

**KITTITAS COUNTY PUBLIC HEALTH DEPARTMENT
2012 – 2014 CONSOLIDATED CONTRACT**

CONTRACT NUMBER: C16889

AMENDMENT NUMBER: 2

PURPOSE OF CHANGE: To amend this contract between the DEPARTMENT OF HEALTH hereinafter referred to as "DOH", and KITTITAS COUNTY PUBLIC HEALTH DEPARTMENT 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 Statement of Work for the following programs:
- ☒ Amends Statements of Work for the following programs:
- 5930 Public Health Funding - Effective January 1, 2012
 - Maternal & Child Health - Effective January 1, 2012
 - Office of Drinking Water Group A Program - Effective January 1, 2012
 - Performance Management Center for Excellence-QI Project - Effective January 1, 2012
 - Public Health Emergency Preparedness & Response (PHEPR) - Effective January 1, 2012
- ☐ Deletes Statements of Work for the following programs:

2. Exhibit B-2 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-1 Allocations as follows:

- ☒ Increase of \$27,485 for a revised maximum consideration of \$196,638.
- ☐ Decrease of _____ for a revised maximum consideration of _____.
- ☐ No change in the maximum consideration of _____.
Exhibit B Allocations are attached only for informational purposes.

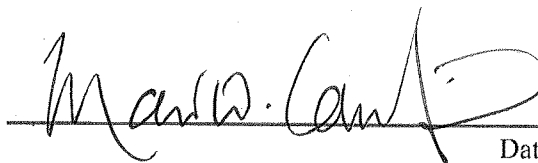
Unless designated otherwise herein, the effective date of this amendment is the date of execution.


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

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

KITTITAS COUNTY PUBLIC HEALTH DEPARTMENT

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

 6/6/12
Date

 6/8/12
Date

APPROVED AS TO FORM ONLY
Assistant Attorney General

**2012-2014 CONSOLIDATED CONTRACT
EXHIBIT A
STATEMENTS OF WORK
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Exhibit A
Statement of Work
Contract Term: 2012-2014

DOH Program Name or Title: 5930 Public Health Funding - Effective January 1, 2012

Local Health Jurisdiction Name: Kittitas County Public Health Department

Contract Number: C16889

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

Period of Performance: January 1, 2012 through Ongoing

Funding Source <input type="checkbox"/> Federal <Select One> <input checked="" type="checkbox"/> State <input type="checkbox"/> Other	Federal Compliance (if applicable) <input type="checkbox"/> ARRA (Recovery Act) <input type="checkbox"/> FFATA (Transparency Act)	Type of Payment <input type="checkbox"/> Reimbursement <input checked="" type="checkbox"/> One-Time Distribution
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Statement of Work Purpose: The purpose of this statement of work is to set forth the requirements for use of funding distributed under the provisions of E2SSB5930 enacted in the 2007 legislative session. This is a performance-based agreement, the purpose of which is to improve the three performance measures as itemized below, in rank order.

Revision Purpose: The purpose of this revision is to change due date for work plan deliverable and correct hyperlink to workplan.

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only)		Current Consideration	Change None	Total Consideration
Blue Ribbon Local Health Funds	N/A	334.04.99	79211100	N/A	N/A	30,000	0	30,000
TOTALS						30,000	0	30,000

Number	Performance Measure	Activities	Deliverables/Due Dates	Payment Amount
1.	Increase the uptake of new and under-used child and adolescent vaccines.	The LHJ shall review its local data related to the respective performance measure, identify areas for improvement, and develop and implement a work plan to make improvements in the respective measure.	LHJ will submit a work plan, using the template provided by the DOH, for its 2012 work addressing the performance measures by February 15 April 6, 2012. The template for the work plan should be accessed at http://www.doh.wa.gov/phip/products/5930/doc/wrkpln-temp.doc http://www.doh.wa.gov/phip/products/5930/resource.htm .	Lump sum payment as follows: January 2012: \$30,000
2.	Improve the timely, complete identification and standard, effective investigation of notifiable conditions per WAC 246-101.			
3.	Develop and implement effective community and health care system interventions to address obesity and its consequent burden of chronic disease. Interventions may target worksites, schools, communities or primary medical care.	The LHJ will begin new or add to or enhance existing work in such a manner to positively impact the performance measures in rank order. The LHJ will report required data for each performance measure. See additional note in Special References section.	At any time LHJ substantively changes its work plan, it will promptly submit the updated work plan to DOH. LHJ will report required data for each performance measure based on the guidelines contained in the document "Metrics to Support 5930 Performance Measures" amended June 1, 2009. This document may be updated from time to time to provide additional information in the "Notes" section only (no changes will be made to the "Performance Measure," "Reporting Measure" or "Data Source" sections) and should be accessed on the DOH website at http://www.doh.wa.gov/PHIP/products/5930/doc/metrics.pdf for the most up-to-date revision.	

Program Specific Requirements/Narrative

RCW 43.70.512, RCW 43.70.514, RCW 43.70.516, RCW 43.70.520, and RCW 43.70.522.

DOH Program Contact (Name, Program Title, Mailing Address, Email Address, Phone & Fax Number)

Kay Koth

Office of Public Health Systems Development

Department of Health

Mailing address: P O Box 47890, Olympia, WA 98504-7890

Street address: 101 Israel Rd SE, Tumwater, WA 98501

360-236-4061/Fax 360-586-7424

Email: kay.koth@doh.wa.gov

Exhibit A
Statement of Work
Contract Term: 2012-2014

DOH Program Name or Title: Maternal & Child Health - Effective January 1, 2012

Local Health Jurisdiction Name: Kittitas County Public Health Department

Contract Number: C16889

SOW Type: Revision **Revision # (for this SOW)** 2

Period of Performance: January 1, 2012 through December 31, 2012

Funding Source <input checked="" type="checkbox"/> Federal Subrecipient <input type="checkbox"/> State <input type="checkbox"/> Other	Federal Compliance (if applicable) <input type="checkbox"/> ARRA (Recovery Act) <input checked="" type="checkbox"/> FFATA (Transparency Act)	Type of Payment <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
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Statement of Work Purpose: The purpose of this statement of work is to add Maternal and Child Health Block Grant (MCHBG) activities and funding for the contract year January 1, 2012 to December 31, 2012.

Revision Purpose: The purpose of this revision is to add FFY11 funding to be spent by Sept 30, 2012; extend FFY12 funding through Dec 31, 2012, and add required training and travel funds in preparation for the 2013 MCH Consolidated Contract statement of work.

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			
FFY12 MCHBG HCO CONCON FEDERAL	93.994	333.99.94	78131221	01/01/12	12/31/12	32,713	700	33,413
FFY11 MCHBG HCO CONCON FEDERAL	93.994	333.99.94	7813121A	01/01/12	09/30/12	0	10,904	10,904
TOTALS						32,713	11,604	44,317

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
The MCHBG Activity Plans are operational documents which include further details of those LHJ contract activities listed in the Task/Activity column of this statement of work and may change over the course of this contract period.					
1.	Work with the local community to assure maternal-child health problems are identified and addressed and that women, children, adolescents and their families, including those with special health care needs, have access to comprehensive, quality systems of care and are linked to needed services.				
	<u>POPULATION BASED SERVICES</u> PB 3.2 Media campaigns or educational programs PB 7.5 Injury prevention services such as car seat safety, traffic safety, bicycle helmets PB 7.8 Vaccine distribution and immunization outreach PB 7.14 Write In: School health programs		Complete a Final Annual Report and Federal MCH Report on 2011 activities. Complete Mid-Year Review , via phone or email, with Maternal and Child Health (MCH) ConCon Coordinator, of progress on contract activities listed in your MCHBG 2011-2012 Activity Plan.	March 2, 2012 July 13, 2012	Reimbursement for actual costs, not to exceed total MCH program contract funding. <i>Bill to FFY11 MCHBG HCO ConCon Federal Master Index (MI) Code 7813121A first through September 30, 2012.</i>

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<u>ENABLING SERVICES</u> EN 7.1 Care coordination for CSHCN <u>DIRECT HEALTH SERVICES</u> DHS 7.6.2 Direct health services for incarcerated women		Submit an Interim Annual Report and Federal MCH Report on submitted and approved work activities listed on your MCHBG 2011-2012 Activity Plan to MCH ConCon Coordinator.	December 31, 2012	
2.	Administer allocated funds for diagnosis and treatment of infants and children according to Children with Special Health Care Needs (CSHCN) Program policies and procedures.				
2.1	Complete intake and renewal process into Child Health Intake Form (CHIF) Automated System on all infants and children receiving assistance and accessing services through the CSHCN Program. Submit CHIF client data on computer diskette for all children served, both new and renewals, according to CSHCN Program policies and procedures.		Client data on CD	Submit quarterly	NA
2.2	Complete a Health Services Authorization (HSA) form for purchased CSHCN services.		Completed HSA forms	Submit when generated	NA
2.3	Manage DX/TX allocation fund balance; track and report status of obligations according to CSHCN Program policies & procedures.		DX/TX Allocation fund report	Submit monthly	NA
3.	<i>In preparation for the 2013 MCHBG Consolidated Contract Statement of Work (SOW), LHJ will be required to send the MCH Coordinator from their agency to attend required trainings on the new SOW. Travel funds are being provided for attendance at these training sessions to be held Oct – Dec 2012, location details to be announced (TBA) at a later date.</i>				
3.1	<i>Funding is being provided to attend required trainings in preparation for the 2013 MCH Consolidated Contract SOW.</i>		<i>Training dates & location TBA</i> <i>Training content:</i> <i>*Needs Assessment</i> <i>*2013 SOW Requirements</i> <i>*CATALYST Online reporting system</i> <i>*Life course</i> <i>*Developmental Screening</i> <i>*Adverse Childhood Experiences (ACES)</i> <i>*Health Equity</i>	<i>Travel and Attend required trainings between Oct – Dec 2012 (dates & location TBA)</i>	<i>Reimbursement for actual costs up to \$700.00.</i> <i>Bill to:</i> <i>FFY12 MCHBG HCO</i> <i>ConCon Federal</i> <i>MI code: 78131221</i>

***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 revised Standards/Measures that may apply, can be found at:

<http://www.doh.wa.gov/PHIP/catalog/topic/phs.htm>

Program Specific Requirements/Narrative**Special Requirements:****Federal Funding Accountability and Transparency Act (FFATA)**

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

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

Program Manual, Handbook, Policy References:

See submitted MCHBG 2011-2012 Activity Plans for agency specific approved work activities.
Children with Special Health Care Needs Manual 11/09

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

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

Special References (RCWs, WACs, etc):

“HRSA -Understanding Title V of the Social Security Act” http://ask.hrsa.gov/detail_materials.cfm?ProdID=687

“Social Security Act Title V Laws” http://www.ssa.gov/OP_Home/ssact/title05/0500.htm

Monitoring Visits (frequency, type):

1. Mid-year check-in - July
2. Review and Approve Program Reports for calendar year 2011 and 2012

DOH Program Contact

Donna Compton, MCH ConCon Coordinator
Department of Health
PO Box 47855, Olympia, WA 98504-7855
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360-236-3558

Exhibit A
Statement of Work
Contract Term: 2012-2014

DOH Program Name or Title: Office of Drinking Water Group A Program -
Effective January 1, 2012

Local Health Jurisdiction Name: Kittitas County Public Health Department

Contract Number: C16889

SOW Type: Revision **Revision # (for this SOW)** 2

Period of Performance: January 1, 2012 through December 31, 2014

Funding Source	Federal Compliance (if applicable)	Type of Payment
<input checked="" type="checkbox"/> Federal Vendor	<input type="checkbox"/> ARRA (Recovery Act)	<input type="checkbox"/> Reimbursement
<input checked="" type="checkbox"/> State	<input type="checkbox"/> FFATA (Transparency Act)	<input checked="" type="checkbox"/> Fixed Price
<input type="checkbox"/> Other		

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

Revision Purpose: The purpose of this revision is to increase funding consideration and to revise Special Billing Requirements and Special Instructions.

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			
Drinking Water Group A - SS	66.468	333.66.48	2421921C	01/01/12	12/31/12	250	2,000	2,250
Drinking Water Group A - TA	66.468	333.66.48	2421921D	01/01/12	12/31/12	2,000	0	2,000
Drinking Water Group A – SS State	N/A	334.04.98	2421252C	01/01/12	12/31/12	250	2,000	2,250
TOTALS						2,500	4,000	6,500

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Trained LHJ staff will conduct sanitary surveys of small community and non-community Group A water systems identified by DOH Office of Drinking Water (DOH) Regional Office. See Special Instructions for task activity.		1. Provide inspection reports to DOH Regional Office where the water system is located. Reports shall include: a. Cover letter. b. Small Water System checklist. c. Updated Water Facilities Inventory (WFI). d. Photos of water system. e. Any other supporting documents.	Inspection reports due to the DOH Regional Office within 30 days of conducting the sanitary survey.	LHJ shall be paid \$500 for each completed sanitary survey (inclusive of all associated costs such as consulting fee, travel, lodging, per diem). Payment is authorized upon receipt and acceptance of inspection reports and submittal of quarterly reports documenting deliverables.

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
			<p>2. Provide DOH Regional Office with quarterly reports documenting deliverables. Reports shall include:</p> <ul style="list-style-type: none"> a. List of sanitary surveys conducted during the quarter. b. List of uncooperative systems. c. Water system identified by name, PWS ID#, county, and date surveyed. <p>See Special Instructions for deliverable timeframes.</p>	<p>Quarterly reports due to the DOH Regional Office within 30 days of the end of the quarter.</p> <p>Quarterly periods are: Jan 1 - March 31 April 1 - June 30 July 1 – Sept 30 Oct 1 – Dec 31</p>	
2	<p>Trained LHJ staff will provide limited direct technical assistance to small community and non-community Group A water systems identified by DOH Regional Office. Limited direct technical assistance includes:</p> <p>A. Special Purpose Investigations (SPI)</p> <p>B. Follow-up visit after initial technical assistance or sanitary survey to confirm work and recommendations were addressed.</p> <p>C. Assist water system operator through one-on-one training or TA in completing work and recommendations requested by the DOH to meet applicable drinking water regulations.</p> <p>See Special Instructions for task activity.</p>		<p>1. Provide inspection reports to DOH Regional Office where the water system is located. Reports shall include:</p> <ul style="list-style-type: none"> a. Summary of assistance provided, overall findings and recommendations. b. Any supporting documents and photos. c. Water system identified by name, PWS ID#, county, and date assistance provided. <p>2. Provide DOH Regional Office with quarterly reports documenting deliverables. Reports shall include:</p> <ul style="list-style-type: none"> a. List summarizing technical assistance provided during the quarter. b. Water system identified by name, PWS ID#, county, and date surveyed. 	<p>Inspection reports due to the DOH Regional Office within 30 days of providing technical assistance, except that SPIs due to a coliform exceedance incident (Task 2A) must be completed and the report submitted to the DOH Regional Office within 2 working days of the service request.</p> <p>Quarterly reports are due to the DOH Regional Office within 30 days of the end of the quarter.</p> <p>Quarterly periods are: Jan 1 - March 31 April 1 - June 30 July 1 – Sept 30 Oct 1 – Dec 31</p>	<p>LHJ shall be paid for each completed task at the rate specified below (inclusive of all associated costs):</p> <p>Task 2A: \$500 Task 2B: \$500 Task 2C: \$750</p> <p>Payment is authorized upon receipt and acceptance of inspection reports and submittal of quarterly reports documenting deliverables</p>

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
3	<p>LHJ staff performing the activities under tasks 1 and 2 will participate annually in one or more of the following DOH-sponsored sanitary surveyor trainings and/or regional DOH-LHJ meetings:</p> <ul style="list-style-type: none"> • Introductory Sanitary Survey Training • Intermediate Sanitary Survey Training • Advanced Sanitary Survey Workshop • Regional DOH-LHJ Drinking Water meetings 		Prior to attending the training, submit an "Authorization for Travel (Non Employee)" DOH Form 710-013 to the DOH Program Contact below for approval (to ensure that enough funds are available).	Annually	<p>LHJ shall be paid mileage, per diem, and lodging costs in accordance with the current rates listed on the OFM Website</p> <p>http://www.ofm.wa.gov/resources/travel.asp</p>

***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 revised Standards/Measures that may apply, can be found at:

<http://www.doh.wa.gov/PHIP/catalog/topic/phs.htm>

Program Specific Requirements/Narrative**Staffing Requirements**

Trained staff includes staff who have participated annually in one of the DOH-sponsored introductory, intermediate, or advanced Sanitary Surveyor trainings described under Task 3 above.

Special References (RCWs, WACs, etc)

Chapter 246-290 WAC is the set of rules that regulate Group A water systems. By this statement of work, DOH contracts with the LHJ to conduct sanitary surveys for small community and non-community water systems with groundwater sources. DOH retains responsibility for conducting sanitary surveys for small community and non-community water systems with surface water sources, with the option that the LHJ may request a joint survey.

Special Billing Requirements

The LHJ shall submit quarterly invoices within 30 days following the end of the quarter in which work was completed, noting on the invoice the quarter and year being billed for. Payment cannot exceed a maximum accumulative fee of ~~\$500~~ \$4,250 for **Task 1** and **\$2,000** for **Task 2** and **Task 3** combined during the contracting period, to be paid at the rates specified in the Payment Method/Amount section above. When invoicing for sanitary surveys, bill \$250 to BARS Revenue Code 333.66.48 and \$250 to BARS Revenue Code 334.04.98.

When invoicing for **Task 3**, submit receipts and the signed pre-authorization form for non-employee travel to the DOH Program Contact below and a signed A19-1A Invoice Voucher to the DOH Consolidated Contracts Office, billing to BARS Revenue Code 333.66.48 under Technical Assistance (TA).

Special Instructions**Task 1**

LHJ will evaluate the water system for physical and operational deficiencies and prepare a written inspection report. The inspection will include an evaluation of the following eight elements: source; treatment; distribution system; finished water storage; pumps, pump facilities and controls; monitoring, reporting and data verification; system management and operation; and certified operator compliance. If a system is more complex than anticipated or other significant issues arise, the LHJ may request DOH assistance.

No more than 19 surveys to be completed during this contracting period.

Task 2

The DOH Regional Office shall authorize in advance any technical assistance provided by the LHJ to a water system. LHJ and DOH shall mutually agree on the technical assistance to be provided. Technical assistance is defined below and will be paid at the rate specified in the Payment Method/Amount section above.

Task 2A: Special Purpose Investigations (SPI) are inspections to determine the cause of positive coliform samples or emergency problems or as a follow-up investigation to help small water systems address deficiencies found during a routine sanitary survey. This can also include sanitary surveys of newly discovered Group A water systems. Activities could include:

- Assisting water system in preparing a coliform monitoring plan.
- Educating them on the importance of monitoring and reporting.
- Conducting one-on-one training on chlorinator operations and maintenance including, but not limited to, chlorine dosage solution preparation, chemical feed pump adjustments, and chlorine residual tests.
- Conducting one-on-one training on flushing and disinfecting techniques of lines after repairs or new construction.
- Assisting them to evaluate for potential high health cross connection hazards requiring premises isolation and determine the need for a cross connection control specialist to help them implement a cross connection control program.
- Other activities as necessary to help in achieving compliance with applicable drinking water regulations and sound operations and management.

Task 2B: Follow-up visit after initial technical assistance was provided or sanitary survey was conducted to confirm work and recommendations requested by DOH were addressed or completed.

Task 2C: Assist small water systems in completing work and recommendations requested by the DOH Regional Office to meet applicable drinking water regulations. Activities could include:

- Assisting water system in completing a Source Susceptibility Assessment and pursuing a susceptibility waiver, as applicable.
- Assisting water system in developing a water quality monitoring, reporting and treatment technique program and conducting one-on-one training to help water system achieve compliance with applicable water quality parameters.
- Assisting water system in completing a Small Water System Management Program (SWSMP) guide or Existing System Approval (ESA) for submittal to the DOH regional office.
- Other activities and one-on-one training or consultation as necessary to help in achieving compliance with applicable drinking water regulations and sound operations and management.

DOH Program Contact:

Danielle Russell
DOH Office of Drinking Water
16201 E. Indiana Ave, Suite 1500
Spokane Valley, WA 99216
Danielle.Finley@doh.wa.gov
(509) 329-2136

DOH and LHJ Roles

TASK	ODW	LHJ
Prioritize water systems to be surveyed and technical assistance to be provided during the contract period.	X	
Notify selected systems of the sanitary survey requirement or technical assistance to be provided.	X	
Schedule survey and if needed, request a pre-survey data packet.		X
Review pre-survey data prior to inspection.		X
Perform inspection and send draft inspection report to DOH for concurrence prior to sending a copy to the Purveyor. Inspection reports to include deliverables as specified above for each task.		X
Prior to sending inspection report to purveyor, DOH will review inspection report to determine the public health significance of any findings and (if needed) provide additional instructions to the purveyor. Draft report will be returned to LHJ within 3 days.	X	
When survey findings indicate a need for immediate corrective action per the Significant Deficiencies Directive Memorandum K.02, DOH will follow-up with the system to ensure the deficiencies have been corrected. If necessary, DOH will develop a compliance strategy. Formal enforcement could include: A Bilateral Compliance Agreement (BCA), Departmental Order (DO), or State Health Order (SHO).	X	
If the Purveyor is uncooperative and refuses the survey, LHJ will notify DOH Sanitary Survey Coordinator.		X
DOH will send a second letter reminding the system of their survey requirement.	X	
If the Purveyor is still uncooperative and refuses the survey, LHJ will notify DOH Sanitary Survey Coordinator.		X
DOH will issue a Notice of Violation (NOV) with an offer for a Bilateral Compliance Agreement (BCA) to the non-responsive system.	X	
DOH will invoice water system upon completion of inspection (unless LHJ collects local fees)	X	
Submit A-19 1A invoice to DOH Contracts Office for payment. Provide a copy to the Eastern Regional Office.		X
Perform joint quality control surveys with DOH.	X	X
Annually review and confirm work completed; schedule new assignments; re-negotiate contract and discuss concerns or provide feedback on the program and process.	X	X

Exhibit A
Statement of Work
Contract Term: 2012-2014

DOH Program Name or Title: Performance Management Center for Excellence-
 QI Project - Effective January 1, 2012

Local Health Jurisdiction Name: Kittitas County Public Health Department

Contract Number: C16889

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

Funding Source	Federal Compliance (if applicable)	Type of Payment
<input checked="" type="checkbox"/> Federal Subrecipient	<input type="checkbox"/> ARRA (Recovery Act)	<input checked="" type="checkbox"/> Reimbursement
<input type="checkbox"/> State	<input type="checkbox"/> FFATA (Transparency Act)	<input type="checkbox"/> Fixed Price
<input type="checkbox"/> Other		

Period of Performance: January 1, 2012 through September 29, 2012

Statement of Work Purpose: The purpose of this statement of work is to revise provide funding for quality improvement (QI) training to LHJ staff that presents concepts, tools, and methods based on the Lean Enterprise principles. Once training is completed, they will work with their community hospital and begin to identify improvement projects to use Lean tools.

Revision Purpose: The purpose of this revision is to change the due date for Task 5, change the description of the deliverable for Task 6, and update the list of purchased reference materials in Task 8.

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 None	Total Consideration
FFY11 Strengthening Pub Hlth Infrastructure	93.507	333.95.07	91106211	01/01/12	09/29/12	9,858	0	9,858
TOTALS						9,858	0	9,858

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	LHJ will participate in pre- and post-evaluations by the Northwest Center for Public Health Practice during this grant period	Public Health Accreditation Board Standards and Measures Version 1.0 Domain 9	LHJ will provide timely responses to pre- and post-evaluations by the Northwest Center for Public Health Practice during this grant period.	January 31, 2012 and August 31, 2012	Reimbursement for actual costs incurred, upon DOH receipt and approval of deliverables, not to exceed total funding
2	LHJ will host one (1) eight-hour quality training introducing quality improvement in public health with emphasis on Lean concepts, tools, and methods, presented by Spokane Performance Management Center for Excellence. All LHJ staff members will attend.	Public Health Accreditation Board Standards and Measures Version 1.0 Domain 9	Attendance of fifteen (15) staff at the eight-hour training Training materials presented by the Spokane Center staff Travel by Spokane Center staff to Ellensburg	February 29, 2012	Reimbursement for actual costs incurred, upon DOH receipt and approval of deliverables, not to exceed total funding
3	An interim report will describe activities through March 1, 2012.	Public Health Accreditation Board Standards and Measures	One (1) written, interim report describing how the training is being implemented, the activities	March 1, 2012	Reimbursement for actual costs incurred, upon DOH receipt

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		Version 1.0 Domain 9	completed, number of staff trained, reference materials supplied and remaining training planned. The report will include attendees at each training		and approval of deliverables, not to exceed total funding
4	LHJ will host a second eight-hour quality training specifically focused on Lean concepts, tools, and methods, presented by Spokane Performance Management Center for Excellence. The LHJ's six (6) management team members will attend the second training.	Public Health Accreditation Board Standards and Measures Version 1.0 Domain 9	Attendance of all six (6) management team members at the eight-hour training Training materials presented by the Spokane Center staff Travel by Spokane Center staff to Ellensburg	March 31, 2012	Reimbursement for actual costs incurred, upon DOH receipt and approval of deliverables, not to exceed total funding
5	LHJ will coordinate with Kittitas Valley Community Hospital Lean team to learn about their Lean efforts	Public Health Accreditation Board Standards and Measures Version 1.0 Domain 9	Attendance of all six (6) management team members at a two-hour meeting with Kittitas Valley Community Hospital staff Record of meeting: agenda, attendance, minutes, planned next steps	March 31 April 30, 2012	Reimbursement for actual costs incurred, upon DOH receipt and approval of deliverables, not to exceed total funding
6	LHJ will hold a brainstorming via email with Kittitas Valley Community Hospital LHJ staff to gather ideas for process/quality improvement in 2012	Public Health Accreditation Board Standards and Measures Version 1.0 Domain 9	Attendance of fifteen (15) LHJ staff at a one-hour will brainstorm meeting via email to create list of possible quality improvements for 2012. Record of meeting: agenda, attendance, minutes, email exchange and list developed from brainstorm planned next steps	March 31, 2012	Reimbursement for actual costs incurred, upon DOH receipt and approval of deliverables, not to exceed total funding
7	The LHJ management team will select at least two (2) small or one (1) large quality improvement project that will use Lean tools and methods	Public Health Accreditation Board Standards and Measures Version 1.0 Domain 9	Attendance of all six (6) management team members at a two-hour meeting to select project(s) Record of meeting: agenda, attendance, minutes, planned next steps	April 30, 2012	Reimbursement for actual costs incurred, upon DOH receipt and approval of deliverables, not to exceed total funding

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
8	LHJ will purchase reference materials for a quality management library	Public Health Accreditation Board Standards and Measures Version 1.0 Domain 8	Documentation of purchase of: <i>“North Carolina Center for Public Health Quality Improvement: The Improvement Guide”</i> “The Quality Toolbox” “The Public Health Quality Improvement Handbook” <i>“The Team Handbook, Third Edition”</i> <i>“Quality Function Deployment and Lean-Six Sigma Applications in Public Health”</i> <i>“The Improvement Guide: A Practical Approach to Enhancing Organizational Performance”</i>	April 30, 2012	Reimbursement for actual costs incurred, upon DOH receipt and approval of deliverables, not to exceed total funding
9	LHJ will submit a final written report	Public Health Accreditation Board Standards and Measures Version 1.0 Domain 9	One (1) written, final report describing the activities completed, number of staff trained, attendance at trainings and meetings, how the training was used to benefit the agency, decisions made, implementation of quality improvement efforts, involvement of Kittitas Valley Community Hospital.	September 29, 2012	Reimbursement for actual costs incurred, upon DOH receipt and approval of deliverables, not to exceed total funding

***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 revised Standards/Measures that may apply, can be found at:

<http://www.doh.wa.gov/PHIP/catalog/topic/phs.htm>

DOH Program Contact (Name, Program Title, Mailing Address, Email Address, Phone & Fax Number)

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Exhibit A
Statement of Work
Contract Term: 2012-2014

DOH Program Name or Title: Public Health Emergency Preparedness & Response
(PHEPR) – Effective January 1, 2012

Local Health Jurisdiction Name: Kittitas County Public Health Department

Contract Number: C16889

SOW Type: Revision **Revision # (for this SOW)** 2

Period of Performance: January 1, 2012 through August 9, 2012

Funding Source <input checked="" type="checkbox"/> Federal Subrecipient <input type="checkbox"/> State <input type="checkbox"/> Other	Federal Compliance (if applicable) <input type="checkbox"/> ARRA (Recovery Act) <input type="checkbox"/> FFATA (Transparency Act)	Type of Payment <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
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Statement of Work Purpose: The purpose of this statement of work is to provide funding for FFY11 Public Health Emergency Preparedness & Response activities beginning January 1, 2012.

Revision Purpose: The purpose of this revision is to add funds not used in 2011 contract and amend language for task 2.10.

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			
FFY11 PHEPR LHJ FUNDING	93.069	333.90.69	18101239	01/01/12	08/09/12	26,944	11,881	38,825
FFY11 PHEPR HC SYSTEMS - PREP	93.889	333.98.89	61308201	01/01/12	06/30/12	5,000	0	5,000
TOTALS						31,944	11,881	43,825

ASPR ACTIVITIES:

Task Number	Task/Activity Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.20	Attend six (6) regional Health Care Coalition meetings		After Action Report of the meeting, a list of tasks for Kittitas County (if any), a list of key points to be communicate to local coalition, and ideas for improving emergency preparedness in Kittitas County.	10 days post attendance	Reimbursement for costs, not to exceed total funding consideration amount.
	Provide Region 7 Health Care Coalition update to community emergency management partners		Documentation (meeting minutes) that an update was provided to county emergency response partners, Kittitas County Emergency Management Council (KCEMC) and Kittitas County		

Task Number	Task/Activity Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
			Health Care Coalition (KCHCC).		
1.21	Participate in the two (2) scheduled Region 7 functional exercises which include a healthcare component.		After Action Report of the exercise, a list of key points to be communicate to local partners, and ideas for improving emergency preparedness in Kittitas County.	10 days post attendance	
	Educate county emergency management partners on Region 7 functional exercises lessons learned.		Updated emergency response plans with lessons learned in functional exercise.	06/30/12	
			Documentation (meeting minutes) that an update was provided to county emergency response partners, Kittitas County Emergency Management Council (KCEMC) and Kittitas County Health Care Coalition (KCHCC).	By the end of the month.	
1.22	Educate Central Washington University (CWU) Paramedic students on the importance of participation in emergency response activities.		A copy of the presentation.	06/30/12	
	Facilitate enrollment of paramedic students into WASERVE (formerly WAHVE).		Number of paramedic students enrolled in WASERVE (formerly WAHVE).	06/30/12	
1.23	Integrate lessons learned from regional meetings and Region 7 functional exercises into LHJ annual all staff training.		A summary of content integrated into all staff training.	06/30/12	

CDC ACTIVITIES:

Task Number	Task/Activity Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
2.1	Complete a DOH provided gap analysis tool of the Centers for Disease Control (CDC) Public Health Emergency Preparedness (PHEP) Capabilities		Submit completed gap analysis.	Within 45 days of receipt of tool, whichever is later	Reimbursement for costs, not to exceed total funding

Task Number	Task/Activity Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
2.2	Complete a DOH provided work plan template outlining details for the first year, and projected activities for the following 4 years. First year activities should be based on the priorities identified in the gap analysis.		Submit a completed work plan. Submit end of year progress report on activities.	01/31/12 or within 45 days of the receipt of the template, whichever is later 08/01/12	consideration amount.
2.3	Update local plans (emergency response, emergency communications, communicable disease, and training and exercise) as the 15 CDC capabilities are developed in the jurisdiction.		Submit updated plans, procedures, and/or protocols (as applicable) to DOH.	08/01/12	
2.4	Each LHJ is to be available 24/7 for urgent or emergency issues and participate in regular state-initiated testing.		Provide DOH (Office of Public Health Planning and Development) with current agency emergency phone number(s).	08/01/12	
2.5	Provide training and educational opportunities to public health staff and community partners as applicable.		Submit training records not contained in SmartPH using the format provided by DOH.	03/01/12 and 08/01/12	
2.6	Each LHJ will conduct a tabletop or more complex exercise of a portion of their emergency response plan (see PHEPR Activities Guidance and Clarification document for specific requirements). Participate in the Regional Healthcare Coalition medical surge exercise.		Submit after action reviews and corrective action plans.	60 days after the exercise	
2.7	Maintain emergency communications equipment and participate in a quarterly test of satellite phones.		Submit test results to DOH	Quarterly	
2.8	Adhere to federal National Incident Management System (NIMS) compliance guidelines and report compliance activities. Specific information about current NIMS requirements can be found on the Federal Emergency Management Agency (FEMA) website: : http://www.fema.gov/emergency/nims/		Report compliance activities through DOH provided on-line reporting tool.	08/01/12	
2.9	Participate in DOH initiated surveys regarding systems and surveillance data as requested.		Submit completed surveys, assessments, and disease outbreak summaries.	Within 30 days of request.	

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 revised Standards/Measures that may apply, can be found at: <http://www.doh.wa.gov/PHIP/catalog/topic/phs.htm>

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Kittitas County Public Health Department

EXHIBIT B-2
ALLOCATIONS
Contract Term: 2012-2014

Contract Number: C16889
Date: March 15, 2012

Chart of Accounts Program Title	Amendment	CFDA*	BARS Revenue Code*	Statement of Work Funding Period		DOH Use Only Chart of Accounts Funding Period		Amount	Funding Period Sub Total	Chart of Accounts Total
				Start Date	End Date	Start Date	End Date			
Drinking Water Group A - SS	N/A	66.468	333.66.48	01/01/12	12/31/12	07/01/11	06/30/13	\$3,500		
Drinking Water Group A - SS	Amend 1	66.468	333.66.48	01/01/12	12/31/12	07/01/11	06/30/13	(\$3,250)		
Drinking Water Group A - SS	Amend 2	66.468	333.66.48	01/01/12	12/31/12	07/01/11	06/30/13	\$2,000	\$2,250	\$2,250
Drinking Water Group A - TA	N/A	66.468	333.66.48	01/01/12	12/31/12	07/01/11	06/30/13	\$2,000	\$2,000	\$2,000
PHEPR LHJ Funding	N/A	93.069	333.90.69	01/01/12	08/09/12	08/10/11	08/09/12	\$26,944		
PHEPR LHJ Funding	Amend 2	93.069	333.90.69	01/01/12	08/09/12	08/10/11	08/09/12	\$11,881	\$38,825	\$38,825
AFIX	N/A	93.268	333.92.68	01/01/12	12/31/12	01/01/12	12/31/12	\$8,014	\$8,014	\$8,014
317 Ops	N/A	93.268	333.92.68	01/01/12	12/31/12	01/01/12	12/31/12	\$1,885	\$1,885	\$1,885
VFC Ops	N/A	93.268	333.92.68	01/01/12	12/31/12	01/01/12	12/31/12	\$3,506	\$3,506	\$3,506
Strengthening Pub Hlth Infrastructure	Amend 1	93.507	333.95.07	01/01/12	09/29/12	09/30/11	09/29/12	\$9,858	\$9,858	\$9,858
PHEPR HC Systems - Prep	Amend 1	93.889	333.98.89	01/01/12	06/30/12	07/01/11	06/30/12	\$5,000	\$5,000	\$5,000
MCHBG HCO ConCon Federal	Amend 2	93.994	333.99.94	01/01/12	09/30/12	10/01/10	09/30/12	\$10,904	\$10,904	
MCHBG HCO ConCon Federal	N/A	93.994	333.99.94	01/01/12	12/31/12	10/01/11	09/30/13	\$32,713		
MCHBG HCO ConCon Federal	Amend 2	93.994	333.99.94	01/01/12	12/31/12	10/01/11	09/30/13	\$700	\$33,413	\$44,317
GFS Local Capacity	Amend 1	N/A	334.04.92	01/01/12	06/30/12	07/01/11	06/30/13	\$22,920		
GFS Local Capacity	Amend 1	N/A	334.04.92	07/01/12	12/31/12	07/01/11	06/30/13	\$22,920	\$45,840	\$45,840
Youth Tobacco Prevention	N/A	N/A	334.04.93	01/01/12	06/30/12	07/01/11	06/30/13	\$2,893	\$2,893	\$2,893
Drinking Water Group A - SS State	N/A	N/A	334.04.98	01/01/12	12/31/12	07/01/11	06/30/13	\$3,500		
Drinking Water Group A - SS State	Amend 1	N/A	334.04.98	01/01/12	12/31/12	07/01/11	06/30/13	(\$3,250)		
Drinking Water Group A - SS State	Amend 2	N/A	334.04.98	01/01/12	12/31/12	07/01/11	06/30/13	\$2,000	\$2,250	\$2,250
Blue Ribbon Local Health Funds	Amend 1	N/A	334.04.99	00/00/00	00/00/00	00/00/00	00/00/00	\$30,000	\$30,000	\$30,000
TOTAL								\$196,638	\$196,638	
Total consideration:		\$169,153						GRAND TOTAL		\$196,638
		\$27,485								
GRAND TOTAL		\$196,638						Total Fed		\$115,655
								Total State		\$80,983

*Catalog of Federal Domestic Assistance

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