTED AND ENCOURAGED BY MONDAY PRECEDING THE MEETING AT NOON. If you wish written comments to be listed on the agenda, they need to be submitted to the Clerk of the Board by noon on Thursday preceding the Tuesday/Wednesday meeting, otherwise they will be held for the following Tuesday/Wednesday. slack@co.skamania.wa.us When a holiday falls on Monday, the regular meeting is held on Wednesday of that week.

Tuesday, December 14, 2021

**1:30 PM Call to Order
 Public Comment (3 minutes)**

Consent Agenda - Items will be considered and approved on a single motion. Any Commissioner may, by request, remove an item from the agenda prior to approval.

1. Minutes for meeting November 9, 2021
2. Contract Amendment #23 with Washington State Department of Health to amend Statement of Work for COVID-19 Coordinated Response and Foundational Public Health Services programs
3. Ratify Contract Amendment # 4 with Public Health Institute to amend Contract Tracing Contract related to positive COVID-19 cases, adding funding. Approved by BOCC on November 15, 2021
4. Ratify Interlocal Agreement with Tacoma-Pierce County Health Department for food handlers' card online training, testing and issuance

Community Health Report – Tamara Cissell, Deputy Health Director

Health Officer report - Dr. Steven Krager, Deputy Health Officer

Environmental Health report – Alan Peters, Community Development Director

Adjourn

MINUTES OF SKAMANIA COUNTY BOARD OF HEALTH MEETING

November 9, 2021

Skamania County Courthouse
240 NW Vancouver Avenue, Room 18
Stevenson, WA 98648

The meeting was called to order at 1:30 p.m. on November 9, 2021, at the Skamania County Courthouse, 1st Floor Meeting Room, 240 NW Vancouver Avenue in Stevenson, with Board of Health Commissioners, Robert Hamlin, Richard Mahar, and T.W. Lannen, Chair present.

There was no public comment.

Commissioner Hamlin moved, seconded by Commissioner Mahar and the motion carried unanimously to approve the Consent Agenda as follows:

1. Minutes for meeting October 12, 2021
2. Interlocal agreement with Clark County Public Health for Communicable Disease Prevention and Control and Healthy Communities/Chronic Disease Prevention services

Tamara Cissell, Deputy Health Director reported on vaccination/booster clinics, having 1,200 pediatric COVID vaccinations on-site, and replenishing their PPE stock.

Dr. Steven Krager, Deputy Health Officer reported on COVID death numbers being different then what the State lists, COVID booster shots, pediatric vaccinations, and influenza.

The meeting adjourned at 2:16 p.m.

Approved on the 14th day of December 2021.

SKAMANIA COUNTY BOARD OF HEALTH

Chair -- T.W. Lannen

Attest:


Commissioner – Richard Mahar

Clerk of the Board of Health – Debbie Slack

Commissioner – Robert Hamlin

Aye _____
Nay _____
Abstain _____
Absent _____

COMMISSIONER'S AGENDA ITEM COMMENTARY

| | | |
|--------------------------------|---|---|
| <u>SUBMITTED BY</u> | Community Health Department | Signature  |
| <u>AGENDA DATE</u> | BOH 12/14/2021 | |
| <u>SUBJECT</u> | Dept of Health Consolidated Contract 2018-2021 Amendment #23 | |
| <u>ACTION REQUESTED</u> | BOH Signature | |

SUMMARY/BACKGROUND

Amends Department of Health (DOH) Consolidated Contract for Fiscal Period 2018-2021 by the following:

Amends Statements of Work for COVID-19 Coordinated Response and Foundational Public Health Services programs.

FISCAL IMPACT

\$543,000

REVENUE CONTRACT

RECOMMENDATION

Sign Contract

LIST ATTACHMENTS

- Face Sheet
- Amendment #23
- Exhibit A: Statements of Work
- Exhibit B: Allocations
- Exhibit C: Schedule of Federal Awards

**SKAMANIA COUNTY PUBLIC HEALTH DEPARTMENT
2018 – 2021 CONSOLIDATED CONTRACT**

CONTRACT NUMBER: CLH18260

AMENDMENT NUMBER: 23

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

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

1. Exhibit A Statements of Work, attached and incorporated by this reference, are amended as follows:
 - Adds Statements of Work for the following programs:
 - Amends Statements of Work for the following programs:
 - COVID-19 Coordinated Response - Effective July 1, 2020
 - Foundational Public Health Services (FPHS) - Effective July 1, 2021
 - Deletes Statements of Work for the following programs:

2. Exhibit B-23 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-22 Allocations as follows:
 - Increase of **\$543,000** for a revised maximum consideration of **\$2,499,025**.
 - Decrease of _____ for a revised maximum consideration of _____.
 - No change in the maximum consideration of _____.
Exhibit B Allocations are attached only for informational purposes.

3. Exhibit C-20 Schedule of Federal Awards, attached and incorporated by this reference, amends and replaces Exhibit C-19.

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

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

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

SKAMANIA COUNTY PUBLIC HEALTH
DEPARTMENT

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

Date

Date

APPROVED AS TO FORM ONLY
Assistant Attorney General

2018-2021 CONSOLIDATED CONTRACT
EXHIBIT A
STATEMENTS OF WORK
TABLE OF CONTENTS

DOH Program Name or Title: COVID-19 Coordinated Response - Effective July 1, 2020 3
DOH Program Name or Title: Foundational Public Health Services (FPHS) - Effective July 1, 2021 16

Exhibit A
Statement of Work
Contract Term: 2018-2021

DOH Program Name or Title: COVID-19 Coordinated Response - Effective July 1, 2020

Local Health Jurisdiction Name: Skamania County Community Health Department
Contract Number: CLH18260

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

| | | |
|---|--|---|
| Funding Source | Federal Compliance (check if applicable) | Type of Payment |
| <input checked="" type="checkbox"/> Federal Subrecipient | <input checked="" type="checkbox"/> FFATA (Transparency Act) | <input checked="" type="checkbox"/> Reimbursement |
| <input type="checkbox"/> State <input type="checkbox"/> Other | <input type="checkbox"/> Research & Development | <input type="checkbox"/> Fixed Price |
| <input checked="" type="checkbox"/> Federal *Contractor | | |

Period of Performance: July 1, 2020 through December 31, 2021

Statement of Work Purpose: The purpose of this statement of work is to provide supplemental funding for the LHJ to ensure adequate culturally and linguistically responsive testing, investigation and contact tracing resources to limit the spread of COVID-19

NOTE: Pending execution of a new consolidated contract term or an extension to the 2018-2021 consolidated contracts which currently end December 31, 2021, DOH plans to continue the task activities and funding as noted in the task(s) below in a new or revised statement of work effective January 1, 2022.

Revision Purpose: The purpose of this revision is to add additional funding to FFY20 ELC EDE LHJ ALLOCATION, adjust the funding period for BITV-COVID ED LHJ ALLOCATION- CARES from 07/01/20-12/31/21 to 07/01/20-06/30/21, moving the remaining allocation of BITV-COVID ED LHJ ALLOCATION-CARES to FFY20 ELC EDE LHJ ALLOCATION, and update task language, DCHS-Task 1 & 2

| 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 |
|---|--------|-------------------|-------------------|-------------------------------|----------|-----------------------|---------------------|---------------------|
| | | | | Start Date | End Date | | | |
| BITV-COVID ED LHJ ALLOCATION-CARES | 21.019 | 333.21.01 | 1897129V | 07/01/20 | 06/30/21 | 65,268 | -48,671 | 16,597 |
| FEMA-75 COVID LHJ ALLOCATION | 97.036 | 333.97.03 | 1897129W | 07/01/20 | 12/30/20 | 0 | 0 | 0 |
| FFY21 COVID19 VACCINE SERVICES-CARES | 93.268 | 333.93.26 | 74310209 | 07/01/20 | 12/31/21 | 14,582 | 0 | 14,582 |
| FFY21 COVID GFS LHJ REGIONAL | N/A | 334.04.92 | 1897211G | 12/31/20 | 06/30/21 | 0 | 0 | 0 |
| FFY20 ELC EDE LHJ ALLOCATION | 93.323 | 333.93.32 | 1897120E | 01/15/21 | 12/31/21 | 201,918 | 198,671 | 400,589 |
| FFY19 ELC COVID ED LHJ ALLOCATION | 93.323 | 333.93.32 | 1897129G | 01/01/21 | 12/31/21 | 90,294 | 0 | 90,294 |
| *MASS VACCINATION FEMA 100% | 97.036 | 333.97.03 | 934V0200 | 01/21/21 | 12/31/21 | 0 | 0 | 0 |
| COVID 19 VACCINES | 93.268 | 333.93.26 | 74310229 | 07/01/20 | 12/31/21 | 359,803 | 0 | 359,803 |
| TOTALS | | | | | | 731,865 | 150,000 | 881,865 |

| Task Number | Task/Activity/Description | *May Support PHAB Standards/Measures | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|-------------|---|--------------------------------------|-----------------------|---------------------|-----------------------------------|
| | Participate in public health emergency preparedness and response activities for COVID-19. This may include surveillance, epidemiology, laboratory capacity, infection control, mitigation, communications and or other preparedness and response activities for COVID-19. | | | | |
| | Examples of key activities include: <ul style="list-style-type: none"> • Incident management for the response • Testing | | | | |

| Task Number | Task/Activity/Description | *May Support PHAB Standards/Measures | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|-------------|---|--------------------------------------|---|--|--|
| | <ul style="list-style-type: none"> Case Investigation/Contact Tracing Sustainable isolation and quarantine Care coordination Surge management Data reporting <p>NOTE: The purpose of this agreement is to supplement existing funds for local health jurisdictions to carry out surveillance, epidemiology, case investigations & contact tracing, laboratory capacity, infection control, mitigation, communications, community engagement, and other public health preparedness and response activities for COVID-19.</p> <p>DCHS COVID-19 Response - Tasks 1 and 2 – Unspent ELC funding can be carried forward into new contract term effective January 1, 2022.</p> | | | | |
| 1 | <p>Establish a budget plan and narrative to be submitted to the Department of Health (DOH) Contract Manager. DOH will send the "Budget narrative Template", "Budget Guidance" and any other applicable documents that may be identified.</p> <p>DOH does recognize the public health response goes beyond December 2021 and authorizes local health jurisdictions the ability to maximize funding streams available to them by using short term funding first to have longer term funding available to continue to support the local health jurisdiction response activities beyond December 2021 as applicable.</p> | | Submit the budget plan and narrative using the template provided. | Within 30 days of receiving any new award for DCHS COVID-19 Response tasks. | Reimbursement of actual costs incurred, not to exceed \$507,480 \$257,489 total. \$16,597 \$65,268 BITV-COVID ED LHJ ALLOCATION-CARES Funding (MI 1897129V) |
| 2 | <p>1) LHJ Active monitoring activities. In partnership with WA DOH and neighboring Tribes, the LHJ must ensure adequate culturally and linguistically responsive testing, investigation and contact tracing resources to limit the spread disease. LHJs must conduct the following activities in accordance with the guidance to be provided by DOH.</p> <p>a. Allocate enough funding to ensure the following Contact Tracing and Case Investigation Support: Hire a minimum of 1.0 data entry FTE to assure system requirements for task 2.1.a.</p> <p>i. Contact tracing</p> <p>1. Strive to maintain the capacity to surge a minimum of five (5) contact tracers for every 100,000 people in the jurisdiction, as needed, based on disease rates. DOH centralized investigations will count towards this minimum.</p> | | Data collected and reported into DOH systems daily. Enter all contact tracing data in CREST following guidance from-DOH. | Enter performance metrics daily into DOH identified systems Quarterly performance reporting updates | \$400,589 \$201,918 FFY20 ELC EDE LHJ ALLOCATION Funding (MI 1897120E) Funding end date 7/31/2023 \$90,294 FFY19 ELC COVID ED LHJ ALLOCATION Funding (MI 1897129G) Funding end date 10/18/2022 |

| Task Number | Task/Activity/Description | *May Support PHAB Standards/Measures | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|-------------|---|--------------------------------------|---|---------------------|-----------------------------------|
| | <p>2. Have staff that reflect the demographic makeup of the jurisdiction and who can provide culturally and linguistically competent and responsive services. In addition, or alternatively, enter into an agreement(s) with Tribal, community-based and/or culturally-specific organizations to provide such services. DOH centralized investigations will count towards this minimum.</p> <p>3. Ensure all contact tracing staff are trained in accordance with DOH investigative guidelines and data entry protocols.</p> <p>4. Coordinate with Tribal partners in conducting contact tracing for Tribal members.</p> <p>5. Ensure contact tracing and case investigations activities meet DOH case and Contact Tracing Metrics. (Metrics to be determined collaboratively by DOH, LHJs and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics.</p> <p>6. Perform daily monitoring for symptoms during quarantine period of contacts</p> <p>ii. Case investigation</p> <p>1. Strive to maintain the capacity to surge a minimum of five (5) case investigators and contact tracers for every 100,000 people in the jurisdiction, as needed, based on disease rates. DOH centralized investigation will count toward this minimum.</p> <p>2. Enter all case investigation and outbreak data in WDRS following DOH guidance.</p> <p>a. Strive to enter all case investigation and outbreak data into <i>CREST</i> as directed by DOH.</p> <p>b. Ensure all staff designated to utilize WDRS have access and are trained in the system.</p> | | <p>Enter all case investigation data in WDRS-following guidance from-DOH.</p> | | |

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| Task Number | Task/Activity/Description | *May Support PHAB Standards/Measures | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|-------------|--|--------------------------------------|---|---------------------|-----------------------------------|
| | <p>c. Include if new positive cases are tied to a known existing positive case or indicate community spread.</p> <p>d. Conduct case investigation and monitor outbreaks.</p> <p>e. Coordinate with Tribal partners in conducting case investigations for tribal members.</p> <p>3. Ensure contact tracing and case investigation activities meet DOH Case and Contact Tracing Metrics. (Metrics to be determined collaboratively by DOH, LHJs, and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics.</p> <p>b. Testing</p> <p>i. Work with partners and Tribes to ensure testing is available to every person within the jurisdiction meeting current DOH criteria for testing and other local testing needs.</p> <p>ii. Work with partners and Tribes to ensure testing is provided in a culturally and linguistically responsive manner with an emphasis on making testing available to disproportionately impacted communities and as a part of the jurisdiction's contact tracing strategy.</p> <p>iii. Maintain a current list of entities providing COVID-19 testing and at what volume. Provide reports to DOH on testing locations and volume as requested.</p> <p>c. Surveillance FTE support at a minimum of .5 FTE Epidemiologist to support daily reporting needs below.</p> <p>i. Ensure all COVID positive lab test results from LHJ are entered in to WDRS by 1) entering data directly in to WDRS, 2) sending test results to DOH to enter, or 3) working with DOH and entities conducting tests to implement an electronic method for test result submission.</p> | | <p>Maintain a current list of entities providing COVID-19 testing and at what volume. Provide reports to DOH Contract manager on testing locations and volume as requested.</p> <p><i>Ensure all COVID positive test results are entered into WDRS within 2 days of receipt</i></p> | | |

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| | <ul style="list-style-type: none"> ii. Maintain records of all COVID negative lab test results from the LHJ and enter into WDRS when resources permit or send test results to DOH. iii. Collaborate with Tribes to ensure Tribal entities with appropriate public health authority have read/write access to WDRS and CREST to ensure that all COVID lab results from their jurisdictions are entered in WDRS or shared with the LHJ or DOH for entry. d. Tribal Support. Ensure alignment of contact tracing and support for patients and family by coordinating with local tribes if a patient identified as American Indian/Alaska Native and/or a member of a WA tribe. e. Support Infection Prevention and control for high-risk populations <ul style="list-style-type: none"> i. Migrant and seasonal farmworker support. Partner with farmers, agriculture sector and farmworker service organizations to develop and execute plans for testing, quarantine and isolation, and social service needs for migrant and seasonal farmworkers. ii. Congregate care facilities: In collaboration with the state licensing agency (DSHS), support infection prevention assessments, testing, infection control and isolation and quarantine protocols in congregate care facilities. iii. High risk businesses or community-based operations. In collaboration with state licensing agencies and Labor and Industries, partner with food processing and manufacturing businesses to ensure adequate practices to prevent COVID-19 exposure, conduct testing and respond to outbreaks. iv. Healthcare: Support infection prevention and control assessments, testing, cohorting, and isolation procedures. Provide educational resources to a variety of healthcare setting | | <p>Quarterly performance updates related to culturally and linguistic competency and responsiveness, tribal support, infection prevention and control for high-risk populations, community education and regional active monitoring activities. Performance update should include status of all projects listed.</p> | | |

| Task Number | Task/Activity/Description | *May Support PHAB Standards/Measures | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
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| | <p>types (e.g., nursing homes, hospitals, dental, dialysis).</p> <p>v. Non-healthcare settings that house vulnerable populations: In collaboration with state corrections agency (DOC) and other state partners, support testing, infection control, isolation and quarantine and social services and wraparound supports for individuals living or temporarily residing in congregate living settings, including detention centers, prisons, jails, transition housing, homeless shelters, and other vulnerable populations.</p> <p>vi. Schools: In collaboration with OSPI and local health jurisdictions, support infection prevention and control and outbreak response in K-12 and university school settings.</p> <p>f. Ensure adequate resources are directed towards H2A housing facilities within communities, fishing industries and long-term care facilities to prevent and control disease transmission. Funds can be used to hire support staff, provide incentives or facility-based funding for onsite infection prevention efforts, etc.</p> <p>g. Community education. Work with Tribes and partners to provide culturally and linguistically responsive community outreach and education related to COVID-19.</p> <p>h. Establish sustainable isolation and quarantine measures. <ul style="list-style-type: none"> i. Have at least one (1) location identified and confirmed through contract/formal agreement that can support isolation and quarantine adequate to the population for your jurisdiction with the ability to expand; alternatively, establish with an adjacent jurisdiction a formal agreement to provide the isolation and quarantine capacity adequate to the population for your jurisdiction with the ability to expand. </p> | | <p>Quarterly performance updates to include name, address and capacity of identified location that can support isolation and quarantine, and confirmation of appropriate planning and coordination as required.</p> | | |

| Task Number | Task/Activity/Description | *May Support PHAB Standards/Measures | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
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| COVID-19 Vaccine Services - Task 3 – will be extended through June 30, 2022 in new contract term effective January 1, 2022. Any unspent funds may be carried forward. | | | | | |
| 3.A | <p>Identify activity/activities to support COVID vaccine response in your community, using the examples below as a guideline.</p> <p>Example 1: Develop and implement communication strategies with health care providers, community, and/or other partners to help build vaccine confidence broadly and among groups anticipated to receive early vaccination, as well as dispel vaccine misinformation. Document and provide a plan that shows the communication strategies used with health care providers and other partners and the locally identified population anticipated to reach.</p> <p>Example 2: Engage in other vaccination planning activities such as partnership development, provider education, vaccination point of dispensing (POD) planning, tabletop exercises, engagement with communities, leaders, non-traditional provider, or vulnerable populations to develop strategies to ensure equitable access to vaccination services</p> | | Report census numbers to include historic total by month and monthly total for current quarter to date. | January 31, Annually | Reimbursement of actual costs incurred, not to exceed: \$14,582 FFY21 COVID19 VACCINE SERVICES-CARES (MI 74310209) \$354,803 COVID19 VACCINES (MI 74310229) |
| 3.B | Implement the communication strategies or other activities, working with health care providers and other partners to reach the locally identified population, support providers in vaccination plans, and support equitable access to vaccination services. | | Mid-term written report describing activity/activities and progress made to-date and strategies used (template to be provided) | June 30, Annually | |
| 3.C | Catalog activities and conduct an evaluation of the strategies used | | Final written report, showing the strategies used and the final | December 31, Annually | |

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| Task Number | Task/Activity/Description | *May Support PHAB Standards/Measures | Deliverables/Outcomes (template to be provided) | Due Date/Time Frame | Payment Information and/or Amount |
|---|---|--------------------------------------|--|--|---|
| 3.D | Perform as a vaccine depot to provide COVID vaccine. Duties include ordering and redistributing of COVID-19 vaccine, assure storage space for minimum order sizes, initiating transfer in the Immunization Information System (IIS), coordinate with providers for physical transport of doses, and maintaining inventory of COVID vaccine by manufacturer. | | <p>progress of the reach (template to be provided)</p> <p>a) Complete a redistribution agreement. b) Report inventory reconciliation page. c) Report lost (expired, spoiled, wasted) vaccine to the IIS. d) Report transfer doses in the IIS and Vaccinetinder. e) Monitor and maintain vaccine temperature logs from digital data logger and/or the temperature monitoring system for a minimum of 3 years.</p> | <p>a) Complete by August 1, 2021. b) Reconcile and submit inventory once monthly in the IIS. c) Report lost vaccine within 72 hours in the IIS. d) Update within 24 hours from when transfers occur. e) Download as needed (retain temperature data on site for 3 years)</p> | 3.D Vaccine Depot: \$5,000 COVID 19 VACCINES Funding (MI 74310229) 07/01/21-12/31/21 |
| <p>Regional Incident Management Team (RIMT) Mass Vaccination Clinics -- Task 4</p> | | | | | |
| | <p>*NOTE: Task 4 activities for Mass Vaccination Clinics in this statement of work are NOT CONSIDERED SUBRECIPIENT but are as a CONTRACTOR of DOH.</p> <p>DOH reimbursement provided for local mass vaccination clinic (see definition below) planning, implementation and operations in coordination between Unified Command and the Regional RIMT to administer the vaccine as efficiently, quickly, equitably, and safely in all regions of Washington State. State Supported, Regionally Coordinated, Locally Implemented.</p> <p>Definition: Mass vaccination clinics defined as those outside of the usual healthcare delivery method such as pop-up clinics, mobile clinics, non-clinical facility (fairgrounds, arenas, etc.).</p> | | | | <p>*Reimbursement of eligible costs.</p> <p>MASS VACCINATION FEMA 100% Funding (MI 934V0200)</p> <p>(See Program Specific Requirements for Mass Vaccination Task 4 below)</p> |

AMENDMENT #23

| Task Number | Task/Activity/Description | *May Support PHAB Standards/Measures | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
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| | <p>Leaders Intent about this work from DOH is included as an attachment.</p> <p>Guidance on vaccination protocols must be followed as provided by DOH and CDC.</p> | | | | |
| 4.A | <p>Local health jurisdiction (LHJ) will coordinate planning and implementation of mass vaccination clinics/sites and provided within the county(s) with a regional incident management team/organization as approved by DOH.</p> <p>Request for regional IMT should be submitted through the normal process through WebEOC.</p> <p>Local health jurisdiction is the coordinating agency for the mass vaccination plan within the county.</p> <p>Regional IMT will be under the delegation authority of DOH and they are to provide support and coordination for all efforts around vaccine planning, resource support and general guidance and information sharing in order to regionally coordinate efforts. Local jurisdictions will maintain all decisional authority around vaccination planning and execution within their jurisdiction/district.</p> <p>Provide any information as requested by the regional IMT.</p> | | <p>Submit to DOH a mass vaccination plan including:</p> <ul style="list-style-type: none"> • type of site, • site locations, through input, • considerations made to ensure equity to historically marginalized populations, and to the extent possible a regional map of sites/locations. | <p>Within 30 days of contract amendment execution.</p> | |
| 4.B | <p>Funding for eligible Mass Vaccination activities are reimbursed on actual costs as outlined in the DOH guidance to provide the services and to carry out the mission. Funding will be dependent on full participation in the LHJ and IMT processes and all documentation will be required to be provided to fully close out funding requests by the end of the mission period of performance.</p> <p>Allowable costs include expenses such as facility rentals, staff to conduct planning, management, support and operation of the site, medical personnel for vaccinations, site security personnel, wrap around services for staff (meals, travel, lodging), equipment (which must be pre-approved by IMT/DOH if it exceeds \$5,000 each), supplies for vaccinations and site operation. LHJs should provide</p> | | <p>Submit estimated budget for the mass vaccination plan.</p> <p>Monthly Cost Summary Spreadsheet to the IMT/IMO by the fifth of the following month.</p> | <p>Within 30 days of contract amendment execution.</p> <p>Monthly</p> | |

| Task Number | Task/Activity/Description | *May Support PHAB Standards/Measures | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|-------------|--|--------------------------------------|---|---------------------|-----------------------------------|
| 4.C | <p>narratives to help assist IMT and DOH finance know what expenditures were necessary to carry out the mission.</p> <p>Vaccination data – will be maintained according to current state and federal requirements.</p> <p>Vaccine Registration Systems – If a local jurisdiction or region does not have a registration system(s) the include internet based, phone option and other methods to ensure equitable registration, the state PrepMod system and tools will be available for use.</p> | | <p>Submission of vaccine use into WA IIS database within 24hrs of use.</p> <p>Jurisdiction/Regions will ensure a fair and equitable process for registration of eligible Washingtonians across all available modalities.</p> | Daily | |
| 4.D | <p>Regularly report on vaccinations sites and operational activities (number of vaccinations, personnel to operate the site, challenges, successes to share for learning across the public health system).</p> | | <p>Provide monthly situation report to IMT/IMO on status of implementation of mass vaccination plan, or more frequently if that is the LHJ procedure.</p> <p>Sites operating for the time period, vaccines administered by site for the time period, estimated costs for the time period, any challenges/successes of note, including assistance requested.</p> | Monthly | |

***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 USA Spending.gov by DOH as required by P.L. 109-282.

Program Specific Requirements/Narrative

| | |
|---|--|
| <p>DCHS COVID-19 Response - Tasks 1 and 2</p> | <p>BITV-COVID ED LHJ ALLOCATION-CARES</p> |
| | <p>FFY19 ELC COVID ED LHJ ALLOCATION</p> |
| | <p>FFY20 ELC EDE LHJ ALLOCATION</p> |
| | <p>FFY21 COVID 19 VACCINE SERVICES-CARES</p> |
| <p>COVID-19 Vaccine Services - Task 3</p> | <p>COVID 19 VACCINES</p> |
| | <p>MASS VACCINATION FEMA 100%</p> |
| <p>Regional Incident Management Team (IMT) Mass Vaccination Clinics – Task 4</p> | |

DCHS COVID-19 Response - Tasks 1 and 2

Restrictions on Funds: Indirects are NOT allowable for CARES funding from September 2, 2020 forward – LHJ can charge administrative activities as direct costs but not incur indirects from September 2, 2020 through ~~June 30~~ ~~December 31~~, 2021 for activities funded with CARES funds (COVID LOCAL CARES - COVID LHJ OFM ALLOCATION-CARES, BITV-COVID ED LHJ ALLOCATION-CARES, FEMA-75 COVID LHJ ALLOCATION)

- o Since the federal guidance was not updated until September 2, 2020, DOH understands that indirects could be charged from March–August, 2020.

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

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

COVID-19 Vaccine Services - Task 3 – allowable activities <https://www.doh.wa.gov/Portals/1/Documents/9240/AllowableUseFedOpsFunds.pdf>

Mass Vaccination – Task 4

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

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

Non-mass vaccination efforts are not allowable through this funding stream.
 Duplication of billing (sending request for reimbursement) to entities outside of this agreement is prohibited.
 Indirect rates are not applicable to these funds.

Special References (RCWs, WACs, etc.)
 County Health Emergency Documentation if applicable

Monitoring Visits (frequency, type):

Occasional visits from DOH or IMT/IMO personnel for the purpose of monitoring and surveillance of mass vaccination activities may be expected.

Definitions

Mass vaccination clinic are those outside of the usual healthcare delivery methods such as pop-up clinics, mobile clinics, non-clinical facility clinics (i.e., fairgrounds, arenas, etc.).

Special Billing Requirements:

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

Special Instructions:

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

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

Eligible costs from the timeframe of January 21, 2021 through December 31, 2021 include facility rentals, medical and support staff for planning, management, support, and operations; as well as wrap-around services for staff (i.e., meals, travel, lodging). Regular and overtime pay associated with this project is allowable for all staff working under this project and must be billed as a direct charge; timesheets are required documentation and must be available upon request by DOH. Indirect rates are not applicable to these funds. Eligible equipment includes facility infection control measures, personal protective equipment (PPE), storage equipment, coolers, freezers, temperature monitoring devices, portable vaccine units for transportation, supplies such as emergency medical care needs that may arise in the administration of the vaccine), containers for medical waste, as well as proper storage as needed for canisters of liquid nitrogen or dry ice. Eligible equipment purchase costs should not exceed \$5,000 per piece. Equipment over \$5,000 a piece must be preapproved by the IMT and should be leased rather than purchased. Any diversion from the list of pre-approved expenses will require a narrative on the purchase rationale and will be subject to IMT approval prior to reimbursement. Timesheets are required documentation for all activities related to this project. Staff time-in / time-out must be recorded, as well as a brief description of their activities. A general description of activities is acceptable for those working at the vaccine site; more detailed/specific description is required for those not working at the vaccine site.

DOH Program Contact

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DOH BITV-COVID ED LHJ Allocation-CARES and DOH ELC Allocation Fiscal Contact (Tasks 1 and 2)

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DOH COVID19 Vaccine Services Program Contacts (Task 3)

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DOH General Mass Vaccination Program and Fiscal Contact (Task 4)

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Exhibit A
Statement of Work
Contract Term: 2018-2021

DOH Program Name or Title: Foundational Public Health Services (FPHS) - Effective July 1, 2021

Local Health Jurisdiction Name: Skamania County Community Health Department
Contract Number: CLH18260

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

Period of Performance: July 1, 2021 through December 31, 2021

| | | |
|---|--|---|
| Funding Source <input type="checkbox"/> Federal <Select One> <input checked="" type="checkbox"/> State <input type="checkbox"/> Other | Federal Compliance (check if applicable) <input type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development | Type of Payment <input type="checkbox"/> Reimbursement <input checked="" type="checkbox"/> Periodic Distribution |
|---|--|---|

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

The FPHS Steering Committee with input from FPHS Subject Matter Expert (SME) Workgroups and the Tribal Technical Workgroup is the decision making body for FPHS funds. For the 2021 – 2023 biennium, the Steering Committee is using an iterative approach to decision making. Determining investments first for SFY22 (July 1, 2021 – June 30, 2022), then for SFY23 (July 1, 2022 – June 30, 2023). This means that additional tasks and/or funds may be added to an LUJ’s FPHS SOW as these decisions are made. These funds are to be used as directed and allocated by the FPHS Steering Committee. As the global COVID-19 pandemic and the public health response to it continues and begins to abate, these FPHS funds can be braided with and used to supplement other short-term pandemic response funding as needed for FPHS activities during this period of performance (07/01/21 12/31/21). Responding to pandemics, epidemics and public health emergencies are foundational services of the governmental public health system.

Note:

The total biennial funding allocation is for the period of July 1, 2021 through June 30, 2023. 2021-2023 biennial funding allocations will be divided into four six-month lump sum amounts that will be disbursed at the beginning of each six month period as follows: July 1, 2021; January 1, 2022; July 1, 2022; January 1, 2023. Each year, the July payment will be disbursed upon completion of the FPHS Annual Report.

The disbursement of funds scheduled for January 1, 2022, July 1, 2022 and January 1, 2023 and deliverable due dates after December 31, 2021 are included in this statement of work for informational purposes only and will be carried forward into a new statement of work in the new consolidated contract term beginning January 1, 2022.

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

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

2021-2023 Biennium:

SFY22 (July 1, 2021-June 30, 2022)

SFY23 (July 1, 2022-June 30, 2023)

Revision Purpose: The purpose of this revision is to revise language and add funding and tasks for FFY22.

AMENDMENT #23

| Chart of Accounts Program Name or Title | | CFDA # | BARS Revenue Code | Master Index Code | Funding Period (LHJ Use Only) Start Date End Date | | Current Consideration | Change Increase (+) | Total Consideration |
|---|--|--------|-------------------|-------------------|--|----------|-----------------------|---------------------|---------------------|
| FPHS-LHL-PROVISO (YR1) | | N/A | 336.04.25 | 99202111 | 07/01/21 | 12/31/21 | 100,000 | 393,000 | 493,000 |
| Note: Total Consideration is for SFY22 (07/01/21-06/30/22). | | | | | | | | | |
| TOTALS | | | | | | | 100,000 | 393,000 | 493,000 |

| BARS Expenditure Code 562.xx | FPHS | Tasks / Activities / Short Description | | Funds to provide FPHS in: | | SFY22 | SFY23 | 21-23 BIENNium | |
|---------------------------------|--------------------------------|--|---|---------------------------|--|---------|------------------|------------------|------------------|
| | | Your jurisdiction | Other jurisdictions | | | | | | |
| 10-17, 20, 21, 23-29, 40-53, 93 | All - CD, EPH, CCC, Assessment | | Reinforcing Capacity (Assessment, CD, EPH, CCC) | X | | 166,000 | 166,000 | 332,000 | |
| 10 | Assessment | | CHA/CHIP | X | | 30,000 | 30,000 | 60,000 | |
| 20, 21, 23-29, 93 | CD | | Communicable Disease (CD) | X | | 132,000 | 132,000 | 264,000 | |
| 40-53, 93 | EPH | | Environmental Public Health (EPH) | X | | 165,000 | 165,000 | 330,000 | |
| TOTAL | | | | | | | \$493,000 | \$493,000 | \$986,000 |

| Task Number | Task/Activity/Description | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|-------------|---|--|---------------------|--|
| 0 | FOUNDATIONAL PUBLIC HEALTH FUNDING – ALL | <p>In coordination with FPHS Steering Committee and Subject Matter Expert (SME) workgroups:</p> <ul style="list-style-type: none"> Increase delivery of FPHS services in each jurisdiction and statewide as measured via through FPHS annual reporting indicators, from all agencies receiving FPHS funds, metrics and other data compiled and analyzed by contractors, DOH and Subject Matter Expert (SME) Workgroups. All of which is included as part of Results are published in the annual FPHS Investment Report. FPHS indicator metrics are available here. Routine reporting of spending and spending projections. Process and reporting template TBD and provided by the FPHS Steering Committee via DOH. FPHS annual reporting (template provided by the FPHS Steering Committee via DOH) | | <p>Funds are available beginning July 1, 2021. Half of the annual allocation will be disbursed each July upon receipt-completion of the FPHS Annual Report for the previous state fiscal year and the second half will be disbursed each January.</p> <p>Note: Funds must be spent in the state fiscal year (SFY) in which they are appropriated by the legislature, allocated, and disbursed. Unspent funds must be returned to DOH by July 15th of each year for return to OFM.</p> |

| Task Number | Task/Activity/Description | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|-------------|--|---|---------------------------------------|-----------------------------------|
| 1. | <p>Reinforcing Capacity <i>These funds are to each LHJ to deliver FPHS in their own jurisdiction – In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, provide FPHS Communicable Disease (CD), Environmental Public Health (EPH), Assessment (Surveillance & Epidemiology) and/ or any or all of the other FPHS Cross-cutting Capabilities (CCC) as defined in the most current version of the FPHS definitions.</i></p> | <ul style="list-style-type: none"> o For SFY22 (07/01/21–06/30/22) <i>FPHS annual reporting template provided by DGH</i> o For SFY23 (07/01/22–06/30/23) | <p>By 08/15/22</p> <p>By 08/15/23</p> | |
| 2. | <p>Assessment – CHA/CHIP (FPHS definitions G.3) <i>These funds are to each LHJ to deliver FPHS in their own jurisdiction – In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, conduct and complete a comprehensive community health assessment and identify health priorities arising from that assessment, including analysis of health disparities and the social determinants of health as defined in the most current version of the FPHS definitions.</i></p> <ul style="list-style-type: none"> • Conduct a local and/or regional comprehensive community health assessment (CHA) every three to five years in conjunction with community partners. • Develop a local and/or regional community health improvement plan (CHIP) in conjunction with community partners. <p><i>These funds can be used for any CHA/CHIP activity or service (e.g., data analysis, focus groups, report writing, process facilitation) and may be used to contract with other LHJs for staff time or services.</i></p> | | | |
| 3. | <p>Communicable Disease (CD) (FPHS definitions C.1, 2, 3, 4, 6) <i>These funds are to each LHJ to deliver FPHS in their own jurisdiction – In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, provide FPHS CD services as defined in the most current version of the FPHS definitions. These funds can (and actually are intended to) be braided with temporary pandemic emergency funding such that when those funds run out, FPHS funds can be used to retain staff there were hired with pandemic emergency funds if the jurisdictions desires to retain them and/or to hire additional staff if needed, and/or contract with other LHJs for staff time or services for delivering FPHS CD. As the pandemic response wains, staff funded with FPHS funds are to shift focus to providing some or all of the FPHS CD services. This includes maintaining access to and use of data systems created during the pandemic and others under development and case investigation and contact tracing for sexually transmitted disease and other communicable and notifiable conditions within the mandated timeframes. Emphasis should be placed on addressing syphilis and gonorrhea cases.</i></p> <ol style="list-style-type: none"> 1. Provide timely, statewide, locally relevant and accurate information statewide and to communities on prevention and control of communicable disease and other notifiable conditions. 2. Identify statewide and local community assets for the control of communicable diseases and other notifiable conditions, develop and implement a prioritized control plan addressing communicable diseases and other notifiable conditions and seek resources and advocate for high priority prevention and control policies and initiatives regarding communicable diseases and other notifiable conditions. 3. Promote immunization through evidence-based strategies and collaboration with schools, health care providers and other community partners to increase immunization rates. 4. Ensure disease surveillance, investigation and control for communicable disease and notifiable conditions in accordance with local, state and federal mandates and guidelines. | | | |

4. **Environmental Public Health (EPH) (FPHS definitions B.3 & 4)**

These funds are to each LHJ to deliver services in their own jurisdiction. In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, these funds are for each LHJ to deliver FPHS EPH services for which fees cannot be charged in their jurisdiction as defined in the most current version of the FPHS definitions and specifically for:

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

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

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

| Task Number | Task/Activity/Description | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|-------------|---|-----------------------|---------------------|-----------------------------------|
| | <ul style="list-style-type: none"> ○ <i>Focus on existing elementary schools for first phase of inspections program</i> <ul style="list-style-type: none"> ▪ <i>Indoor Air Quality</i> ▪ <i>Classroom</i> ▪ <i>Healthy cleaning and indoor environments</i> ▪ <i>Playground</i> ▪ <i>Drinking water (lead)</i> | | | |

Program Specific Requirements/Narrative

Special References (RCWs, WACs, etc)

Link to RCW 43.70.512 – RCW 43.70.512: Public health system—Foundational public health services—Intent. (wa.gov)
 Link to RCW 43.70.515 – RCW 43.70.515: Foundational public health services—Funding. (wa.gov)

FPHS Definitions

<https://wsalphoto.box.com/s/qb6ss10mxbrajx0fla742lw6zcfzohk>

All FPHS Resources

www.doh.wa.gov/fphs or www.doh.wa.gov | Powered by Box

Special Instructions

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

336.04.24 – County Public Health Assistance

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

336.04.25 – Foundational Public Health Services

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

Public Health Budgeting, Accounting and Reporting System (BARS) Resources

www.doh.wa.gov/hifunding

Deliverables are to be submitted to Marie Flake at marie.flake@doh.wa.gov

DOH Program Contact

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Exhibit A, Statements of Work
 Revised as of September 15, 2021

Skamania County Community Health Department
EXHIBIT B-23
ALLOCATIONS
 Contract Term: 2018-2021

Contract Number: CLH18260
 Date: September 15, 2021

Indirect Rate as of January 2018 through December 2019: 11%
 Indirect Rate as of January 2020 through December 2023: 12%

| Chart of Accounts Program Title | Federal Award Identification # | Amend # | CFDA* | BARS Revenue Code** | Statement of Work | | DOH Use Only | | Amount | Funding Period Sub Total | Chart of Accounts Total |
|---|--------------------------------|--------------------|---------------|---------------------|-------------------|-----------------|-----------------|-----------------|-------------------|--------------------------|-------------------------|
| | | | | | Start Date | End Date | Start Date | End Date | | | |
| FFY21 USDA WIC Program Mgmt CSS | 217WAWA7W1003 | Amd 18 | 10.557 | 333.10.55 | 10/01/20 | 09/30/21 | 10/01/20 | 09/30/21 | \$1,400 | \$1,400 | \$69,030 |
| FFY21 USDA WIC Program Mgmt CSS | 217WAWA7W1003 | Amd 14 | 10.557 | 333.10.55 | 10/01/20 | 12/31/20 | 10/01/20 | 12/31/20 | (\$9,250) | \$0 | |
| FFY21 USDA WIC Program Mgmt CSS | 217WAWA7W1003 | Amd 6 | 10.557 | 333.10.55 | 10/01/20 | 12/31/20 | 10/01/20 | 12/31/20 | (\$135) | | |
| FFY21 USDA WIC Program Mgmt CSS | 217WAWA7W1003 | N/A | 10.557 | 333.10.55 | 10/01/20 | 12/31/20 | 10/01/20 | 12/31/20 | \$9,385 | | |
| FFY20 USDA WIC Program Mgmt CSS | 207WAWA7W1003 | Amd 14 | 10.557 | 333.10.55 | 10/01/19 | 09/30/20 | 10/01/19 | 09/30/20 | (\$37,000) | \$0 | |
| FFY20 USDA WIC Program Mgmt CSS | 207WAWA7W1003 | Amd 6 | 10.557 | 333.10.55 | 10/01/19 | 09/30/20 | 10/01/19 | 09/30/20 | (\$540) | | |
| FFY20 USDA WIC Program Mgmt CSS | 207WAWA7W1003 | N/A | 10.557 | 333.10.55 | 10/01/19 | 09/30/20 | 10/01/19 | 09/30/20 | \$37,540 | | |
| FFY19 CSS USDA WIC Program Mgmt | 187WAWA7W1003 | Amd 6 | 10.557 | 333.10.55 | 10/01/18 | 09/30/19 | 10/01/18 | 09/30/19 | (\$4,155) | \$36,475 | |
| FFY19 CSS USDA WIC Program Mgmt | 187WAWA7W1003 | Amd 5 | 10.557 | 333.10.55 | 10/01/18 | 09/30/19 | 10/01/18 | 09/30/19 | \$3,090 | | |
| FFY19 CSS USDA WIC Program Mgmt | 187WAWA7W1003 | N/A | 10.557 | 333.10.55 | 10/01/18 | 09/30/19 | 10/01/18 | 09/30/19 | \$37,540 | | |
| FFY18 CSS USDA WIC Program Mgmt | 187WAWA7W1003 | Amd 2 | 10.557 | 333.10.55 | 01/01/18 | 09/30/18 | 10/01/17 | 09/30/18 | \$3,000 | \$31,155 | |
| FFY18 CSS USDA WIC Program Mgmt | 187WAWA7W1003 | N/A | 10.557 | 333.10.55 | 01/01/18 | 09/30/18 | 10/01/17 | 09/30/18 | \$28,155 | | |
| FFY21 USDA WIC Client Services | 202121W100347 | Amd 22 | 10.557 | 333.10.55 | 10/01/20 | 09/30/21 | 10/01/20 | 09/30/21 | \$592 | \$592 | \$592 |
| FFY22 USDA WIC Client Svs Contracts | 202222W100347 | Amd 18 | 10.557 | 333.10.55 | 10/01/21 | 12/31/21 | 10/01/21 | 12/31/21 | \$9,340 | \$9,340 | \$86,090 |
| FFY21 USDA WIC Client Svs Contracts | 217WAWA7W1003 | Amd 18 | 10.557 | 333.10.55 | 10/01/20 | 09/30/21 | 10/01/20 | 09/30/21 | \$28,430 | \$37,680 | |
| FFY21 USDA WIC Client Svs Contracts | 217WAWA7W1003 | Amd 14, 18 | 10.557 | 333.10.55 | 10/01/20 | 09/30/21 | 10/01/20 | 09/30/21 | \$9,250 | | |
| FFY20 USDA WIC Client Svs Contracts | 207WAWA7W1003 | Amd 14 | 10.557 | 333.10.55 | 10/01/19 | 09/30/20 | 10/01/19 | 09/30/20 | \$520 | \$39,070 | |
| FFY20 USDA WIC Client Svs Contracts | 207WAWA7W1003 | Amd 14 | 10.557 | 333.10.55 | 10/01/19 | 09/30/20 | 10/01/19 | 09/30/20 | \$37,000 | | |
| FFY20 USDA WIC Client Svs Contracts | 207WAWA7W1003 | Amd 11 | 10.557 | 333.10.55 | 10/01/19 | 09/30/20 | 10/01/19 | 09/30/20 | \$1,550 | | |
| FFY20 USDA WIC Nutrition Ed | 207WAWA7W1003 | Amd 16 | 10.557 | 333.10.55 | 10/01/19 | 09/30/20 | 10/01/19 | 09/30/20 | \$740 | \$740 | \$740 |
| FFY20 USDA FMNP Prog Mgmt | 207WAWA7Y8604 | Amd 15 | 10.572 | 333.10.57 | 10/01/19 | 09/30/20 | 10/01/19 | 09/30/20 | \$159 | \$159 | \$491 |
| FFY19 CSS USDA FMNP Prog Mgmt | 197WAWA7Y8604 | Amd 8 | 10.572 | 333.10.57 | 01/01/19 | 09/30/19 | 10/01/18 | 09/30/19 | \$166 | \$166 | |
| FFY18 CSS USDA FMNP Prog Mgmt | 187WAWA7Y8604 | Amd 2 | 10.572 | 333.10.57 | 01/01/18 | 09/30/18 | 10/01/17 | 09/30/18 | \$166 | \$166 | |
| FFY16 Cascades USDA WIC Prog Mgmt-MIS | 16157WA6W522 | Amd 6, 8 | 10.578 | 333.10.57 | 10/01/18 | 09/30/19 | 03/11/16 | 09/30/19 | \$1,095 | \$1,095 | \$1,095 |
| BITV-COVID Ed LHJ Allocation-CARES | NGA Not Received | Amd 23 | 21.019 | 333.21.01 | 07/01/20 | 06/30/21 | 07/01/20 | 06/30/21 | (\$48,671) | \$16,597 | \$16,597 |
| BITV-COVID Ed LHJ Allocation-CARES | NGA Not Received | Amd 18, 21, 23 | 21.019 | 333.21.01 | 07/01/20 | 06/30/21 | 07/01/20 | 06/30/21 | \$48,951 | | |
| BITV-COVID Ed LHJ Allocation-CARES | NGA Not Received | Amd 16, 18, 21, 23 | 21.019 | 333.21.01 | 07/01/20 | 06/30/21 | 07/01/20 | 06/30/21 | \$16,317 | | |
| COVID LHJ OFM Allocation-CARES | NGA Not Received | Amd 16, 18, 21 | 21.019 | 333.21.01 | 03/01/20 | 12/31/21 | 03/01/20 | 12/31/21 | \$241,200 | \$241,200 | \$241,200 |
| FFY18 EPR PHEP BP1 Supp LHJ Funding | NU90TP921889-01 | Amd 5 | 93.069 | 333.93.06 | 07/01/18 | 06/30/19 | 07/01/18 | 06/30/19 | \$358 | \$19,894 | \$19,894 |
| FFY18 EPR PHEP BP1 Supp LHJ Funding | NU90TP921889-01 | Amd 4 | 93.069 | 333.93.06 | 07/01/18 | 06/30/19 | 07/01/18 | 06/30/19 | \$19,536 | | |
| FFY17 EPR PHEP BP1 LHJ Funding | NU90TP921889-01 | Amd 2 | 93.069 | 333.93.06 | 01/01/18 | 06/30/18 | 07/01/17 | 07/02/18 | \$371 | \$8,401 | \$8,401 |
| FFY17 EPR PHEP BP1 LHJ Funding | NU90TP921889-01 | N/A | 93.069 | 333.93.06 | 01/01/18 | 06/30/18 | 07/01/17 | 07/02/18 | \$8,030 | | |

Indirect Rate as of January 2018 through December 2019: 11%
 Indirect Rate as of January 2020 through December 2023: 12%

| Chart of Accounts Program Title | Federal Award Identification # | Amend # | CFDA* Code** | BARS Revenue | | Statement of Work | | DOH Use Only | | Amount | Funding Period Sub Total | Chart of Accounts Total |
|--|--------------------------------|----------------|--------------|--------------|----------|-------------------|----------|----------------|-------------|-----------|--------------------------|-------------------------|
| | | | | Revenue | Code** | Start Date | End Date | Funding Period | Start Date | | | |
| FFY21 PHEP BP3 LHJ Funding | NU90TP922043 | Amd 22 | 93-069 | 333-93-06 | 07/01/21 | 12/31/21 | 07/01/21 | 06/30/22 | \$11,936 | \$11,936 | \$51,724 | |
| FFY20 PHEP BP2 LHJ Funding | NU90TP922043 | Amd 17 | 93-069 | 333-93-06 | 07/01/20 | 06/30/21 | 07/01/20 | 06/30/21 | \$7,958 | \$19,894 | | |
| FFY20 PHEP BP2 LHJ Funding | NU90TP922043 | Amd 16, 17 | 93-069 | 333-93-06 | 07/01/20 | 06/30/21 | 07/01/20 | 06/30/21 | \$11,936 | \$19,894 | | |
| FFY19 PHEP BP1 LHJ Funding | NU90TP922043 | Amd 9 | 93-069 | 333-93-06 | 07/01/19 | 06/30/20 | 07/01/19 | 06/30/20 | \$19,894 | \$19,894 | | |
| FFY19 Family Planning Title X | FPHPA006462 | Amd 8, 11 | 93-217 | 333-93-21 | 04/01/19 | 06/30/19 | 04/01/19 | 03/31/20 | \$4,164 | \$4,164 | \$11,556 | |
| FFY18 Family Planning Title X | FPHPA006359 | Amd 4 | 93-217 | 333-93-21 | 09/01/18 | 03/31/19 | 09/01/18 | 08/31/19 | \$2,910 | \$2,910 | | |
| FFY17 Family Planning Title X | FPHPA106286 | Amd 3 | 93-217 | 333-93-21 | 01/01/18 | 08/31/18 | 04/01/17 | 08/31/18 | \$3,350 | \$4,482 | | |
| FFY17 Family Planning Title X | FPHPA106286 | N/A, Amd 3 | 93-217 | 333-93-21 | 01/01/18 | 08/31/18 | 04/01/17 | 03/31/18 | \$1,132 | \$1,132 | | |
| FFY17 317 Ops | 5NH23IP000762-05-00 | N/A | 93-268 | 333-93-26 | 01/01/18 | 06/30/18 | 04/01/17 | 06/30/18 | \$144 | \$144 | \$144 | |
| FFY17 AFIX | 5NH23IP000762-05-00 | N/A | 93-268 | 333-93-26 | 01/01/18 | 06/30/18 | 04/01/17 | 06/30/18 | \$553 | \$553 | \$553 | |
| FFY21 COVID19 Vaccine Services-CARES | NH23IP922619 | Amd 21 | 93-268 | 333-93-26 | 07/01/20 | 12/31/21 | 07/01/20 | 12/31/21 | (\$354,803) | \$14,582 | \$14,582 | |
| FFY21 COVID19 Vaccine Services-CARES | NH23IP922619 | Amd 19 | 93-268 | 333-93-26 | 07/01/20 | 12/31/21 | 07/01/20 | 12/31/21 | \$354,803 | \$14,582 | | |
| FFY21 COVID19 Vaccine Services-CARES | NH23IP922619 | Amd 18, 19 | 93-268 | 333-93-26 | 07/01/20 | 12/31/21 | 07/01/20 | 12/31/21 | \$14,582 | \$14,582 | | |
| COVID19 Vaccines | NH23IP922619 | Amd 22 | 93-268 | 333-93-26 | 07/01/20 | 12/31/21 | 07/01/20 | 12/31/21 | \$5,000 | \$359,803 | \$359,803 | |
| COVID19 Vaccines | NH23IP922619 | Amd 21 | 93-268 | 333-93-26 | 07/01/20 | 12/31/21 | 07/01/20 | 12/31/21 | \$354,803 | \$359,803 | | |
| FFY17 Increasing Immunization Rates | NGA Not Received | Amd 5 | 93-268 | 333-93-26 | 07/01/18 | 06/30/19 | 07/01/18 | 06/30/19 | (\$5,600) | \$0 | \$0 | |
| FFY17 Increasing Immunization Rates | NGA Not Received | Amd 3, 4 | 93-268 | 333-93-26 | 07/01/18 | 06/30/19 | 07/01/18 | 06/30/19 | \$5,600 | \$0 | | |
| FFY17 VFC Ops | 5NH23IP000762-05-00 | N/A | 93-268 | 333-93-26 | 01/01/18 | 06/30/18 | 04/01/17 | 06/30/18 | \$186 | \$186 | \$186 | |
| FFY19 COVID CARES | NU50CK000515 | Amd 15, 18 | 93-323 | 333-93-32 | 06/01/20 | 12/31/21 | 06/01/20 | 12/31/21 | \$27,894 | \$27,894 | \$27,894 | |
| FFY19 ELC COVID Ed LHJ Allocation | NU50CK000515 | Amd 19 | 93-323 | 333-93-32 | 01/01/21 | 12/31/21 | 01/01/21 | 12/31/21 | \$90,294 | \$90,294 | \$90,294 | |
| FFY20 ELC EDE LHJ Allocation | NU50CK000515 | Amd 23 | 93-323 | 333-93-32 | 01/15/21 | 12/31/21 | 01/15/21 | 12/31/21 | \$198,671 | \$400,589 | \$400,589 | |
| FFY20 ELC EDE LHJ Allocation | NU50CK000515 | Amd 19 | 93-323 | 333-93-32 | 01/15/21 | 12/31/21 | 01/15/21 | 12/31/21 | \$201,918 | \$400,589 | | |
| FFY20 CDC COVID-19 Crisis Resp LHJ-Tribe | NU90TP922069 | Amd 13, 18, 19 | 93-354 | 333-93-35 | 01/20/20 | 12/31/21 | 01/01/20 | 12/31/21 | \$78,522 | \$78,522 | \$78,522 | |
| FFY22 MCHBG LHJ Contracts | B0445251 | Amd 22 | 93-994 | 333-93-99 | 10/01/21 | 12/31/21 | 10/01/21 | 09/30/22 | \$7,388 | \$7,388 | \$118,564 | |
| FFY21 MCHBG LHJ Contracts | B0440169 | Amd 17 | 93-994 | 333-93-99 | 10/01/20 | 09/30/21 | 10/01/20 | 09/30/21 | \$29,551 | \$29,551 | | |
| FFY20 MCHBG LHJ Contracts | B04MC32578 | Amd 10 | 93-994 | 333-93-99 | 10/01/19 | 09/30/20 | 10/01/19 | 09/30/20 | \$29,551 | \$29,551 | | |
| FFY19 MCHBG LHJ Contracts | B04MC32578 | Amd 4 | 93-994 | 333-93-99 | 10/01/18 | 09/30/19 | 10/01/18 | 09/30/19 | \$29,551 | \$29,551 | | |
| FFY18 MCHBG LHJ Contracts | B04MC31524 | Amd 2 | 93-994 | 333-93-99 | 01/01/18 | 09/30/18 | 10/01/17 | 09/30/18 | \$359 | \$359 | | |
| FFY18 MCHBG LHJ Contracts | B04MC31524 | N/A | 93-994 | 333-93-99 | 01/01/18 | 09/30/18 | 10/01/17 | 09/30/18 | \$22,164 | \$22,164 | | |

EXHIBIT B-23
ALLOCATIONS

Contract Number: CLH18260
Date: September 15, 2021

Contract Term: 2018-2021

Indirect Rate as of January 2018 through December 2019: 11%
Indirect Rate as of January 2020 through December 2023: 12%

Skamania County Community Health Department

| Chart of Accounts Program Title | Federal Award Identification # | Amend # | CFDA* | BARS Revenue Code** | Statement of Work | | DOH Use Only | | Amount | Funding Period Sub Total | Chart of Accounts Total |
|---|--------------------------------|---------------|------------|---------------------|---------------------------|-------------------------|---|---|------------------|--------------------------|-------------------------|
| | | | | | Funding Period Start Date | Funding Period End Date | Chart of Accounts Funding Period Start Date | Chart of Accounts Funding Period End Date | | | |
| FEMA-75 COVID LHJ Allocation | | Amd 18 | 97.036 | 333.97.03 | 07/01/20 | 12/30/20 | 07/01/20 | 12/30/20 | (\$48,951) | \$0 | \$0 |
| FEMA-75 COVID LHJ Allocation | | Amd 16 | 97.036 | 333.97.03 | 07/01/20 | 12/30/20 | 07/01/20 | 12/30/20 | \$48,951 | | |
| SFY22 Family Planning Cost Share | | Amd 21 | N/A | 334.04.91 | 07/01/21 | 12/31/21 | 07/01/21 | 12/31/21 | \$13,389 | \$13,389 | \$77,146 |
| SFY21 Family Planning Cost Share | | Amd 20 | N/A | 334.04.91 | 07/01/20 | 06/30/21 | 07/01/19 | 06/30/21 | \$166 | \$14,351 | |
| SFY21 Family Planning Cost Share | | Amd 18 | N/A | 334.04.91 | 07/01/20 | 06/30/21 | 07/01/19 | 06/30/21 | \$6,600 | | |
| SFY21 Family Planning Cost Share | | Amd 16, 18 | N/A | 334.04.91 | 07/01/20 | 06/30/21 | 07/01/19 | 06/30/21 | \$7,585 | | |
| SFY20 Family Planning Cost Share | | Amd 16 | N/A | 334.04.91 | 12/01/19 | 06/30/20 | 07/01/19 | 06/30/21 | (\$7,585) | \$8,849 | |
| SFY20 Family Planning Cost Share | | Amd 11, 16 | N/A | 334.04.91 | 12/01/19 | 06/30/20 | 07/01/19 | 06/30/21 | \$16,434 | | |
| SFY20 Family Planning Cost Share | | Amd 15 | N/A | 334.04.91 | 12/01/19 | 06/30/20 | 07/01/19 | 06/30/21 | \$11,780 | \$11,780 | |
| SFY20 Family Planning Cost Share | | Amd 8, 9, 11 | N/A | 334.04.91 | 07/01/19 | 11/30/19 | 07/01/19 | 08/31/19 | \$5,704 | \$7,195 | |
| SFY20 Family Planning Cost Share | | Amd 4, 9, 11 | N/A | 334.04.91 | 07/01/19 | 11/30/19 | 07/01/19 | 08/31/19 | \$1,491 | | |
| SFY19 Family Planning Cost Share | | Amd 7 | N/A | 334.04.91 | 09/01/18 | 03/31/19 | 07/01/18 | 06/30/19 | \$822 | \$822 | |
| SFY19 Family Planning Cost Share | | Amd 8 | N/A | 334.04.91 | 09/01/18 | 06/30/19 | 07/01/18 | 06/30/19 | \$219 | \$7,675 | |
| SFY19 Family Planning Cost Share | | Amd 4 | N/A | 334.04.91 | 09/01/18 | 06/30/19 | 07/01/18 | 06/30/19 | \$7,456 | | |
| SFY19 Family Planning Cost Share | | Amd 3 | N/A | 334.04.91 | 07/01/18 | 08/31/18 | 07/01/18 | 06/30/19 | \$4,018 | \$4,018 | |
| SFY18 Family Planning Cost Share | | Amd 1 | N/A | 334.04.91 | 01/01/18 | 06/30/18 | 07/01/17 | 06/30/18 | \$6,038 | \$9,067 | |
| SFY18 Family Planning Cost Share | | N/A, Amd 1 | N/A | 334.04.91 | 01/01/18 | 06/30/18 | 07/01/17 | 06/30/18 | \$3,029 | | |
| FFY22 GFS FMNP Program Mgmt | | Amd 22 | N/A | 334.04.91 | 07/01/21 | 12/31/21 | 07/01/21 | 06/30/22 | \$160 | \$160 | \$160 |
| FY20/21 COVID-19 Disaster Response Acct | | Amd 13, 18 | N/A | 334.04.92 | 01/20/20 | 06/30/21 | 01/01/20 | 06/30/21 | \$71,478 | \$71,478 | \$71,478 |
| FFY21 COVID GFS LHJ Regional | | Amd 19 | N/A | 334.04.92 | 12/31/20 | 06/30/21 | 12/31/20 | 06/30/21 | (\$125,000) | \$0 | \$0 |
| FFY21 COVID GFS LHJ Regional | | Amd 18 | N/A | 334.04.92 | 12/31/20 | 06/30/21 | 12/31/20 | 06/30/21 | \$125,000 | | |
| SFY2 Lead Environments of Children | | Amd 8 | N/A | 334.04.93 | 07/01/18 | 06/30/19 | 07/01/18 | 06/30/19 | (\$1,500) | \$0 | \$1,500 |
| SFY2 Lead Environments of Children | | Amd 4 | N/A | 334.04.93 | 07/01/18 | 06/30/19 | 07/01/18 | 06/30/19 | \$1,500 | | |
| SFY1 Lead Environments of Children | | Amd 1 | N/A | 334.04.93 | 01/01/18 | 06/30/18 | 07/01/17 | 06/30/18 | \$1,500 | \$1,500 | |
| FPHS-LHJ-Proviso (YR1) | | Amd 23 | N/A | 336.04.25 | 07/01/21 | 12/31/21 | 07/01/21 | 06/30/23 | \$393,000 | \$493,000 | \$735,000 |
| FPHS-LHJ-Proviso (YR1) | | Amd 22 | N/A | 336.04.25 | 07/01/21 | 12/31/21 | 07/01/21 | 06/30/23 | \$100,000 | | |
| FPHS Funding for LHJs | | Amd 16, 18 | N/A | 336.04.25 | 07/01/20 | 06/30/21 | 07/01/19 | 06/30/21 | \$58,000 | \$100,000 | |
| FPHS Funding for LHJs | | Amd 10, 18 | N/A | 336.04.25 | 07/01/20 | 06/30/21 | 07/01/19 | 06/30/21 | \$42,000 | | |
| FPHS Funding for LHJs | | Amd 16 | N/A | 336.04.25 | 07/01/19 | 06/30/20 | 07/01/19 | 06/30/21 | \$58,000 | \$100,000 | |
| FPHS Funding for LHJs | | Amd 10 | N/A | 336.04.25 | 07/01/19 | 06/30/20 | 07/01/19 | 06/30/21 | \$42,000 | | |
| FPHS Funding for LHJs Dir | | Amd 3 | N/A | 336.04.25 | 07/01/18 | 06/30/19 | 07/01/17 | 06/30/19 | \$42,000 | \$42,000 | |
| YR 20 SRF - Local Asst (15%) (FS) SS | | Amd 3 | N/A | 346.26.64 | 01/01/18 | 12/31/18 | 07/01/15 | 12/31/18 | (\$3,600) | \$0 | \$0 |
| YR 20 SRF - Local Asst (15%) (FS) SS | | N/A, Amd 3 | N/A | 346.26.64 | 01/01/18 | 12/31/18 | 07/01/15 | 12/31/18 | \$3,600 | | |

Indirect Rate as of January 2018 through December 2019: 11%
 Indirect Rate as of January 2020 through December 2023: 12%

| Chart of Accounts Program Title | Federal Award Identification # | Amend # | CFDA* | BARS Revenue Code** | Statement of Work | | DOH Use Only | | Amount | Funding Period Sub Total | Chart of Accounts Total |
|---|--------------------------------|------------------|-------|---------------------|-------------------|----------|----------------|----------|-----------|--------------------------|-------------------------|
| | | | | | Start Date | End Date | Funding Period | End Date | | | |
| YR 21 SRF - Local Asst (15%) (FS) SS | | Amd 10 | N/A | 346.26.64 | 01/01/18 | 06/30/19 | 07/01/17 | 06/30/19 | (\$1,400) | \$3,000 | \$3,000 |
| YR 21 SRF - Local Asst (15%) (FS) SS | | Amd 6, 10 | N/A | 346.26.66 | 01/01/18 | 06/30/19 | 07/01/17 | 06/30/19 | \$800 | | \$800 |
| YR 21 SRF - Local Asst (15%) (FS) SS | | Amd 3, 10 | N/A | 346.26.66 | 01/01/18 | 06/30/19 | 07/01/17 | 06/30/19 | \$3,600 | | \$3,600 |
| YR 22 SRF - Local Asst (15%) (FO-SW) SS | | Amd 21 | N/A | 346.26.64 | 01/01/19 | 12/31/20 | 01/01/19 | 06/30/21 | (\$1,400) | \$800 | \$800 |
| YR 22 SRF - Local Asst (15%) (FO-SW) SS | | Amd 11 | N/A | 346.26.64 | 01/01/19 | 12/31/20 | 01/01/19 | 06/30/21 | \$1,400 | | \$1,400 |
| YR 22 SRF - Local Asst (15%) (FO-SW) SS | | Amd 10, 11 | N/A | 346.26.64 | 01/01/19 | 12/31/20 | 01/01/19 | 06/30/21 | \$800 | | \$800 |
| YR 23 SRF - Local Asst (15%) (FO-SW) SS | | Amd 21 | N/A | 346.26.64 | 01/01/21 | 12/31/21 | 09/01/20 | 12/31/21 | \$1,400 | \$1,400 | \$1,400 |
| Sanitary Survey Fees (FO-SW) SS State | | Amd 11, 21 | N/A | 346.26.65 | 01/01/18 | 12/31/21 | 07/01/17 | 12/31/21 | \$1,400 | \$5,200 | \$5,200 |
| Sanitary Survey Fees (FO-SW) SS State | | Amd 10, 21 | N/A | 346.26.65 | 01/01/18 | 12/31/21 | 07/01/17 | 12/31/21 | (\$600) | | |
| Sanitary Survey Fees (FO-SW) SS State | | Amd 6, 11, 21 | N/A | 346.26.65 | 01/01/18 | 12/31/21 | 07/01/17 | 12/31/21 | \$800 | | \$800 |
| Sanitary Survey Fees (FO-SW) SS-State | | Amd 3, 6, 11, 21 | N/A | 346.26.65 | 01/01/18 | 12/31/21 | 07/01/17 | 12/31/21 | \$3,600 | | \$3,600 |
| YR 20 SRF - Local Asst (15%) (FS) TA | | Amd 3 | N/A | 346.26.66 | 01/01/18 | 12/31/18 | 07/01/15 | 12/31/18 | (\$2,000) | \$0 | \$0 |
| YR 20 SRF - Local Asst (15%) (FS) TA | | N/A, Amd 3 | N/A | 346.26.66 | 01/01/18 | 12/31/18 | 07/01/15 | 12/31/18 | \$2,000 | | \$2,000 |
| YR 21 SRF - Local Asst (15%) (FS) TA | | Amd 10 | N/A | 346.26.66 | 01/01/18 | 06/30/19 | 07/01/17 | 06/30/19 | (\$4,000) | \$0 | \$0 |
| YR 21 SRF - Local Asst (15%) (FS) TA | | Amd 6, 10 | N/A | 346.26.66 | 01/01/18 | 06/30/19 | 07/01/17 | 06/30/19 | \$2,000 | | \$2,000 |
| YR 21 SRF - Local Asst (15%) (FS) TA | | Amd 3, 10 | N/A | 346.26.66 | 01/01/18 | 06/30/19 | 07/01/17 | 06/30/19 | \$2,000 | | \$2,000 |
| YR 22 SRF - Local Asst (15%) (FO-SW) TA | | Amd 21 | N/A | 346.26.66 | 01/01/19 | 12/31/20 | 01/01/19 | 06/30/21 | (\$2,000) | \$0 | \$0 |
| YR 22 SRF - Local Asst (15%) (FO-SW) TA | | Amd 10, 11 | N/A | 346.26.66 | 01/01/19 | 12/31/20 | 01/01/19 | 06/30/21 | \$2,000 | | \$2,000 |
| YR 23 SRF - Local Asst (15%) (FO-SW) TA | | Amd 21 | N/A | 346.26.66 | 01/01/21 | 12/31/21 | 09/01/20 | 12/31/21 | \$2,000 | \$4,800 | \$4,800 |
| YR 23 SRF - Local Asst (15%) (FO-SW) TA | | Amd 19 | N/A | 346.26.66 | 01/01/21 | 12/31/21 | 09/01/20 | 12/31/21 | \$2,800 | | \$2,800 |

TOTAL \$2,499,025 \$2,499,025

Total consideration: \$1,956,025

GRAND TOTAL \$543,000

*Catalog of Federal Domestic Assistance \$2,499,025

**Federal revenue codes begin with "333". State revenue codes begin with "134".

GRAND TOTAL \$2,499,025
 Total Fed \$1,956,025
 Total State \$543,000

Exhibit C-20 Schedule of Federal Awards

AMENDMENT #23

Date: September 15, 2021

SKAMANIA COUNTY COMMUNITY HEALTH-SW001119-01
 CONTRACT CLH 6260 - Skamania County Community Health Department
 CONTRACT PERIOD: 01/01/2019-12/31/2021

| Chart of Accounts Program Title | BARS | DOH Federal Award Date | Total Amt Federal Award | Allocation Period Start Date | Allocation Period End Date | Contract Amt | CFDA | CFDA Program Title | Federal Agency Name | Federal Award Identification Number | Federal Grant Award Name |
|---------------------------------------|-----------|------------------------|-------------------------|------------------------------|----------------------------|--------------|--------|---|--|-------------------------------------|--|
| FFY22 USDA WIC CLIENT SVS CONTRACTS | 333.10.55 | 10/01/21 | \$13,695,670 | 10/01/21 | 12/31/21 | \$9,340 | 10.557 | Special Supplemental Nutrition Program for Women, Infants, and Children | Department of Agriculture Food and Nutrition Service | 202222W100347 | FFY22 WOMEN, INFANTS AND CHILDREN (WIC) ADMINISTRATION |
| FFY21 USDA WIC PROGRAM MGMT CSS | 333.10.55 | 10/01/20 | \$11,694,919 | 10/01/20 | 09/30/21 | \$1,400 | 10.557 | Special Supplemental Nutrition Program for Women, Infants, and Children | Department of Agriculture Food and Nutrition Service | 217WAWA7W1003 | WOMEN, INFANTS AND CHILDREN (2 YR) |
| FFY21 USDA WIC CLIENT SVS CONTRACTS | 333.10.55 | 10/01/20 | \$11,694,919 | 10/01/20 | 09/30/21 | \$37,680 | 10.557 | Special Supplemental Nutrition Program for Women, Infants, and Children | Department of Agriculture Food and Nutrition Service | 217WAWA7W1003 | WOMEN, INFANTS AND CHILDREN (2 YR) |
| FFY21 USDA WIC CLIENT SERVICES | 333.10.55 | 10/01/20 | \$39,563,948 | 10/01/20 | 09/30/21 | \$592 | 10.557 | Special Supplemental Nutrition Program for Women, Infants, and Children | Department of Agriculture Food and Nutrition Service | 202125W100347 | FFY21 WOMEN, INFANTS AND CHILDREN (WIC) ADMINISTRATION |
| FFY20 USDA WIC NUTRITION ED | 333.10.55 | 10/01/19 | \$6,161,312 | 10/01/19 | 09/30/20 | \$740 | 10.557 | Special Supplemental Nutrition Program for Women, Infants, and Children | Department of Agriculture Food and Nutrition Service | 207WAWA7W1003 | WOMEN, INFANTS AND CHILDREN |
| FFY20 USDA WIC CLIENT SVS CONTRACTS | 333.10.55 | 10/01/19 | \$6,161,312 | 10/01/19 | 09/30/20 | \$39,070 | 10.557 | Special Supplemental Nutrition Program for Women, Infants, and Children | Department of Agriculture Food and Nutrition Service | 207WAWA7W1003 | WOMEN, INFANTS AND CHILDREN |
| FFY19 CSS USDA WIC PROGRAM MGMT | 333.10.55 | 10/01/17 | \$40,101,357 | 10/01/18 | 09/30/19 | \$39,475 | 10.557 | Special Supplemental Nutrition Program for Women, Infants, and Children | Department of Agriculture Food and Nutrition Service | 187WAWA7W1003 | WOMEN, INFANTS AND CHILDREN |
| FFY18 CSS USDA WIC PROGRAM MGMT | 333.10.55 | 10/02/17 | \$27,576,710 | 10/01/18 | 09/30/18 | \$31,155 | 10.557 | Special Supplemental Nutrition Program for Women, Infants, and Children | Department of Agriculture Food and Nutrition Service | 187WAWA7W1003 | USDA-WIC ADMIN |
| FFY20 USDA FMNP PROG MGMT | 333.10.57 | 10/01/19 | \$129,791 | 10/01/19 | 09/30/20 | \$159 | 10.572 | WIC Farmers Market Nutrition Program (FMNIP) | Department of Agriculture-Food and Nutrition Service | 207WAWA7W8604 | COMMODITY ASSISTANCE PROGRAM |
| FFY19 CSS USDA FMNP PROG MGMT | 333.10.57 | 10/01/18 | \$130,973 | 10/01/19 | 09/30/19 | \$166 | 10.572 | WIC Farmers Market Nutrition Program (FMNIP) | Department of Agriculture-Food and Nutrition Service | 197WAWA7W8604 | COMMODITY ASSISTANCE PROGRAM |
| FFY18 CSS USDA FMNP PROG MGMT | 333.10.57 | 10/01/17 | \$66,117 | 10/01/18 | 09/30/18 | \$166 | 10.572 | WIC Farmers Market Nutrition Program (FMNIP) | Department of Agriculture-Food and Nutrition Service | 187WAWA7W8604 | COMMODITY ASSISTANCE PROGRAM |
| FFY16 CASCADES USDA WIC PROG MGMT-BBS | 333.10.57 | 09/11/16 | \$3,224,476 | 10/01/18 | 09/30/19 | \$1,095 | 10.578 | WIC Grants to States (WGS) | Department of Agriculture Food and Nutrition Service | 16157WAWA6W522 | WOMEN, INFANTS AND CHILDREN WIC STATE PROJECTS |
| COVID LHJ OFH ALLOCATION-CARES | 333.21.01 | N/A Not Received | N/A Not Received | 03/01/20 | 12/31/21 | \$241,200 | 21.919 | Coronavirus Relief Fund | Department of the Treasury | N/A Not Received | N/A Not Received |
| BFY-COVID ED LHJ ALLOCATION-CARES | 333.21.01 | N/A Not Received | N/A Not Received | 07/01/20 | 06/30/21 | \$16,597 | 21.919 | Coronavirus Relief Fund | Department of the Treasury | N/A Not Received | N/A Not Received |

Exhibit C-20 Schedule of Federal Awards

AMENDMENT #23

Date: September 15, 2021

SKAMANIA COUNTY COMMUNITY HEALTH-SWV001110-01
 CONTRACT CLH18260 - Skamania County Community Health Department
 CONTRACT PERIOD: 01/01/2018-12/31/2021

| Chart of Accounts Program Title | BARS | Federal Award Date | Total Federal Award | Allocation Period | | Contract Amt | CFDA | CFDA Program Title | Federal Agency Name | Federal Award Identification Number | Federal Grant Award Name |
|--------------------------------------|-----------|--------------------|---------------------|-------------------|----------|--------------|--------|--|--|-------------------------------------|---|
| | | | | Start Date | End Date | | | | | | |
| FFY21 PHEP BP3 LHJ FUNDING | 333.93.06 | 05/27/21 | \$11,574,298 | 07/01/21 | 12/31/21 | \$11,936 | 93.069 | Public Health Emergency Preparedness | Department of Health and Human Services Centers for Disease Control and Prevention | NJ90TP922043 | PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) COOPERATIVE AGREEMENT |
| FFY20 PHEP BP2 LHJ FUNDING | 333.93.06 | 05/12/20 | \$11,365,797 | 07/01/20 | 06/30/21 | \$19,894 | 93.069 | Public Health Emergency Preparedness | Department of Health and Human Services Centers for Disease Control and Prevention | NJ90TP922043 | PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) COOPERATIVE AGREEMENT |
| FFY19 PHEP BP1 LHJ FUNDING | 333.93.06 | 05/29/19 | \$11,307,904 | 07/01/19 | 06/30/20 | \$19,894 | 93.069 | Public Health Emergency Preparedness | Department of Health and Human Services Centers for Disease Control and Prevention | NJ90TP922043 | PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) COOPERATIVE AGREEMENT |
| FFY18 EPRI PHEP BP1 SHPP LHJ FUNDING | 333.93.06 | 08/01/18 | \$11,662,782 | 07/01/18 | 06/30/19 | \$19,894 | 93.069 | Public Health Emergency Preparedness | Department of Health and Human Services Centers for Disease Control and Prevention | NJ90TP921689-01 | HOSPITAL PREPAREDNESS PROGRAM AND PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT |
| FFY18 EPRI PHEP BP1 LHJ FUNDING | 333.93.06 | 07/18/17 | \$11,662,782 | 01/01/18 | 06/30/18 | \$8,401 | 93.069 | Public Health Emergency Preparedness | Department of Health and Human Services Centers for Disease Control and Prevention | NJ90TP921689-01 | HPP AND PHEP COOPERATIVE AGREEMENT |
| FFY19 FAMILY PLANNING TITLE X | 333.93.21 | 03/26/19 | \$4,100,000 | 04/01/19 | 06/30/19 | \$4,164 | 93.217 | Family Planning Services | Department of Health and Human Services Office of Population Affairs | FPHPA006462 | TITLE X FAMILY PLANNING SERVICES |
| FFY16 FAMILY PLANNING TITLE X | 333.93.21 | 09/12/16 | \$2,783,000 | 09/01/16 | 03/31/18 | \$2,919 | 93.217 | Family Planning Services | Department of Health and Human Services Office of Population Affairs | FPHPA006359 | TITLE X FAMILY PLANNING SERVICES |
| FFY17 FAMILY PLANNING TITLE X | 333.93.21 | 03/30/17 | \$1,940,000 | 01/01/18 | 08/31/18 | \$4,482 | 93.217 | Family Planning Services | Department of Health and Human Services Office of Population Affairs | FPHPA106295 | TITLE X FAMILY PLANNING SERVICES GRANT |
| FFY21 COVID19 VACCINE SERVICES-CARES | 333.93.26 | 01/15/21 | \$68,807,053 | 07/01/20 | 12/31/21 | \$14,582 | 93.268 | Immunization Cooperative Agreements | Department of Health and Human Services Centers for Disease Control and Prevention | NH23JP922619 | IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM |
| FFY17 VFC OPS | 333.93.26 | 03/03/17 | \$1,201,605 | 01/01/18 | 06/30/18 | \$186 | 93.268 | Immunization Cooperative Agreements | Department of Health and Human Services Centers for Disease Control and Prevention | 5NH23FP000782-05-00 | IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM |
| FFY17 AFIX | 333.93.26 | 03/03/17 | \$1,672,268 | 01/01/18 | 06/30/18 | \$553 | 93.268 | Immunization Cooperative Agreements | Department of Health and Human Services Centers for Disease Control and Prevention | 5NH23FP000782-05-00 | IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM |
| FFY17 317 OPS | 333.93.26 | 03/03/17 | \$575,969 | 01/01/18 | 06/30/18 | \$144 | 93.268 | Immunization Cooperative Agreements | Department of Health and Human Services Centers for Disease Control and Prevention | 5NH23FP000782-05-00 | IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM |
| COVID19 VACCINES | 333.93.26 | 03/31/21 | \$60,234,085 | 07/01/20 | 12/31/21 | \$359,803 | 93.268 | Immunization Cooperative Agreements | Department of Health and Human Services Centers for Disease Control and Prevention | NH23JP922619 | COVID-19 VACCINE GRANT AND VACCINES FOR CHILDREN |
| FFY20 ELC EDC LHJ ALLOCATION | 333.93.32 | 01/14/21 | \$438,390,928 | 01/15/21 | 12/31/21 | \$400,589 | 93.323 | Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) | Department of Health and Human Services Centers for Disease Control and Prevention | NJ90CX000515 | EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC) BUILDING AND STRENGTHENING EPIDEMIOLOGY, LABORATORY, AND |

Exhibit C-20 Schedule of Federal Awards

AMENDMENT #23

Date: September 15, 2021

SKAGHANIA COUNTY COMMUNITY HEALTH-SYVW9011130-01
 CONTRACT CLH18260 - Skagania County Community Health Department
 CONTRACT PERIOD: 01/01/2018-12/31/2021

| Chart of Accounts Program Title | BARS | DOH Federal Award Date | Total Amt Federal Award | Allocation Period | | Contract Amt | CFDA | CFDA Program Title | Federal Agency Name | Federal Award Identification Number | Federal Grant Award Name | |
|--|-----------|------------------------|-------------------------|-------------------|----------|--------------------|--------|---|--|-------------------------------------|--|--|
| | | | | Start Date | End Date | | | | | | | |
| FFY19 ELC COVID ED LHA ALLOCATION | 333.93.32 | 01/01/21 | \$177,231,546 | 01/01/21 | 12/31/21 | \$92,294 | 93.323 | Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)-Building & Strengthening Epidemiology, Laboratory & Epidemiology & Laboratory Capacity for Infectious Diseases (ELC)-Building & Strengthening Epidemiology, Laboratory & | Department of Health and Human Services Centers for Disease Control and Prevention | N056CK000515 | EPIDEMIOLOGY & LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)-BUILDING & STRENGTHENING EPIDEMIOLOGY, LABORATORY & | |
| FFY19 COVID CARES | 333.93.32 | 04/23/20 | \$22,581,756 | 06/01/20 | 12/31/21 | \$27,694 | 93.323 | Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)-Building & Strengthening Epidemiology, Laboratory and Public Health Emergency Response; Cooperative Agreement for Emergency Response; Public Health Crisis | Department of Health and Human Services Centers for Disease Control and Prevention | N056CK000515 | EPIDEMIOLOGY & LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)-BUILDING & STRENGTHENING EPIDEMIOLOGY, LABORATORY & | |
| FFY20 CDC COVID-19 CRISIS RESP LHA-TREBE | 333.93.35 | 03/16/20 | \$13,230,799 | 01/20/20 | 12/31/21 | \$76,522 | 93.354 | Public Health Emergency Response; Cooperative Agreement for Emergency Response; Public Health Crisis | Department of Health and Human Services Centers for Disease Control and Prevention | N090TP022069 | CDC COOPERATIVE AGREEMENT FOR EMERGENCY RESPONSE; PUBLIC HEALTH CRISIS RESPONSE CDC-RFA-TP18-1802 | |
| FFY23 MCHBG LHA CONTRACTS | 333.93.89 | 10/13/21 | \$1,555,601 | 10/01/21 | 12/31/21 | \$7,398 | 93.994 | Maternal and Child Health Services Block Grant to the States | Department of Health and Human Services Health Resources and Services Administration | 80445255 | MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT | |
| FFY21 MCHBG LHA CONTRACTS | 333.93.85 | 02/08/21 | \$2,662,201 | 10/01/20 | 09/30/21 | \$28,551 | 93.994 | Maternal and Child Health Services Block Grant to the States | Department of Health and Human Services Health Resources and Services Administration | 80440169 | MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT | |
| FFY20 MCHBG LHA CONTRACTS | 333.93.89 | 11/14/18 | \$2,225,977 | 10/01/19 | 09/30/20 | \$29,551 | 93.994 | Maternal and Child Health Services Block Grant to the States | Department of Health and Human Services Health Resources and Services Administration | 804MC32578 | MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT | |
| FFY19 MCHBG LHA CONTRACTS | 333.93.89 | 11/14/16 | \$2,225,977 | 10/01/18 | 09/30/19 | \$28,551 | 93.994 | Maternal and Child Health Services Block Grant to the States | Department of Health and Human Services Health Resources and Services Administration | 804MC32578 | MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT | |
| FFY18 MCHBG LHA CONTRACTS | 333.93.89 | 10/20/17 | \$1,650,528 | 01/01/18 | 09/30/18 | \$22,523 | 93.994 | Maternal and Child Health Services Block Grant to the States | Department of Health and Human Services Health Resources and Services Administration | 804MC31524 | MATERNAL AND CHILD HEALTH SERVICES | |
| TOTAL | | | | | | \$1,598,541 | | | | | | |

COUNTY FACE SHEET FOR CONTRACTS/LEASES/AGREEMENTS

- 1. Contract Number _____
- 2. Contract Status: (Check appropriate box) Original Renewal Amendment #4

3. Contractor Information: Contractor: Public Health Institute
 Attention: Rebecca Silva
 Title: Senior Director of Grants & Contracts
 Address: 555 12th Street, 10th Floor
 Address: Oakland, CA 94607-4046
 Email: Rebecca.silva@phi.org
 Phone: (510) 285-5561

4. Brief description of purpose of the contract and County’s contracted duties:
Amends Contact Tracing Contract related to positive COVID-19 cases to add funding.

5. Term of Contract: From: July 8, 2020 To: December 31, 2021

6. Contract Award Process: (Check appropriate box)
General Purchase of materials, equipment or supplies - RCW 36.32.245 & 39.04.190

- Exempt (Purchase is \$2,500 or less upon order of the Board of Commissioners)
- Informal Bid Process (Formal Quotes between \$2,500 and \$25,000)
- Formal Sealed Bid Process (Purchase is over \$25,000)
- This contract was awarded under RCW 39.29 or Skamania County Code _____. Please provide a summary of the competitive process by which this contract was awarded or the exemption and why it applies.

Public Works Construction & Improvements Projects – RCW 36.32.250 & 39.04.155 (Public Works, B&G, Capital Improvements Only)

- Small Works Roster (PW projects up to \$200,000)
- Exempt (PW projects less than \$10,000 upon order of the Board of Commissioners)

7. Amount Budgeted in Current Year: \$
Amount Not Budgeted in Current Year \$105,000 Source: Commerce/CARES/DOH
Amount Budgeted in Current Year \$125,000 Source: Commerce/CARES/DOH
Total Non-County Funds Committed: \$230,000
Total County Funds Committed: \$
TOTAL FUNDS COMMITTED: \$230,000


8. County Contact Person: Name: Allen Esaacson
 Title: Data & Finance Manager

9. Department Approval: 
 Department Head or Elected Official Signature

Special Comments: Please email signed contract to Rebecca Silva at the email listed above.

emailed 11/17/21

COMMISSIONER'S AGENDA ITEM COMMENTARY

| | | |
|--------------------------------|---------------------------------------|---|
| <u>SUBMITTED BY</u> | Community Health Department | Signature  |
| <u>AGENDA DATE</u> | BOCC 11/16/2021 RATIFY BOH 12/14/2021 | |
| <u>SUBJECT</u> | Public Health Institute | |
| <u>ACTION REQUESTED</u> | Signature | |

SUMMARY/BACKGROUND

Amends Contact Tracing Contract related to positive COVID-19 cases to add funding.

FISCAL IMPACT

Expense Contract increase of \$50,000. Total \$230,000

RECOMMENDATION

Sign

LIST ATTACHMENTS

Face Sheet
Contract
Exhibit A Scope of Work

**SKAMANIA COUNTY - PROFESSIONAL SERVICE CONTRACT
BETWEEN SKAMANIA COUNTY
AND Public Health Institute
(2020-2021)**

THIS CONTRACT, by and between **SKAMANIA COUNTY**, a municipal corporation, hereinafter referred to as the "**COUNTY**", and **PUBLIC HEALTH INSTITUTE**, hereinafter referred to as the "**CONTRACTOR**",

WITNESSETH THAT:

1. **AUTHORITY TO CONTRACT.**

- A. The **CONTRACTOR** covenants that the person whose signature appears as the representative of the **CONTRACTOR** on the signature page of this contract is the **CONTRACTOR'S** contracting officer and is authorized to sign on behalf of the **CONTRACTOR** and, in addition, to bind the **CONTRACTOR** in any subsequent dealings with regard to this contract, such as modifications, amendments, or change orders.
- B. The **CONTRACTOR** covenants that all licenses, tax I.D. Nos., bonds, industrial insurance accounts, or other matters required of the **CONTRACTOR** by federal, state or local governments in order to enable the **CONTRACTOR** to do the business contemplated by this agreement, have been acquired by the **CONTRACTOR** and are in full force and effect.
- C. The **COUNTY** represents that the services contracted for herein have been, or will be, appropriately budgeted for and that the **COUNTY** has the authority to contract for such services; that the contracting officer for the **COUNTY** is **Kirby Richards**; provided that changes that require a change in the amount of the contract price, shall require the approval of the Skamania County Board of Commissioners.

2. **INDEPENDENT CONTRACTOR STATUS.**

- A. The parties intend the **CONTRACTOR** to be an independent contractor, responsible for its own employer/employee benefits such as Workman's Compensation, Social Security, Unemployment, and health and welfare insurance. The parties agree that the **CONTRACTOR'S** personal labor is not the essence of this contract; that the **CONTRACTOR** will own and supply its own equipment necessary to perform this contract; that the **CONTRACTOR** will employ its own employees; and that, except as to defining the work and setting the parameters of the work, the **CONTRACTOR** shall be free from control or direction of the **COUNTY** over the performance of such services.
- B. The **CONTRACTOR** represents that it is capable of providing the services contracted for herein; that it is the usual business of the **CONTRACTOR** to provide

such services.

3. **SERVICES TO BE RENDERED.**

- A. The work to be performed by the **CONTRACTOR** consists of those services that are fully described in the contract documents marked Attachment A, B and C which have been initialed by the parties, attached hereto, and by this reference incorporated herein.
- B. Amendments, modifications, or change orders to this contract must be in writing and signed by the parties designated in this contract to be the contracting officers; provided that, change orders affecting the total contract price must be signed by the Board of Commissioners for the **COUNTY**.

4. **TERMS OF CONTRACT**

The contract shall begin on **7/8/2020** and terminate on ~~12/31/2020~~ **12/31/2021** ; PROVIDED that, in the event this contract is a personal services contract, not exempt under Chapter 39.29 of the Revised Code of Washington, this contract shall not be effective until the requirements of said statute have been met. The County may terminate this contract earlier upon five (5) days written notice.

5. **PAYMENTS FOR SERVICES.**

- A. The consideration for the services to be performed by the **CONTRACTOR** shall not exceed ~~\$30,000~~ ~~\$110,000~~ ~~\$135,000~~ ~~\$180,000~~ **\$230,000** including Washington sales tax, and shall be paid as outlined below or in Attachment A. The **CONTRACTOR** and **COUNTY** agree that additional funds may be needed depending on the number of COVID-19 cases in Skamania County and this ceiling amount may be amended in accordance with Section 3.A., Services to be Rendered, above as funds become available to the **COUNTY**.
- B. Payment on the account of the contracted services shall be made not more than monthly, based on submission by the **CONTRACTOR** to the **COUNTY'S** contracting officer of reports and invoices describing the services performed in sufficient detail to enable the **COUNTY'S** contracting officer to adequately determine the services for which payment is sought. Payment is due within thirty (30) days of submission of accepted detailed invoice.

6. **INSURANCE**

The **CONTRACTOR** agrees to save the **COUNTY** harmless from any liability that might otherwise attach to the **COUNTY** arising out of any activities of the **CONTRACTOR** pursuant to this contract and caused by the **CONTRACTOR'S** negligence. The **CONTRACTOR** further agrees to provide the **COUNTY** with evidence of general liability insurance naming the **COUNTY, its elected and appointed official, agents, employees, and**

volunteers as an additionally insured party in the amount of \$1,000,000.

7. **INDEMNIFICATION**

Contractor agrees to indemnify and hold harmless the County and its respective employees, agents, licensees and representatives, from and against any and all suits, claims, actions, losses, costs, penalties, damages, attorneys' fees and all other costs of defense of whatever kind or nature arising out of injuries of or death of any and all persons (including Subcontractors, agents, licensees or representatives, and any of their employees) or damage of or destruction of any property (including, without limitation, Owner's property, Contractor's property, or any Subcontractor's property) in any manner caused by, resulting from, incident to, connected with or arising out of Contractor's performance of its work, unless such injury, death or damage is caused by the sole negligence of the County.

In any situation where the damage, loss or injury is caused by the concurrent negligence of the Contractor or its agents and employees and the County or its agents or employees, then the Contractor expressly and specifically agrees to hold the County harmless to the extent of the Contractor or its agents' and employees' concurrent negligence.

The Contractor specifically waives its immunity as against Skamania County under Title 51 RCW (Industrial insurance statute), and acknowledges that this waiver of immunity was mutually and expressly negotiated by the parties, and expressly agrees that this promise to indemnify and hold harmless applies to all claims filed by and/or injuries to the Contractor's own employees against the County. This provision is not intended to benefit any third parties.

If a Subcontractor is used, then the Contractor shall ensure that all Subcontracts also provide that the Contractor or Subcontractor will waive its immunity under Title 51 RCW.

8. **GOVERNING LAW.**

The parties agree that this contract shall be governed by the laws of the State of Washington and that venue for any action pursuant to this contract, either interpreting the contract or enforcing a provision of the contract, or attempting to rescind or alter the contract, shall be brought in Skamania County, Washington; that the prevailing party shall be entitled to all costs, including reimbursement for attorney's fees at a reasonable rate.

9. **ASSIGNABILITY.**

The **CONTRACTOR** shall not assign nor transfer any interest in this contract.

10. **EQUAL EMPLOYMENT OPPORTUNITY.**

A. The **CONTRACTOR** shall not discriminate on the basis of race, color religion, sex, national origin, age, disability, marital or veteran status, political affiliation, or any other legally protected status in employment or the provision of services.

- B. The **CONTRACTOR** shall not, on the grounds of race, color, sex, religion, national origin, creed, age or disability:
- (1) Deny an individual any services or other benefits provided under this agreement.
 - (2) Provide any service(s) or other benefits to an individual which are different, or are provided in a different manner from those provided to others under this agreement.
 - (3) Subject an individual to unlawful segregation, separate treatment, or discriminatory treatment in any manner related to the receipt of any service(s), and/or the use of the contractor's facilities, or other benefits provided under this agreement.
 - (4) Deny any individual an opportunity to participate in any program provided by this agreement through the provision of services or otherwise, or afford an opportunity to do so which is different from that afforded others under this agreement. The **CONTRACTOR**, in determining (1) the types of services or other benefits to be provided or (2) the class of individuals to whom, or the situation in which, such services or other benefits will be provided or (3) the class of individuals to be afforded an opportunity to participate in any services or other benefits, will not utilize criteria or methods of administration which have the effect of subjecting individuals to discrimination because of their race, color, sex, religion, national origin, creed, age, or disability.

11. **NONCOMPLIANCE WITH NONDISCRIMINATION PLAN**

In the event of the **CONTRACTOR**'s noncompliance or refusal to comply with the above nondiscrimination plan, this contract may be rescinded, canceled or terminated in whole or in part, and the contractor may be declared ineligible for further contracts with the **COUNTY**. The **COUNTY** shall, however, give the **CONTRACTOR** reasonable time to cure this noncompliance. Any dispute may be resolved with the "Disputes" procedure set forth herein.

12. **DISPUTES**

Except as otherwise provided in this contract, when a genuine dispute arises over an issue related to the contract between the **COUNTY** and the **CONTRACTOR** and it cannot be resolved, either party may submit a request for a dispute resolution to the Board of County Commissioners. The parties agree that this resolution process shall precede any action in a judicial and quasi-judicial tribunal. A party's request for a dispute resolution must:

- a. be in writing; and
- b. state the disputed issues; and
- c. state the relative positions of the parties; and
- d. state the **CONTRACTOR'S** name, address, and the **COUNTY** department the contract is with; and
- e. be mailed to the Board of Commissioners, P.O. Box 790, Stevenson, Washington

98648, within thirty (30) calendar days after the party could reasonably be expected to have knowledge of the issue which he/she now disputes. This dispute resolution process constitutes the sole administrative remedy available under this contract.

13. **WAGE AND HOUR COMPLIANCE.**

The **CONTRACTOR** shall comply with all applicable federal and state provisions concerning wages and conditions of employment, fringe benefits, overtime, etc., as now exists or is hereafter enacted during the term of this contract, and shall save the County harmless from all actions, claims, demands, and expenses arising out of the **CONTRACTOR'S** failure to so comply.

14. **DEFAULT/TERMINATION/DAMAGES.**

- A. The parties hereto agree that **TIME IS OF THE ESSENCE** of this contract.
- B. If the **CONTRACTOR** shall fail to fulfill in a timely manner any of the covenants of this agreement, the **COUNTY** shall have the right to terminate this agreement by giving the **CONTRACTOR** seven (14) day's notice, in writing, of the **COUNTY'S** intent to terminate and the reasons for said termination. And in the event of any such termination the **CONTRACTOR** shall be liable for the difference between the original contract and the replacement or cover contract as well as all administrative costs directly related to the replacement contract; that in such event the **COUNTY** may withhold from any amounts due the **CONTRACTOR** for such work or completed services any balances due the Contractor, and said amounts shall be used to totally or partially offset the **COUNTY'S** damages as a result of the **CONTRACTOR'S** breach to the extent they are adequate.
- C. Either party may cancel the contract, without fault, by giving the other party 14 days written notice.

IN WITNESS WHEREOF, the COUNTY has caused this Contract to be duly executed on its behalf, and thereafter the CONTRACTOR has caused the same to be duly executed on its behalf.

DATED: November 15, 2021.

SKAMANIA COUNTY
BOARD OF COMMISSIONERS

J. M. Lawrence
Chairman

[Signature]
Commissioner

[Signature]
Commissioner

APPROVED AS TO FORM ONLY:

[Signature]
Prosecuting Attorney

PUBLIC HEALTH INSTITUTE

[Signature]
Rebecca Silva, Director of Grants & Contracts

10/25/2021
Date



ATTEST:

[Signature]
Clerk of the Board



EXHIBIT A
SCOPE OF WORK
Public Health Institute
Scope of Work

**Skamania County Community Health Contact Tracing and Vaccine Call Center Program
Support and Infrastructure**

Public Health Institute (PHI) will complete the following deliverables to support the implementation of contact tracing and a vaccine call center needed for disease mitigation activities for the Skamania County Community Health (SCCH). This scope of work involves recruitment and public health surveillance for the contact tracing services, contact tracing awareness and support, and a vaccine call center directed by SCCH. SCCH currently has access to funding for contact tracing services and vaccine support services as indicated in Section 5A, of the Services Agreement. The number of cases that PHI can manage as described below is subject to the availability of adequate funding.

Key Deliverables and Objectives:

RECRUITMENT AND STAFF DEPLOYMENT:

- Maintain contact tracing staff, supervision, and infrastructure for the SCCH COVID-19 contact tracing program. All contact tracing staff will be remote employees based at their own residence for the contract period of performance.
- At the request of SCCH, recruit and deploy up to two contact tracing staff to respond to COVID-19 cases in Skamania County.
- Execute a seamless onboarding process and ongoing management to ensure that staff deployed to support SCCH receive appropriate trainings and support.
- Develop performance standards in alignment with SCCH. Staff not meeting performance standards will receive accelerated progressive discipline, up to and including termination in accordance with PHI employment policies and applicable employment laws. If someone is not meeting minimum standards, or violating a PHI policy, SCCH will alert PHI to immediately prevent further work until an investigation can be completed.
- PHI will manage the employees in accordance with all PHI policies and procedures including requiring some specific training for all employees such as harassment prevention training.
- In accordance with SCCH's goals, PHI will deploy staff that speak the top two languages in the SCCH service area (English and Spanish). For other non-English languages, we will use interpreters for real-time translation (preferably in-house but perhaps via a language line).
- Other - to be determined in agreement with SCCH.

CONTACT TRACING:

- SCCH will develop and provide PHI direction for data management flows between SCCH's Case Investigators and PHI's Contact Tracing teams.

- Meet the Washington State Department of Health metrics related to contact tracing and reporting timelines (per Washington State Department of Health COVID Investigation Guidelines).
- Ensure complete and timely interviews as assessed by SCCH data quality assurance team.
- Call contact up to 3 times each (4 hours apart) within 24 hours. If unable to reach a contact after all contact attempts are made, will triage to SCCH for follow-up.
- Contact each case and contact under active monitoring for the duration of their isolation or quarantine period daily. Contacts under quarantine will also be screened for onset of COVID-19 like symptoms.
- Conduct telephone interviews with contacts according to procedures and specifications determined by SCCH.
- Call during evening, daytime and weekend hours to reach respondents with non-traditional schedules.
- Administer interviews in English and additional languages needed by most residents living in the SCCH service area.
- Create micro-team assignments to include Spanish speakers on every team.
- Database management and reports in predetermined format as agreed upon.
- In addition to the State of Washington/SCCH software requirements, PHI will utilize a cloud based COVID-19 Solution to supplement contact tracing.
- In accordance with, and as permitted by HIPPA regulations, establish protocols for human subject protection consistent with federal Common Rule.
- Providing Contact Tracing services by PHI is dependent on the execution of a data sharing agreement mutually agreed by PHI and SCCH.

TECHNOLOGY:

- SCCH and Washington State contact data navigation systems will be utilized in consultation with SCCH to ensure seamless data collection operability.
- PHI will identify and provide the necessary equipment and technology (hardware and software) required for a successful remote contact tracing workforce and provide this to contact tracing staff (e.g. computers, phones, etc.).
- Provide VOIP phone numbers and headsets or cell phones with a data stipend as preferred.
- Provide IT support to all users for local and network IT issues, if applicable.

TRAINING:

- Implement preferred training modules (i.e. Johns Hopkins, ASTHO, other) and Washington-specific procedural guidance.
- Work collaboratively with SCCH and the Washington State Department of Health, as needed, for training on the SCCH and Washington State navigation or alert systems.
- Work with SCCH to obtain necessary permissions to implement SaraAlert as needed for active daily monitoring.
- In addition to contact tracer training, staff will undergo training in HIPAA compliance, confidentiality training, refusal conversions, and data entry processes.

OTHER:

- Schedule regular meetings with SCCH staff to review progress, concerns, data issues, or computer system issues. Schedule and timing of meetings to be confirmed in writing between PHI and SCCH.
- PHI will ensure effective communications with the SCCH staff and teams as necessary, including county managers.
- During periods when contact tracing staff are deployed, submit weekly data to SCCH staff regarding number of cases, contacts attempted, and contacts reached, and any other required work-scope data as agreed upon.
- During periods when contact tracing staff are deployed, submit weekly quality control reports to SCCH staff as agreed upon.
- Utilize hardware and software to comply with SCCH Public Health Information Technology Standards and Security Policies.
- Employ technology and internal controls to protect the privacy, confidentiality, and security of survey respondents.
- Maintain adequate personnel and financial records to support costs associated with this agreement.
- Perform systematic, unobtrusive audio monitoring; interviewers to be monitored every shift.
- Database maintenance in support of public health as required or permitted by law.
- During the implementation of this agreement, PHI may redeploy other PHI staff for contact tracing and contact tracing to provide rapid response and surge response to COVID-19 outbreaks and cases. As needed, staff redeployments to provide surge capacity will be confirmed in writing in advance with SCCH and PHI's costs will be reimbursed through this contract.

OTHER COVID-19 RESPONSE SERVICES

Virtual COVID-19 Call Center

- Contractor will provide staffing and management for a remote/virtual COVID-19 inquiry call center per scripting and protocols provided by SCCH. Calls fielded may include, but are not limited to:
 - General questions related to vaccine rollout
 - Vaccine eligibility and regional reopening phases
 - Scheduling vaccine appointments

Specific topics are subject to change and will be established by mutual written agreement, to be updated as needed.

- Contractor will assist callers with completing vaccine waitlist or appointment request webform application over the phone.
- Contractor will collect and record caller data in spreadsheet or other database approved by SCCH.
- Call center will respond to voicemails left on vaccine inquiry phone line and will accept calls triaged to the Contractor by SCCH.
- Contractor will triage calls about matters not related to vaccines or other services provided by Contractor to appropriate SCCH departments as needed and as directed by SCCH.

- SCCH will supply the public-facing phone number for the vaccine inquiry phone line. Contractor will provide voicemail inbox to which SCCH will forward vaccine-related calls.
- SCCH will provide all scripts and protocols required for contractor to carry out call center activities.
- Contractor will provide translation of scripts to languages represented on Contractor’s staff.
- SCCH will provide to Contractor instructions on prioritizing workload between contact tracing and resource referrals and vaccine call center. Prioritization instructions will be provided by SCCH to Contractor by email and updated as needed.
- All call center activities conducted by Contractor will be conducted remotely.

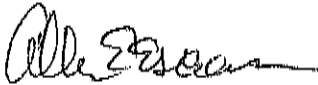
PAYMENT TERMS

Invoices will be on a time and materials basis. PHI will invoice SCCH for hours worked at the fully burdened billing rates included in the table below and will including supporting documentation from accounting software detailing positions paid and hours worked by those positions. PHI will track contact tracing hours and expenses separately from vaccine call center hours and expenses and invoices will distinguish these costs.

Total amount billed will not exceed the ceiling defined in Contract Section 5.A., ~~currently~~ \$30,000; \$110,000, \$135,000, \$180,000 as amended.

| Skamania County Contact Tracing Billing Rates | |
|--|----------------------------------|
| Working Title | PHI Hourly Burdened Rate* |
| Deputy Director | \$118.16 |
| Microteam Manager | \$99.90 |
| Data Operations Lead | \$91.44 |
| RC | \$67.67 |
| CT2 | \$71.97 |
| CT | \$53.45 |
| <i>*Salary, fringe, operations costs and Indirect Costs are included in the burdened rate.</i> | |

COMMISSIONER'S AGENDA ITEM COMMENTARY

| | | |
|--------------------------------|---|---|
| <u>SUBMITTED BY</u> | Community Health Department | Signature  |
| <u>AGENDA DATE</u> | BOCC 11/16/2021 RATIFY BOH 12/14/2021 | |
| <u>SUBJECT</u> | Tacoma-Pierce County Health Department Contract | |
| <u>ACTION REQUESTED</u> | Signature | |

SUMMARY/BACKGROUND

Contract for Skamania County Public Health Food Handlers card online training, testing and issuance

FISCAL IMPACT

Revenue Contract

RECOMMENDATION

Sign

LIST ATTACHMENTS

- Contract
- Face Sheet

**INTERLOCAL AGREEMENT
BETWEEN
TACOMA-PIERCE COUNTY HEALTH DEPARTMENT
And
SKAMANIA COUNTY COMMUNITY HEALTH**

This Interlocal Agreement is made and entered into by and between the Tacoma-Pierce County Health Department, hereinafter referred to as DEPARTMENT, and SKAMANIA COUNTY COMMUNITY HEALTH hereinafter referred to as the Local Health Jurisdiction. The DEPARTMENT and the Local Health Jurisdiction are collectively referred to as the "parties."

I. RECITALS

WHEREAS, the DEPARTMENT and the Local Health Jurisdiction are local health departments as provided for under Chapters 70.05, 70.08, or 70.46 RCW, with authority under Chapter 246-217 WAC to issue food worker cards; and

WHEREAS, it is the purpose of this Interlocal Agreement to provide for the funding and execution of services as described in Addenda A and B, attached hereto and incorporated herein; and

WHEREAS, the parties have the authority to enter into this Agreement pursuant to RCW 39.34.080.

II. DEFINITIONS

As used herein, the following terms shall have the meanings set forth below:

- A. **Agreement** means this Interlocal Agreement together with the attached Addenda, and any other documents incorporated therein. Any oral representations or understandings not incorporated herein are excluded. Attached hereto and made a part hereof for all purposes are the following:

| Addendum | Number of Pages | Description |
|----------|-----------------|--------------------|
| A | 2 | Scope of Work |
| B | 1 | Allocation of Fees |

- B. **Department Representative** means the individual or individuals designated and authorized by the DEPARTMENT to receive notices and to act for it in all matters relating to this Agreement, or the designee of such individual.
- C. **Local Health Jurisdiction's Representative** means the individual designated and authorized by the Local Health Jurisdiction to receive notices and to act for it in all matters relating to this Agreement, or the designee of such individual.
- D. **Services** means all work performed by the DEPARTMENT or the Local Health Jurisdiction pursuant to and governed by this Agreement, including Addenda A and B.

III. TERM

The term of this Agreement shall be January 1, 2022 through December 31, 2026, unless amended or terminated earlier pursuant to the terms and conditions herein. Should this Agreement be signed after the term beginning date stated herein, then it shall be retroactive and binding to that date.

IV. PAYMENT

Payment for the services described in Addendum A shall be provided as set forth in Addendum B, attached hereto and incorporated by reference.

V. HOLD HARMLESS

Except as otherwise provided herein, each party shall defend, protect, and hold harmless the other party, and its appointed and elected officials, employees, and agents from and against all liability, loss, cost, damage and expense, including but not limited to costs and attorney's fees, because of claims, suits and/or actions arising from any negligent or intentional act or omission asserted or arising or alleged to have arisen directly or indirectly out of or in consequence of the performance of this Agreement by that party's appointed or elected officials, employees, and agents.

VI. RECORDS MAINTENANCE

The **DEPARTMENT** and the **Local Health Jurisdiction** shall each maintain books, records, documents, and other materials, including but not limited to online data, that sufficiently and properly reflect all direct and indirect costs expended by either party in the performance of the services described herein. These records shall be subject to copying, inspection, review, or audit by personnel of either party, and other personnel duly authorized by law. The **DEPARTMENT** shall retain all books, records, documents, online data, and other material relevant to the services described in Addendum A, which materials shall be made available to the **Local Health Jurisdiction** upon request.

VII. TERMINATION

Except as otherwise provided for herein, either party may terminate this Agreement by giving the other party at least one hundred eighty (180) days written notice. If this Agreement is so terminated, each party shall be liable only for performance in accordance with the terms stated herein for services rendered prior to the effective date of termination.

VIII. CHANGE IN FUNDING

If the funding authorities of the **DEPARTMENT** (*Federal, State, and local agencies*) fail to appropriate funds to enable the **DEPARTMENT** to continue payment as specified in this Agreement or if the Board of Health reduces the budget of the **DEPARTMENT** or any program(s) and, as a result of the Board of Health's action, the **DEPARTMENT's** Director of Health determines there are insufficient funds to continue payment as specified in this Agreement, then the **DEPARTMENT** may modify or cancel this Agreement without penalty provided that the **Local Health Jurisdiction** receives at least ninety (90) days prior written notice of lack of appropriated funds as the reason for the modification or termination. Any modification of this Agreement shall be effective only upon incorporation into a written amendment as set forth in Section XI.

IX. INTERPRETATION

In the event of an inconsistency found in the terms and conditions contained within this Agreement, unless otherwise provided herein, the inconsistency shall be resolved by giving precedence in the following order:

- Applicable Federal and State Statutes and Regulations;
- Addenda A and B; and
- The provisions of this Agreement.

X. PERFORMANCE

The **DEPARTMENT** shall perform all services in accordance with all applicable professional standards and agrees that it will use only qualified, competent personnel in the execution of these services.

XI. AMENDMENTS

Either party may request changes to this Agreement. Proposed changes, which are mutually agreed upon, shall be incorporated by written amendments to this Agreement. No changes to this Agreement are valid or binding on either party unless first reduced to writing and signed by the Representatives of both parties.

XII. NON-DISCRIMINATION

Each party covenants that in providing the services described in Addendum A, no person shall be excluded from participation therein, denied the benefits thereof, or otherwise be subjected to discrimination with respect thereto on the grounds of marital status, presence of any sensory, mental, or physical handicap, unless based upon a bona fide occupational qualification, race, creed, color, national origin, age, religion, gender, sexual orientation, disabled veteran status or Vietnam Era Veteran status.

XIII. DISPUTES

This Agreement shall be administered and interpreted under the laws of the State of Washington. In the event that a dispute arises in the interpretation or application of this Agreement, both parties are to proceed to good faith negotiation to resolve said disputes. The parties may also agree in writing to mediation if negotiation is not successful in resolving the dispute. However, in the event such disputes cannot be resolved, the dispute may be appealed to the parties' Local Health Officer or his /her designee for resolution. In the event the Local Health Officers are unable to resolve the dispute, either party may pursue relief in Superior Court. Jurisdiction of litigation arising from this Agreement shall be in the State of Washington. Venue for all actions arising pursuant to this Agreement shall lie within Pierce County, Washington.

XIV. SERVICES MANAGEMENT

The work described in Addendum A shall be performed under the coordination and cooperation of both party representatives. Each party shall provide assistance and guidance to the other party as necessary for the successful performance and goals of this Agreement.

XV. ALL WRITINGS CONTAINED HEREIN

This Interlocal Agreement contains all the terms and conditions acknowledged by both parties. No other understandings, oral or otherwise, regarding the subject matter of this Agreement shall be deemed to exist or bind the parties hereto. This Agreement supersedes any prior written agreements between the parties relating to the work described in Addendum A.

IN WITNESS THEREOF the parties hereto have executed this Agreement as of the date(s) set forth below.

Local Health Jurisdiction Authorized Signature

DEPARTMENT Authorized Signature


Nigel Turner (Dec 3, 2021 14:22 PST)

Tom Lannen, Chair
Skamania County Board of Commissioners

Dec 3, 2021
Nigel Turner
Division Director

Skamania County Community Health
PO Box 1492
710 SW Rock Creek Drive
Stevenson, WA 98648
(509) 427-3850


Dec 3, 2021
Christopher Schuler
Business Manager

Tacoma-Pierce County Health Department
3629 South D Street, MS 001
Tacoma, WA 98418
(253) 649-1500

ADDENDUM A: SCOPE OF WORK AND SPECIFIC CONDITIONS

This Addendum A applies to Agreement #1061-34-2026 between The TACOMA-PIERCE COUNTY HEALTH DEPARTMENT (DEPARTMENT) and SKAMANIA COUNTY COMMUNITY HEALTH (Local Health Jurisdiction). In addition to the terms and conditions set forth in the Agreement, the parties agree as follows.

1. **Local Health Jurisdiction's Responsibilities:**

- 1.1. Authorize the DEPARTMENT by means of this Agreement to act as the Local Health Jurisdiction's "Designated Agent" and provide online food worker training, testing and card issuance to residents of Skamania County and any out-of-state residents who state they work in Skamania County, as permitted under Chapter 246-217 WAC.
- 1.2. Hold the DEPARTMENT harmless from any actual or purported loss of online food worker training, testing and card issuance income during times of unavoidable lack of access to the DEPARTMENT's training, testing and card issuance web site.
- 1.3. Maintain the security of the data originating from and contained in the online food worker card database. This includes but is not limited to adhering to the standard practices for strong password generation and user account management. The Local Health Jurisdiction shall not grant unauthorized parties access to the confidential data originating from or contained in the online food worker card database.

2. **The DEPARTMENT's Responsibilities:**

- 2.1. Provide online food worker training, testing and card issuance services as a designated agent of the Local Health Jurisdiction in accordance with the State of Washington's requirements under Chapter 246-217 WAC.
- 2.2. Ensure a good-faith effort to maintain a training, testing and card issuance web site that functions and is accessible to residents of Skamania County and any out-of-state residents who state they work in Skamania County.
- 2.3. Provide Local Health Jurisdiction with the location of a website to which residents of Skamania County and any out-of-state residents who state they work in Skamania County may be directed for online training, testing and card issuance. The DEPARTMENT may change the location of the website, but must provide re-direction to a new site with a minimum of thirty (30) days advance notice to Local Health Jurisdiction.
- 2.4. Provide access to the software to print a food worker card with the Local Health Jurisdiction logo which shall be valid throughout the State of Washington for a minimum period of two years from the date of issuance.
- 2.5. Establish a secure online payment gateway and service that will permit online payment services via, credit cards, including but not limited to Visa and MasterCard, as well as debit cards.
- 2.6. Provide and pay for an online maintenance agreement with an outside contractor to provide technical support of the website and online programming of the online food worker card software.
- 2.7. Provide Local Health Jurisdiction with a written statement of income on a quarterly basis, or as frequently as the parties may otherwise agree, or a link to an online report providing the same information.
- 2.8. Provide support and service to Local Health Jurisdiction during regular DEPARTMENT hours of operation to ensure Local Health Jurisdiction has the ability to respond to queries from residents of Skamania County and any out-of-state residents who state they work in Skamania County.

3. **Public Records Requests.**

3.1 The DEPARTMENT holds the records and data generated by the Food Workers Card software as the Local Health Jurisdiction's designee. The DEPARTMENT will provide all such materials to the Local Health Jurisdiction in response to any public record request the Local Health Jurisdiction may receive relating to the Food Workers Card database. The Local Health Jurisdiction will be responsible for releasing the records to the requester in accordance with Chapter 42.56 RCW and Chapter 44-14 WAC. When the Local Health Jurisdiction requests records, the Local Health Jurisdiction must clearly describe the records that are being requested. The DEPARTMENT will notify the Local Health Jurisdiction as to the number of days it will take to gather the responsive records. Any public records requests received by the DEPARTMENT will be fulfilled by the DEPARTMENT. In the event the DEPARTMENT receives a request for public records regarding the Local Health Jurisdiction's records, the DEPARTMENT will notify the Local Health Jurisdiction of the request prior to releasing the records.

4. **Liaisons for the Agreement:**

On behalf of the DEPARTMENT: Donald Foreman
Project Manager
Tacoma-Pierce County Health Department
3629 S D Street
Tacoma, WA 98418
Phone: (253) 649-1707
Fax: (253) 649-1360
Email: dforeman@tpchd.org

On behalf of the Local Health Jurisdiction:

Allen Esaacson
Data and Finance Manager
Skamania County Community Health
PO Box 1492
Stevenson, WA 98648
Phone: (509) 427-3950
Fax (509) 266-1543
Email: allene@co.skamania.wa.us

ADDENDUM B: ALLOCATION OF FOOD WORKER CARD FEES

This Addendum B applies to Agreement #1061-24-2026 between The TACOMA-PIERCE COUNTY HEALTH DEPARTMENT (DEPARTMENT) and SKAMANIA COUNTY COMMUNITY HEALTH (Local Health Jurisdiction). In addition to the terms and conditions set forth in the Agreement and Addendum A, the parties agree as follows:

1. Fee Allocation and Method of Payment:

- 1.1. During the period January 1, 2022 through December 31, 2026, the DEPARTMENT will collect on behalf of the **Local Health Jurisdiction** the maximum fee established under Chapter 246-217 WAC, as now or hereafter amended.
- 1.2. The DEPARTMENT will retain a \$3.00 per card fee as payment for the services described in this Agreement from each online food worker card issued online to a resident of Skamania County and any out-of-state resident who states he or she works in Skamania County and who enters the www.foodworkercard.wa.gov testing website (or a successor site) by means of the **Local Health Jurisdiction's** web link, the DEPARTMENT's web link, or any other approved link. The balance of the monies collected under Chapter 246-217 WAC shall be remitted to the **Local Health Jurisdiction** in accordance with the terms set forth below.
- 1.3. The DEPARTMENT may impose and retain a surcharge or equivalent assessment intended to recoup any credit card processing fees. Such a surcharge or equivalent assessment will be paid directly by the food worker (not by the **Local Health Jurisdiction**), and shall not be included in the fee allocations and methods of payment described elsewhere in this section.
- 1.4. If the actual and indirect costs incurred by the DEPARTMENT to provide the services described in this Agreement exceed \$3.00 per card, the DEPARTMENT may, in its sole discretion, increase the amount it retains as payment for services to offset the difference and the amount remitted to the **Local Health Jurisdiction** will be reduced. Written notice of rate increases, if any, will be provided in writing ninety (90) days in advance to the **Local Health Jurisdiction**. The **Local Health Jurisdiction** may terminate this Agreement by giving (90) days written notice in the event of a rate increase.
- 1.5. The DEPARTMENT will retain a \$1.00 per card fee for the services described in this Agreement from each replacement food worker card issued online to a resident of Skamania County and any Skamania out-of-state resident who has lost his or her original food worker card; provided, he or she works in Skamania County, purchases a replacement— food worker card without taking the online test, and enters the www.foodworkercard.wa.gov testing website (or a successor site) by means of the **Local Health Jurisdiction's** web link, the DEPARTMENT's web link, or any other approved link. The balance of the monies collected under Chapter 246-217 WAC shall be remitted to the **Local Health Jurisdiction** in accordance with the terms set forth below.
- 1.6. If a food worker from a **Local Health Jurisdiction** challenges the validity of a payment for an online food worker card and the credit card company charges back or reverses the payment, the **Local Health Jurisdiction** agrees to pay any fees and costs associated with the cost of the reversal. Currently these fees are \$25.00 per transaction in addition to the actual amount reversed.
- 1.7. The DEPARTMENT shall remit monies owed to the **Local Health Jurisdiction** on a quarterly basis, together with a written statement of income received, or as frequently as the parties may otherwise agree, or a link to an online report providing the same information. Said funds and the quarterly statement shall be mailed to the **Local Health Jurisdiction** at the address stated below within 20 business days of the end of the quarter.
- 1.8. At the written request of the **Local Health Jurisdiction Representative** the DEPARTMENT may enter into agreements with institutions such as Department of Corrections to provide food worker cards for residents of Skamania County that are not permitted internet access. The DEPARTMENT will retain \$10.00 per card fee for this service.

2. **Remittance Address:** DEPARTMENT will remit payment to the address stated below:

Skamania County Community Health
PO Box 1492
Stevenson, WA 98648
Phone: (509) 427-3850

3. **Accounting Information:**

3.1. Source of Funding: N/A

3.2. DEPARTMENT Program Number: 1061-Food Safety