

Kittitas County Review Form Grants & Contract Agreement



Today's Date 10/26/2010	Agenda Date
Fund/Department 116-Public Health Department	

Contract/Grant Information

Contract /Grant Agency: Educational Grant Agreement	
Period Begin Date: September 24, 2010	Period End Date: December 31, 2011
Total Grant/Contract Amount: \$5195.00	
Grant/Contract Number:	
Contract/Grant Summary: The agreement between Sanofi Pasteur and Kittitas County Public Health Department is to provide funding to help advertise to protect and educate and engage adolescents and their caregivers in Pertussis prevention.	

Recommendation for Board of Health and Board of Health Review on _____

Department Head Signature: _____, Administrator Date: _____
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Kittitas County Prosecutor, Auditor, and Board of Health Review and Comment:

APPROVED AS TO FORM:

Signature of Prosecutor's Office	Date
Signature of Auditor's Office	Date
Signature of Board of Health member	Date

Financial Information

Total Amount \$5195	State Funds \$0.00	Federal Funds \$0.00
Percentage County Funds 0.00	Matching Funds \$0.00	CFDA#n/a

	In-Kind \$ Explain
Is Equipment being purchased? No	Who owns equipment?
New Personnel being hired? No	Contact HR hiring – reporting requirements
Future impacts or liability to Kittitas County: This is a contribution from Sanofi Pasteur so it is not listed under either State or Federal funds. The grant is for educating the public so it will be used primarily for advertising with some educational materials (operating supplies) being purchased.	

Budget Information

Budget Amendment Needed?	Yes <input type="checkbox"/> attach budget form	No <input checked="" type="checkbox"/> Why not This will be included in the 2011 budget
New Division Created? No		
Revenue Code 6123236700		

Pass Through Information

Agency to Pass Through	n/a
Amount to Pass Through	\$0.00
Sub-Contract Approved	Date:

Prosecutor Review

Has the Prosecutor reviewed this agreement?	Yes <input type="checkbox"/> No <input type="checkbox"/>
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County Departments Impacted

Auditor	Facilities Maintenance
Information Services	Human Resource
Prosecutor	Treasurer

Submitted

Signature:	Date:
Department:	

Assignment of Tracking Information

Auditor's Office	
Human Resource	
Prosecutor's Office	
Who Signed the grant application	

Reviewer	Date
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Revised: 09/19/2008

**EDUCATIONAL GRANT AGREEMENT
(For Accredited or Non-Accredited Providers)**

Between Kittitas County Public Health Department (hereinafter, "Accreditor/Activity Sponsor"), and Sanofi Pasteur Inc., located at Discovery Drive, Swiftwater, Pennsylvania (hereinafter, "Grantor").

TITLE OF ACTIVITY: Adolescents: Protect, educate, and engage in Pertussis prevention (hereinafter, the "Activity")

Location or, if known, Publication: Publication
Activity Start Date: 09/24/2010

Accreditor/Activity Sponsor: **Kittitas County Public Health Department**
Address: 507 N. Nanum Street Suite 102
Ellensburg, WA 98926
Contact Name: Linda Navarre and James Rivard
Contact Title: Co-Interim Administrators
Contact Telephone: 509-962-7068
Contact Fax: 509-933-8246
Contact E-mail Address: linda.navarre@co.kittitas.wa.us

\$5195 payable to Accreditor/Activity Sponsor

Tax ID Number: 91-6001349

Accredited Activity ☐

Non-Accredited Activity ☒

Until fully executed by all parties, including without limitation Grantor, this document is merely an offer to provide a grant, and not an agreement or contract. This offer is conditioned upon the return of this original document, unmodified in terms and signed by Accreditor/Activity Sponsor and Education Partner (if applicable), to Grantor at least 21 days prior to the Activity Start Date. Grantor may withdraw the offer to provide grant funding if this document is not returned to Grantor in accordance with the terms of this paragraph.

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Revised: 09/19/2008

1. **Standards.** The parties agree to abide by all applicable requirements of the current ACCME® *Essential Areas and Elements*, policies, and *Standards for Commercial Support*™, the current Food and Drug Administration *Policy Statement on Industry Supported Scientific and Educational Activities*, and all applicable laws and regulations.
2. **Statement of Purpose.** The Activity is for scientific and educational purposes only and will not promote Grantor's or its affiliates' products, directly or indirectly. Any discussion of Grantor's or its affiliates' products or other third party products will be objective, balanced, scientifically rigorous, and evidence-based.
3. **Control of Contents & Selection of Faculty.**
 - a. Accreditor/Activity Sponsor is solely responsible for the control of content, identification of educational objectives, evaluation of the Activity and selection of faculty, editors, presenters or authors. Accreditor/Activity Sponsor shall ensure that the content, quality and scientific integrity of the Activity is objective and that current information is based upon widely accepted scientific methods and publicly available data.
 - b. For Activities submitted in response to a Request for Proposal, Grantor may suggest broad topic areas and general educational needs, but Grantor will not direct the content of the Activity, influence the Accreditor/Activity Sponsor with regard to content, "script" or "target points for emphasis" or otherwise direct content.
4. **Disclosure.** The Accreditor/Activity Sponsor and/or Education Partner will ensure that the source of support from Grantor is disclosed to the participants in a manner compliant with the ACCME® *Standards for Commercial Support*™. Grantor shall be identified as "Sanofi Pasteur U.S." Use of Grantor's logo is permissible only upon prior written approval from Grantor.
5. **Transparency.** The parties acknowledge and agree that Grantor intends to publicly disclose all medical education grants it supports in the U.S. The report will include but is not limited to the names of all parties to this agreement, the amount of funding provided by Grantor as well as the title, purpose and total budget of Activity.
6. **Independence in the Use of Contributed Funds.**
 - a. Funds will be in the form of an educational grant made payable to Accreditor/Activity Sponsor; Accreditor/Activity Sponsor must request exceptions, e.g., payment to Education Partner, in the Sanofi Pasteur U.S. grant application (hereinafter, "Grant Application"). Accreditor/Activity Sponsor is responsible for providing compensation to the faculty, editors, presenters, authors and any other parties due compensation for services provided in connection with the Activity.
 - b. Any other support provided by Grantor associated with the Activity (e.g., distributing brochures, etc.) may be given only in response to an unsolicited written request and with the full knowledge and approval of Accreditor/Activity Sponsor and Education Partner.
 - c. Grantor will pay no other funds associated with the Activity to the faculty, editors, presenters, authors, director(s) of the activity, planning committee members, or any other parties involved with the supported Activity (e.g., additional honoraria, social events, etc.).
 - d. Accreditor/Activity Sponsor represents and warrants that none of the funding provided hereunder will be used to offset the Accreditor/Activity Sponsor's or Education Partner's overhead or operating expenses.

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- e. Grantor and Accreditor/Activity Sponsor agree that funding of this grant is not, has not been and will not be contingent upon the purchase, recommendation or referral of Grantor's or its affiliates' products, and is not intended to encourage Accreditor/Activity Sponsor to order, prescribe or recommend Grantor's or its affiliates' products.
- f. Grantor and Accreditor/Activity Sponsor agree that funding of this grant is not in any way related to: (i) any past, present, or future business relationship with Grantor; or (ii) any business or other decision that Accreditor/Activity Sponsor has made or may make relating to Grantor or its products.

7. Promotional Activities. Accreditor/Activity Sponsor and/or Education Partner agree(s) that: (i) no commercial promotional materials shall be displayed or distributed in the same room immediately before, during, or immediately after the Activity; and (ii) no educational materials that are part of the Activity will contain any advertising, branding or product specific message.

8. Reconciliation, Unexpended Funds and Audit.

- a. Accreditor/Activity Sponsor and/or Education Partner shall furnish to Grantor, within ninety (90) days of the fully executed Activity, a report via the Sanofi Pasteur U.S. reconciliation form (hereinafter "Reconciliation") detailing total Activity expenditure, along with Activity materials which sufficiently demonstrate that the Activity took place as described in the Grant Application. Failure to provide this information to Grantor may result in withholding of additional payment of funds and denial of future grant funding, if applicable.
- b. In the event that all funds provided by Grantor are not used in connection with the Activity, Accreditor/Activity Sponsor and/or Education Partner agree to return unexpended funds to Grantor upon submission of Reconciliation. In the event that Grantor is not the sole financial supporter of the Activity, Accreditor/Activity Sponsor and/or Education Partner agree(s) to return to Grantor that percentage of unexpended funds proportional to Grantor's contribution to estimated total Activity costs as indicated on the Grant Application.
- c. After Activity completion or for cause at any point and in compliance with the terms of this Agreement, including preservation of the independence of the Activity, Grantor shall have the right, at its expense, to audit and examine all contracts, documents, correspondence, account and expense records, and any other materials, which relate to the Activity. Such audit shall be conducted by Grantor upon reasonable notice and at reasonable times.

9. Limitation on Use of Educational Grant Funds.

- a. Accreditor/Activity Sponsor and/or Education Partner agree(s) to use funds supplied pursuant to this Agreement only for expenses of the Activity described in the Grant Application (identified by the Grant ID recorded at the top right corner of each page of this Agreement) submitted to and approved by Grantor. In the event substantial changes are made to the topic, target audience composition, or other material aspect of the Activity, Grantor reserves the right to withhold funding or require return of funds. Funding for a revised Activity may require submission of a new Grant Application.
- b. If the executed Activity attendance is less than 70% of the estimated Activity attendees/participants as stated in the Grant Application, written explanation is required upon submission of Reconciliation.

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10. Miscellaneous

- a. If the executed Activity does not adhere to the terms and conditions of this Agreement, Grantor reserves the right to withhold funding or require return of funds.
- b. This instrument embodies the entire agreement of the parties, and any representations, inducements, promises and agreements, oral or otherwise, not included herein will have no force or effect in the construction of rights and obligations of the parties created hereunder. The Grant Application for the Activity, as completed by the Accreditor/Activity Sponsor and approved by Grantor, is hereby incorporated by reference as Exhibit A to this Agreement. The rights and obligations created hereunder may not be assigned or changed by any party without consent of the other party(ies) in writing.
- c. This Agreement may be signed in counterparts and said counterparts shall be treated as though signed as one document.
- d. This Agreement is not effective until fully executed by all parties. Grantor reserves the right to revoke the grant offer unless two (2) original, unmodified documents are returned at least twenty-one (21) days prior to the Activity Start Date.
- e. No changes to the terms and conditions of the Agreement will be considered by Grantor. In the event any handwritten or mechanical changes are made on the Agreement, all parties must initial them in order for them to have any force or effect.

The parties, intending to be bound by the terms and conditions of this Agreement, have caused this Agreement to be signed by their duly authorized representatives.

Kittitas County Public Health Department

Sanofi Pasteur Inc.

Signature: _____

Signature: _____

Name: _____

Name: _____

Title: _____

Title: _____

Date: _____

Date: _____

Grant Number: 75894826-2149

Applicant Information:

Note: Applicant information will be used for all questions and communications regarding this request, including the mailing of the grant agreement.

First Name:	Linda
Last Name:	Navarre
Title:	Community Health Services Supervisor
E-mail Address:	linda.navarre@co.kittitas.wa.us
Phone Number:	509-962-7068
Fax Number:	509-933-8246

All information input below will be used for purposes of creating an Educational Grant Agreement.

Legal Name of Institution, Company, or Organization:	Kittitas County Public Health Department
Tax ID Number:	91-6001349
Is the Provider a Not For Profit Entity?	Not For Profit
First Name:	Cathy
Last Name:	Bambrick
Title:	Administrator
Email Address:	cathy.bambrick@co.kittitas.wa.us
Phone Number:	509-962-7515
Fax Number:	509-933-8246
Mailing Address Line 1:	507 N. Nanum Street Suite 102
Mailing Address Line 2:	
Mailing Address Line 3:	
City:	Ellensburg
State, Zip:	WA, 98926
Will this application be considered for CME/CE credit?:	No
Utilizing Medical Education Partner / Company?:	No

Program Information:

Country:	US
Program Type:	Enduring
Disease Area:	Whooping Cough
Title of Program:	Adolescents: Protect, educate, and engage in Pertussis prevention

<p>Description of Program (A one paragraph overview of the program, e.g. a symposium on the importance of diabetes management)</p>	<p>Reducing the incidence of Pertussis in Kittitas County through increased uptake of Tdap vaccinations in the 11 thru 18 year age group by engaging adolescents and their caregivers.</p>
<p>Educational Needs Assessment:</p>	<p>Two data collection measurements by the Washington State Department of Health and Kittitas County Public Health Department have demonstrated a critical need for an enhanced plan to educate caregivers and adolescents about vaccine preventable diseases and recommended and required vaccinations. Newly released data from the Washington State Department of Health Immunization Program for the 2009/2010 school year show Kittitas County as one of the higher ranking counties for kindergarten school exemptions from immunizations. In Kittitas County the rate increased from 10.8% to 12.7% over the same time period. In addition, a pertussis outbreak within Kittitas County in the spring of 2009 prompted Kittitas County Public Health Department to conduct a needs assessment survey of local providers and parents of adolescent in Kittitas County. This event affected two school districts, two healthcare facilities, childcare centers, and the state wrestling tournament. It was not only a disruption of school and work force contributions but also a strain on health care providers and Kittitas County Public Health Department (KCPHD). The 25 confirmed cases and 1094 contact investigations stressed program resources and resulted in disruption of daily public health activities for over two months. The majority of cases during this outbreak involved adolescents; most confirmed cases were in the 15 to 17 year age group. During case and contact investigation reviews of immunization status it was clearly displayed that pertussis vaccine coverage was inadequate in this age group. The goal of the parent and provider surveys of the needs assessment was to determine what the perceived barriers were to adolescent vaccination from the caregiver and primary care provider points of view. Our findings revealed the three most common barriers perceived by parents (in order of response): I'm uneasy with newer vaccines, I'm afraid vaccination can cause other health problems, and I don't know the current recommendations for immunizations. Provider barriers where noted as: incomplete immunization records for patients, lack of routine health care visits for adolescents, and patients receive care at multiple facilities. An accompanying goal of the needs assessment prompted by the pertussis outbreak was to determine a baseline rate of immunization status in the 13 to 18 year age group. A chart review of 15% of adolescent charts at each Kittitas County primary care facility revealed that only 47% of high school aged children countywide had received a Tdap and were up to date on pertussis vaccination. This contrasts starkly with our survey of parents, where 79.4% stated their child had received a tetanus containing vaccine in the last five years. It should be noted that the chart review and parent surveys did not use the same cohort of adolescents, but it seems likely that caregivers are overestimating their children's' immunization status. This data collection effort provided the pathway for Kittitas County to implement a focused educational plan with local primary care providers. Providers at each facility were given immunization rates specific to their clinics and an "Immunize at Every Opportunity" handbook created by Kittitas County Public Health Department. This handbook encourages the adoption of new policies and procedures to increase the administration rates of vaccines. Kittitas County Public Health Department would now like to implement an educational plan for adolescents and their caregivers. This will give Kittitas County Public Health Department the opportunity to address the top items listed by parents as barriers to adolescent vaccination, address the need for</p>

	<p>adolescents to become aware of the importance of vaccination in preventing certain diseases, and provide a future pathway to expand vaccine education to include grades K–9.</p>
<p>Learning Objective(s):</p>	<p>Learning objectives- Adolescents will become community supporters of vaccination efforts in Kittitas County after receiving culturally diverse educational activities to increase their knowledge of vaccine preventable disease and the benefits of vaccination. Caregivers of adolescents will receive accurate information on the benefits of the Tdap and other adolescent recommended vaccines. Caregivers of adolescents in Kittitas County will be knowledgeable of the ACIP vaccination requirements and recommendations for adolescents ages 11 to 18 years of age. Caregivers of adolescents in Kittitas County will have an understanding of the complications of Pertussis and other adolescent vaccine preventable diseases. Caregivers of adolescents in Kittitas County will be knowledgeable of all means of vaccine access in their county. Education plan will be sustainable and expandable through the use of established educational materials, new relationships developed for outreach, and community knowledgeable of established need.</p>
<p>Instructional Method(s):</p>	<p>Instructional Method: Target- Caregivers of Adolescents • Movie theatre ad campaign – Four movie preview slides addressing: "Is your adolescent up to date?", local vaccination rates, recommended vaccinations, and locations of local vaccination clinics. The slides will be played as a preview to the main movie attraction. • Newspaper – Half page advertisement "Is your adolescent up to date" with posted ACIP recommended adolescent vaccine graph in a format understandable to those with a high school education, and information about local vaccination clinics to access. • Websites – Kittitas County Public Health Department website will include links to the Washington State Department of Health and CDC Tdap vaccine QA pages, locations of local vaccination clinics. • School email messaging – Utilize school email access to send adolescent immunization educational materials, notify of upcoming free vaccination clinics, and provide links to KCPHD web site, DOH, CDC, and ACIP, for additional creditable immunization information sites. • Direct mailing of educational materials to all caregivers of adolescent who do not have email access. Mailing will be sent directly from the school. • Reader board advertising – Local businesses and schools promoting "Is your adolescent up to date" on recommended vaccinations. Target- Adolescents Youth groups youth clubs – Educate church youth groups and local youth clubs by providing educational flyers and vaccine education DVD created locally. Schools – Distribute the educational DVD to all homeroom classrooms in Kittitas County high schools. The short video will educate adolescents on how vaccines work, what diseases they protect adolescents from, the history of disease before vaccines, and what vaccines are recommended for their age group.</p>

<p>Evaluation and/or Outcomes Assessment:</p>	<p>Evaluation and Outcomes assessment Measurable outcome will be assessed through data collection: • Doses administered before the ad campaign and 4 months later (September 1 to December 31) • Comparison of 2008 to 2009 September 1 to December 31 doses administered totals for Kittitas County. • Facility-specific doses administered rate comparisons of 2008 to 2009. • Post-DVD viewing survey to capture adolescent reactions to video and student perception of increase in knowledge. • Data collection form to capture the number of students who view educational video in homeroom class or at youth groups. • Pledge forms linked to data collection forms to calculate percent of students viewing video in homeroom class or youth group who sign a pledge to discuss immunizations with a parent or caregiver.</p>						
<p>Program Agenda: (For enduring media, please provide Table of Contents / Outline)</p>	<p>Program Agenda Activity -Target group- Draft Deadline- Distribution Date Educational flyer - adolescents - 9/20/2010 - 10/4/2010 Reader board posting- local businesses/schools Caregivers 9/20/2010 9/27/2010 Radio- talk show Q A on pertussis caregivers 9/2010 TBD Newspaper Ad caregivers 9/24/2010 10/01/2010 Movie theater 4 slides: "Is your teen up to date", Teen vaccination rates in our county, recommended vaccines, and vaccination clinics to access. caregivers 9/22/2010 10/1/2010 Video production: local youth on educational DVD targeting adolescents vaccines Adolescents Viewing at school, youth groups clubs 09/24/2010 10/18/2010 school 10/04/2010 clubs Meet with youth group and club advisors- Provide curriculum and collaborate to engage youth to watch video, discuss educational flyer, complete survey, enroll in pledge to discuss education with their parents and community members, supervisor to return surveys and documents # of youth participating Evaluation materials-Survey, pledge design, and participation data collection forms for youth groups and clubs. High School administration- receive approval for video DVD use in all homeroom classrooms distribution of educational flyer via email and mailings to caregivers of adolescents Adolescents Adolescents Adolescents Caregivers 9/22/2010 Deadline for scheduling meeting 9/22/2010 10/01/2010 Meeting deadline 10/04/2010 10/04/2010 10/18/2010 Classroom DVD distribution 10/04/2010 Caregiver distribution</p>						
<p>Other information necessary for the complete review of the grant request:</p>	<p>Target Audience- adolescents and caregivers of adolescents. Approximately 1050 students in grades 10–12 and their caregivers. Our vision: Our children of today, the future parents of tomorrow, will receive the education they need to to make sound decisions on vaccinations so that they may protect their families and the community they live in. In kind Staff time- 1 FTE Community Health Services Supervisor/Immunization Coordinator 1 FTE Community Health degree intern 1 FTE Assessment Coordinator Health Promotion staff Video production equipment- CWU Information Technology support staff Copy machine The completed needs assessment for adolescent vaccination rates, provider survey, and parent survey, was partially funded through a multi learning collaborative grant.</p>						
<p>Is this an Accredited CE Program:</p>	<p>No</p>						
<table border="1"> <thead> <tr> <th>Accreditation Type</th> </tr> </thead> <tbody> <tr> <td> </td> </tr> <tr> <td> </td> </tr> </tbody> </table>	Accreditation Type			<table border="1"> <thead> <tr> <th>Hours - Enduring</th> </tr> </thead> <tbody> <tr> <td> </td> </tr> <tr> <td> </td> </tr> </tbody> </table>	Hours - Enduring		
Accreditation Type							
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Planned Number of Faculty/Speakers - Enduring:		0
List of Speakers, affiliation(s) and area(s) of expertise:		
Name	Affiliation(s)	Area(s) Of Expertise
If speakers are not known, describe the expectations for speakers' qualifications, expertise, and affiliations:		
Are any of the speakers full time staff of the Provider or Medical Education Partner:		No
If yes, will they receive a stipend in addition to their salary:		
Enduring Program Duration and Dates:		
Production Start Date:		09/24/2010
Initial Distribution Date:		09/27/2010
Program Expiration Date:		12/31/2010
Number of Enduring programs supported by this grant:		1
Enduring Type(s):		
Interactive or multi-media CD-ROM/DVD, Other		
Additional comments or other types of Enduring Materials:		Curriculum for schools, youth groups, and clubs for vaccine education
Target Audience:		Other
If other, please explain:		Adolescent students and caregivers of adolescents

Is program open to an audience beyond institution's employees?:	Yes		
If no, please describe:			
Estimated Total Program Attendance:			
Program Type: Enduring	Enduring Attendance: 2000		
List of the method(s) to recruit participants to program:	Email Blasts, External Website (extranet), Flyer Posted in Institutional Common Area/Board, Internal Website (intranet), Other		
Additional comments or other recruit methods:	Engaging schools, youth groups, youth clubs, and community members through movie theatre educational slides, school education programs, radio talk show participation, newspaper advertisement, flyers, and posters		
Medical Education Mission Statement: (Medical Education Mission Statement of the provider)			
Itemized Budget for Entire Program:			
Category	Num. of Units	Rate per Unit	Dollar Amount
Advertising			
Telemarketing			
Direct Mail	650	.40	\$260.00
E-mail	700	0	
Conference Expenses			
Meal Function(s)			
Conference Fees			
Course Materials			
Registration & Confirmation			
Accreditation Fees			
Content Preparation			
Slide Development & Production	4	0	
Syllabus			
Faculty Liaison			
Faculty Expenses			
Speaker Fee			
Faculty Travel & Accommodations			
Program Management			
Program Management			
Travel & Accommodations			
Postage & Shipping			
Phone, Fax, and Other			
Miscellaneous			
Slides movie theatre preview education 4@ \$300.00/slide for 3 months	12	300.00	\$3,600.00
Flyers to engage adolescents and caregivers color	1400	.075	\$105.00
Posters to engage adolescents and caregivers color	50	1.60	\$80.00
DVD's and covers for video distribution	100	1.50	\$150.00
Newspaper ad 2 county papers	2	500.00	\$1,000.00
Total Cost of Program:			\$5,195.00
Total Amount Requested from sanofi pasteur:			\$5,195.00
Amount payable to Provider (Institution, Company, or Organization):			\$5,195.00
Amount payable to Medical Education Partner / Company:			\$0.00

Total number of sponsors expected to support the program including sanofi pasteur:	1
Other than receiving a grant card and/or being directed to the grant website, I confirm that no sanofi pasteur Sales or Marketing personnel were involved in any aspect of this grant submission:	Yes