PACIFIC COUNTY HEALTH & HUMAN SERVICES DEPARTMENT
2012 – 2014 CONSOLIDATED CONTRACT

CONTRACT NUMBER: C16896 **AMENDMENT NUMBER: 11**

PURPOSE OF CHANGE: To amend this contract between the DEPARTMENT OF HEALTH hereinafter referred to as "DOH", and PACIFIC COUNTY HEALTH & HUMAN SERVICES 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 Statements of Work for the following programs:

   - OICP-PPHF Vaccine Storage & Handling Project - Effective September 1, 2013

   ☒ Amends Statements of Work for the following programs:

   - Maternal & Child Health Block Grant - Effective January 1, 2013
   - Public Health Emergency Preparedness & Response (PHEPR) - Effective July 1, 2013
   - Supplemental Nutrition Assistance Program-Education - Effective October 1, 2013

   ☐ Deletes Statements of Work for the following programs:

2. Exhibit B-11 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-10 Allocations as follows:

   ☐ Increase of _____ for a revised maximum consideration of _____.

   ☒ Decrease of **$72,581** for a revised maximum consideration of **$1,130,017**.

   ☐ No change in the maximum consideration of _____.
   Exhibit B Allocations are attached only for informational purposes.

3. Exhibit C-5 Schedule of Federal Awards, attached and incorporated by this reference, amends and replaces Exhibit C-4.

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.

PACIFIC COUNTY HEALTH & HUMAN SERVICES DEPARTMENT

_____
Date

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

_____
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: Maternal & Child Health Block Grant - Effective January 1, 2013

Local Health Jurisdiction Name: Pacific County Health & Human Services Department
Contract Number: C16896

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

Funding Source	Federal Compliance (if applicable)	Type of Payment
☒ Federal Subrecipient	☐ ARRA (Recovery Act)	☒ Reimbursement
☐ State	☒ FFATA (Transparency Act)	☐ Fixed Price
☐ Other		

Period of Performance: January 1, 2013 through December 31, 2013

Statement of Work Purpose: The purpose of this statement of work is to add new focus of work and funding for Maternal and Child Health Block Grant (MCHBG) related activities.

Revision Purpose: The purpose of this revision is to add task 3c, provide additional funding from 10/01/13 to 12/31/13 for continuation of MCHBG related activities, and delete the special instructions regarding funding period and tasks.

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
FFY13 MCHBG OHC CONCON FEDERAL	93.994	333.93.99	78734231	01/01/13	09/30/13	28,467	0	28,467
FFY14 MCHBG CBP CONCON	93.994	333.93.99	78734240	10/01/13	12/31/13	0	9,488	9,488
TOTALS						**28,467**	**9,488**	**37,955**

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
Maternal and Child Health Block Grant (MCHBG) Administration and Year End Closeout of 2013 Contract					
1a	Identify MCHBG-focused carry forward activities and submit transition proposal to DOH contract manager, using DOH-supplied template.		Transition proposal	January 31, 2013	Reimbursement for actual costs, not to exceed total funding consideration. See Program Specific Requirements.
1b	Complete a proposed budget using template provided by DOH.		Completed budget submitted electronically.	April 15, 2013	
1c	Participate in calls, at a minimum of every other month, with DOH contract manager. Dates and time for calls are mutually agreed upon between DOH and LHJ.		Designated LHJ staff will participate in contract management calls.	December 31, 2013	
1d	Participate in DOH sponsored MCHBG-related quarterly conference calls and/or webinars, including up to two (2) in-person meetings.		Designated LHJ staff will participate in calls, webinars, and meetings.	December 31, 2013	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1e	Complete MCHBG Federal Report Form 4, which includes budget details by types of individuals served. DOH will supply the form.		Submit MCHBG Federal Report Form 4 electronically to contract manager	December 31, 2013	
1f	Report actual expenditures for calendar year 2013 using template provided by DOH.		Submit actual expenditure budget forms electronically to contract manager	December 31, 2013	
1g	Report activities and outcomes of transition plan		Submit short narrative report electronically to contract manager	August 15, 2013	
Planning and Needs Assessments					
2a	Conduct a Maternal and Child Health (MCH) Needs Assessment prior to March 31, 2013. DOH to supply guidance documents.		Submit 1. Electronic summary of MCH Needs Assessment 2. Electronic MCH Gap Analysis Tool	April 15, 2013	Reimbursement for actual costs, not to exceed total funding consideration. See Program Specific Requirements.
2b	Select Children and Youth with Special Health Care Needs (CYSHCN) performance measure (NPM05 required, others optional) and choose or develop SMART Objectives based on Needs Assessment findings from 2a and using DOH-supplied list.		Submit identified performance measure(s) and SMART Objectives electronically using DOH-supplied template	April 15, 2013	
2c	Select either Adverse Childhood Experiences (ACEs) or Universal Developmental Screening (UDS) performance measure and choose or develop SMART Objectives based on Needs Assessment findings from 2a and using DOH-supplied list.		Submit identified performance measure(s) and SMART Objectives electronically using DOH-supplied template	April 15, 2013	
2d	Select up to three (3) additional MCH performance measures and choose or develop SMART Objectives based on Needs Assessment findings related to 2a and using DOH-supplied list and template in coordination with DOH contract manager.		Submit identified performance measure(s) and SMART Objectives electronically.	April 15, 2013	
Implementation					
3a	Develop draft and final action plan that includes each identified SMART Objective from 2b, 2c, and 2d and using DOH-supplied template.		1. Submit draft Action Plan(s) to DOH contract manager for review. 2. Submit final Action Plan(s) to DOH contract manager for	1. Draft by June 15, 2013. 2. Final due by July 15, 2013.	Reimbursement for actual costs, not to exceed total funding consideration. See Program Specific

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
			review.		Requirements and Special Billing Requirements.
3b	Report activities and outcomes of action plan using DOH-provided template		Submit Action Plan Progress Reports for selected SMART Objectives	October 15, 2013 December 30, 2013	
3c	*Develop action plan for January 1, 2014 through September 30, 2014 (to align with the Federal Fiscal Year) using DOH provided template.*		*Submit Action Plan to DOH contract manager.*	*December 6, 2013*	
Children and Youth with Special Health Care Needs (CYSHCN) The Maternal and Child Health Block Grant (MCHBG) continues to require the following basic minimum activities as specified in the CYSHCN Program Manual:					
4a	Complete Child Health Intake Form (CHIF) using the CHIF Automated System on all infants and children served by the CYSHCN Program as referenced in CYSHCN Program Manual.		Submit CHIF data into Secure File Transport (SFT) website: https://sft.wa.gov	April 15, 2013 July 15, 2013 October 15, 2013 December 31, 2013	Reimbursement for actual costs, not to exceed total funding consideration. See Program Specific Requirements.
4b	Administer allocated DOH Diagnostic and Treatment funds for infants and children per CYSHCN Program Manual when funds are used.		Submit completed Health Services Authorization forms and Central Treatment Fund requests directly to the CYSHCN Program as needed.	30 days after forms are completed	
4c	Participate in the CYSHCN Regional System and quarterly meetings as described in the CYSHCN Program Manual.		Evidence of participation at CYSHCN Regional System and quarterly meetings, including quarterly updates and regional representative minutes.	April 15, 2013 July 15, 2013 October 15, 2013 December 31, 2013	

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

Program Specific Requirements/Narrative

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
Children with Special Health Care Needs Manual
ftp://ftp.doh.wa.gov/CSHCN/CSHCN%20Manual%20for%20WEB.pdf

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

1. At least 30% of federal Title V funds must be used for preventive and primary care services for children and at least 30% must be used services for children with special health care needs. [Social Security Law, Sec. 505(a)(3)].

2. Funds may not be used for:
   a. Inpatient services, other than inpatient services for children with special health care needs or high risk pregnant women and infants, and other patient services approved by Health Resources and Services Administration (HRSA).
   b. Cash payments to intended recipients of health services.
   c. The purchase or improvement of land, the purchase, construction, or permanent improvement of any building or other facility, or the purchase of major medical equipment.
   d. Meeting other federal matching funds requirements.
   e. Providing funds for research or training to any entity other than a public or nonprofit private entity.
   f. payment for any services furnished by a provider or entity who has been excluded under Title XVIII (Medicare), Title XIX (Medicaid), or Title XX (social services block grant).[Social Security Law, Sec 504(b)].

3. If any charges are imposed for the provision of health services using Title V (MCH Block Grant) funds, such charges will be pursuant to a public schedule of charges; will not be imposed with respect to services provided to low income mothers or children; and will be adjusted to reflect the income, resources, and family size of the individual provided the services. [Social Security Law, Sec. 505 (1)(D)].

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
- MCH Compendium

Monitoring Visits (frequency, type)
Telephone calls with contract manager at least one every other month.

Special Billing Requirements
Payment is contingent upon DOH receipt and approval of all deliverables and an acceptable A19-1A invoice voucher. Invoices must be submitted at least quarterly and must be based on actual allowable program costs. Monthly invoices on actual allowable program costs will be accepted but an updated Action Plan Progress Report must also be submitted.

Special Instructions
~~*This statement of work is for a twelve month period; however funds are only available until September 30, 2013 at this point. Please complete tasks due by September 30, 2013 only.*~~

Implement all Children and Youth with Special Health Care Needs program activities in accordance with Program Manual.
ftp://ftp.doh.wa.gov/CSHCN/CSHCN%20Manual%20for%20WEB.pdf

Overall Requirements: LHJs will use at least 30 percent of the Federal MCH Block Grant funds received for preventive care services for children and at least 30 percent of Federal MCH Block Grant funds received for children with special health care needs.

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Exhibit A
Statement of Work
Contract Term: 2012-2014

DOH Program Name or Title: OICP-PPHF Vaccine Storage & Handling Project - Effective September 1, 2013

Local Health Jurisdiction Name: Pacific County Health & Human Services Department
Contract Number: C16896

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

Funding Source	Federal Compliance (if applicable)	Type of Payment
☒ Federal Subrecipient	☐ ARRA (Recovery Act)	☒ Reimbursement
☐ State	☒ FFATA (Transparency Act)	☐ Fixed Price
☐ Other		

Period of Performance: September 1, 2013 through August 31, 2014

Statement of Work Purpose: The purpose of this statement of work is to identify tasks, deliverables, and funding for participation in the Prevention and Public Health (PPHF) Vaccine Storage and Handling grant project.

Revision Purpose: N/A

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
FFY12 PPHF IMPROVE VACCINE MGMT	93.733	333.93.73	74901223	09/01/13	08/31/14	0	2,000	2,000
TOTALS						**0**	**2,000**	**2,000**

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
Under the direction of the Project Coordinator or designee the contractor (the LHJ) will assign provider participants to the pilot, administer new materials and resources, gather feedback, complete monthly reports, purchase data loggers, and trouble shoot provider data logger issues.					
1	**Initiate Pilot** Start the pilot work with selected provider sites within the Local Health Jurisdiction (LHJ). 1. Select two (2) provider sites for the pilot from a list provided by the Department of Health (DOH). 2. Distribute provider material packets to the pilot site(s) and provide technical assistance about their use. 2.1. Instructions for pilot providers 2.2. The provider report card 2.3. The new temperature logs for refrigerator / freezer		a) The final list of provider site(s) participating in the pilot. b) Project Progress Report #1: confirm the delivery of material packets, provide proof of data logger purchase and confirm the use of the temperature log by each pilot provider site c) Vaccine Coordinator Pre-Test Online survey	a) September 30, 2013 b) October 15, 2013 c) December 31 , 2013	Reimbursement for actual costs incurred, not to exceed total funding consideration amount

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	2.4. The thermometer and storage unit guidelines 3. Purchase and distribute one DOH- specified data logger to each provider site in the pilot. 4. Confirm pilot provider implementation of the updated temperature log. 5. Facilitate the completion of a pre-test of vaccine storage and handling knowledge (pre-test provided by DOH) with vaccine coordinators in the provider pilot.				
2	**Pilot Feedback and Support** 1. Provide technical assistance and support for provider sites participating in the pilot. 2. Gather feedback on updated materials and tools provided by DOH to the pilot site(s). 2.1. Gather feedback on the report card 2.2. Gather feedback on the temperature log 2.3. Gather feedback on the data logger 3. Participate in periodic conference call that helps and supports LHJs administering the pilot process.		a) Technical Assistance Report Form b) Feedback forms/surveys for the report card, temperature log, data logger c) Project Progress Report #2 d) Participation Log and Question/Answer Sheet	a) February 28, 2014 b) February 28 , 2014 c) February 28, 2014 d) August 31, 2014	Reimbursement for actual costs incurred, not to exceed total funding consideration amount
3	**Post-Pilot** 1. Collect site visit compliance data for pilot provider sites during their regularly scheduled 2014 site visits. 2. Facilitate the completion of a post-test of vaccine storage and handling knowledge (post-test provided by DOH) with vaccine coordinators in the provider pilot. 3. Gather feedback on new materials and tools used by provider sites during the pilot.		a) Site Visit Compliance Questionnaire and pilot data gathering tool for each pilot site. b) Vaccine Coordinator post-test survey c) LHJ Feedback form on the pilot process and the ability to implement materials/tools to all provider sites	a) August 31, 2014 b) August 31, 2014 c) August 31, 2014	Reimbursement for actual costs incurred, not to exceed total funding consideration amount

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

Program Specific Requirements/Narrative

Special Requirements
LHJs must purchase and distribute one data logger for each provider site(s) participating in the pilot. DOH will provide information on the model and specifications required. The estimated price of each data logger will not exceed $200.

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.

Special Billing Requirements:
Reimbursement for actual costs incurred, not to exceed total funding consideration amount.

Contract Manager
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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 July 1, 2013

Local Health Jurisdiction Name: Pacific County Health & Human Services Department

Contract Number: C16896

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

Period of Performance: July 1, 2013 through June 30, 2014

Funding Source	Federal Compliance (if applicable)	Type of Payment
☒ Federal Subrecipient	☐ ARRA (Recovery Act)	☒ Reimbursement
☐ State	☒ FFATA (Transparency Act)	☐ Fixed Price
☐ Other		

Statement of Work Purpose: The purpose of this statement of work is to establish the funding and tasks for the Public Health Emergency Preparedness and Response program for the 2013 - 2014 grant period.

Revision Purpose: The purpose of this revision is to adjust the Technical Assistance Review activity and add the deliverable and due dates.

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
FFY13 PHEPR LHJ FUNDING	93.069	333.93.06	18101430	07/01/13	06/30/14	82,417	0	82,417
TOTALS						**82,417**	**0**	**82,417**

FFY13 PHEPR LHJ FUNDING (PHEP)

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
Admin 1	Complete the reporting templates to comply with federal grant requirements (e.g., performance measures, gap analysis, etc.)		Submit completed templates.	As required	Reimbursement for costs, not to exceed total funding consideration amount.
Admin 2	Develop work plan for the 2014-2015 grant cycle.		Submit completed work plan.	03/14/14	
Admin 3	Complete mid-year and end-of-year reporting.		Submit completed reporting templates.	12/20/13 and 06/30/14	
Admin 4	Attend quarterly meetings in Olympia for the Health Care Coalition and the Hospital Coalition. (Health Officer attends the Hospital Coalition/Director attends the Health Care Coalition)		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
Admin 5	Designate Local Emergency Response Coordinator (LERC).		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.1	Arrange a set of meetings to continue working on the development of public health, mental/behavioral health, and medical care system to support recovery after an incident.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
1.2	Reengage with the Red Cross, adult assisted living centers, home health providers, dialysis care center and the emergency management along with the mental health providers and the two new inpatient chemical dependency group programs in the south county to discuss care during and after an incident.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
1.3	Perform risk assessment of who is involved in care of at risk adults: i.e. visiting nurse program, assisted living centers, and nursing homes in the north county. Engage those providers in a meeting to discuss response in an emergency.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
1.4	Renew Memoranda of Understandings (MOUs) with each identified evacuation site and perform an onsite walkthrough using identified assessment tool.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
4.1	Participate in regular testing of the local health jurisdiction (LHJ) 24/7 phone contact system and testing of communication equipment.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
4.2	Maintain staff's ability to be available for 24/7 call.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
4.3	Maintain and update as needed a list of staff on call 24/7 that are able to receive and send emergency notifications, alerts, and notifiable conditions reporting and communication. The list should include the contact person, title, current phone number and email address.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
4.4	Continue training in risk communication skills with health department staff.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
4.5	Deputy Director to complete Incident Command System (ICS) courses 200,300, 400, and 800 along with training on National Incident Management System (NIMS) Compliance.			*Please see reporting template for specific due dates.	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
4.6	Conduct a table-top exercise developed to use the communication skills learned in training.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
4.7	Have all public health staff practice basics of the Incident Command System (ICS) at least annually in either a table-top or Emergency Operations Center (EOC) quarterly exercises.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
9.1	Complete the TAR self-assessment for Pacific County. ~~*Work towards a score of 69 or more on the TAR assessment.*~~		~~*Submit TAR.*~~ *Submit mid-year and year-end progress reports summarizing activities.*	~~**Please see reporting template for specific due dates.*~~ *12/20/13 and 6/30/14*	
10.1	Review and update Alternate Care Facility (ACF) Plan as needed.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
10.2	Review hospitals Medical Surge Plans and learn what is included in each plan.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
10.3	Review hospitals Medical Surge Plans to determine resource conflicts, where they are, how to make the decision as to where the staff would report to, know what the plans are and determine where the need is.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
10.4	Conduct Medical Reserve Corp (MRC) training to assist with medical surge needs.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
13.1	Participate in Department of Health (DOH) Integrated surveys regarding systems and surveillance data as requested.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	

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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.

DOH Program Contact
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Exhibit A
Statement of Work
Contract Term: 2012-2014

DOH Program Name or Title: Supplemental Nutrition Assistance Program-Education - Effective October 1, 2013

Local Health Jurisdiction Name: Pacific County Health & Human Services Department
Contract Number: C16896

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

Period of Performance: October 1, 2013 through December 31, 2013

Funding Source	Federal Compliance (if applicable)	Type of Payment
☒ Federal Subrecipient	☐ ARRA (Recovery Act)	☒ Reimbursement
☐ State	☒ FFATA (Transparency Act)	☐ Fixed Price
☐ Other		

Statement of Work Purpose: The purpose of this statement of work is to provide Supplemental Nutrition Assistance Program - Education (SNAP-Ed) to improve the likelihood that persons eligible for SNAP (Food Stamps) will make healthy food choices within a limited budget and choose active lifestyles consistent with the cureent USDA dietary guidance system.

Revision Purpose: The purpose of this revision is to shorten the period of performance, add FFY13 Carry-in funding to temporarily resume performance of SNAP-Ed activities from 10/14/13 through 12/31/13 based on DOH's receipt of funds from DSHS during the federal government shutdown and to remove FFY14 funding until a federal budget resolution has been reached and funding is made available.

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 Decrease (–)	Total Consideration
FFY14 DSHS SNAP-Ed IAR	10.561	333.10.56	76430940	10/01/13	09/30/14	92,918	-92,918	0
FFY13 CARRYFORWARD DSHS SNAP ED IAR	10.561	333.10.56	76430931	10/14/13	12/31/13	0	8,849	8,849
TOTALS						**92,918**	**-84,069**	**8,849**

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.0	For SNAP-Ed, the LHJ will perform work as described in the SNAP-Ed Work Plan submitted to DOH and approved by DOH, Department of Social and Health Services (DSHS) and United States Department of Agriculture (USDA) in September 2013, which is incorporated herein by reference.		1. Target audiences reached. 2. Project activities completed 3. Evaluation measures completed	For the Period: 10/01/13-09/30/14 Due: **09/30/14**	Reimbursement upon receipt and approval of deliverables for the funding period will not exceed ~~$92,918.~~ ***$8,849. LHJ*** will be paid the allowable costs incurred based on Budget. See Special Billing Requirements Section.

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.1	**Submit Quarterly Progress Reports** Report data to be collected: 1. Audience served by race/ethnicity, sex, SNAP eligibility, and age 2. Setting type and project activity details 3. Key nutrition messages delivered 4. Formative, processes and outcome evaluation results to date 5. Achievements, challenges, changes 6. Success stories 7. Other		Using the electronic means and forms provided by DOH to summarize the work aforementioned in the SNAP-Ed work plans for quarter reports.	Quarterly Reports due for the period October 1, 2013 – September 30,2014: 1st quarter due 01/30/14 2nd quarter due 04/30/14 3rd quarter due 07/30/14 4th quarter due 10/30/14	See payment information as referenced in task number 1.0
1.2	**Submit Timely Invoice Vouchers**		Prepare and submit invoice vouchers monthly (**or with pre-approval by DOH contract manager, every two months maximum) using the A19-1A specific to SNAP-Ed. (This document will be sent to all contractors prior to October 2013.) Documentation of all costs incurred shall be accompanied by an agency financial system summary-level report supporting the costs to be reviewed by SNAP-Ed Contract Manager before approval of payment. **NOTE: In FFY14 the SNAP-Ed program will deny payment for any costs not submitted by the due date without prior approval.**	**Monthly**: due no later than 30 days after the end of the preceding month (e.g. October A19 invoice submitted no later than November 30, and so on.) **If, and only if, LHJ has been **pre-approved** to bill on a 2-month billing cycle, A19 invoices must be received by DOH no later than dates listed below: Oct & Nov due: 12/31/13 Dec & Jan due: 02/28/14 Feb & Mar due: 04/30/14 Apr & May due: 06/30/14 Jun & Jul due: 08/31/14 Aug & Sept due: 10/30/14	See payment information as referenced in task number 1.0

<u>*For Information Only:</u>
Funding is not tied to the 2006 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, may be found at:
http://www.doh.wa.gov/PublicHealthandHealthcareProviders/PublicHealthSystemResourcesandServices/PublicHealthImprovementPartnershipPHIP/ResourceCatalog/Standards.aspx

<u>Program Specific Requirements/Narrative</u>

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
Supplemental Nutrition Assistance Program Education Guidance for FY14
Nutrition Education and Obesity Prevention Grant Program http://snap.nal.usda.gov/snap/Guidance/FY2014SNAP-EdGuidance.pdf

Assurances / Certifications
The local governmental agency is fiscally responsible for nutrition education activities funded with Supplemental Nutrition Assistance Program Education funds and is liable for repayment of unallowable costs. Nutrition education activities are conducted exclusively for the benefit of Supplemental Nutrition Assistance Program participants, applicants, and those eligible.

Program activities are conducted in compliance with all applicable Federal laws, rules, regulations including Civil Rights and OMB circulars governing cost issues.

Materials developed with Federal Supplemental Nutrition Assistance Program funds include the appropriate non-discrimination statement, credit provided to SNAP as a funding source on newly developed and reprinted materials. For more information see Appendix G: Notes About Education Materials on pp. 98-101 of FFY14 Guidance at http://snap.nal.usda.gov/snap/Guidance/FY2014SNAP-EdGuidance.pdf

Program activities are reasonable and necessary to accomplish SNAP-Ed objectives and goals.

Messages of nutrition education are consistent with the Dietary Guidelines for Americans and do not disparage any specific food, beverage or commodity.

Audits
The local governmental agency, Indian Tribal Organization or non-Governmental Agency must make State financial and program audits or reviews conducted by other entities available to the DOH, DSHS, USDA, or its designee.

Monitoring visits
The local governmental agency, Indian Tribal Organization or non-Governmental Agency's premises and records will be made available upon request to DOH, DSHS, and USDA staff for the purposes of observing nutrition education activities and reviewing for program compliance.

Records
(Record Retention and Management-State Agency and All Sub-grantees 7CFR 272.2)
SNAP-Ed regulations require that all records be retained for three years from fiscal closure. This requirement applies to fiscal records, reports and client information. Supporting documentation may be kept at the subgrantee level, but shall be available for review for three years from the date of quarterly claim submittal. Any costs that cannot be substantiated by source documents will be disallowed as charges to SNAP.

Amendments to Project(s) Plan
Agencies must submit a request to DOH to amend a project plan for prior approval whenever they wish to change the USDA-approved scope of activities. All requests for amendments must be submitted no later April 1, 2014.

Please Note:
1. No changes may be incorporated into the project plan until an amendment request is approved by DOH and/or USDA
2. Any requests submitted after April 1, 2014 will NOT be approved.

Special Funding Requirements
Payment for deliverables as specified herein is dependent on receipt of funding from the USDA funding sources. In the event funding is not received, DOH is under no obligation to make payments for the deliverables as specified. If funding is reduced or limited in any way after the effective date of this statement of work and prior to normal completion DOH may terminate task(s), remove funds, or reallocate funds at DOH's discretion under new funding limitations and conditions. DOH will make payments only upon the receipt of the funding. DOH will notify the contractor ~~*within 7 working days*~~ upon notice by the funding source of funding availability

The FFY13 Carryforward DSHS SNAP ED IAR funds expire on December 31, 2013. This is a partial funding of the contract amount. $8,849 is the maximum the LHJ may invoice during the temporary resumption of performance.

The LHJ and DOH have mutually agreed to the start date. The statement of work (SOW) is not being revised. LHJ may work until the funds in this SOW are exhausted or until December 31, 2013; whichever occurs first

Special Billing Requirements
1. Total costs bill will not exceed the USDA-approved budget amount listed in the text box below.
   a. Bills must be for only SNAP-Ed specific activities, using a DOH A19-1A Invoice voucher
   b. A SNAP-Ed specific A19-1A must be submitted to the agency's designated DOH SNAP-Ed contract manager within 30 days of the last day of the month for which the work is being billed, OR
   c. An agency may request pre-approval to bill every 2 months instead, in which case, that agency is required to adhere to the billing due dates listed in Task 1.2 (see above)
   d. **NOTE: In FFY14, if for ANY reason a contractor is unable to submit the SNAP-Ed A19-1A by the due date, the contractor is required to submit a request for an exception to DOH, no later than 7 days prior to the due date, to the DOH SNAP-Ed contract manager. The SNAP-Ed contract manager reserves the right and responsibility to either approve or deny the request and will reply to the request.**

2. **NOTE: In FFY14 the SNAP-Ed program will deny payment for any costs not submitted by the due date without prior approval.**

3. Supporting documentation for each month must be submitted with each SNAP-Ed A19-1A.
   a. At the very least this means a copy of an agency's financial expanded/detailed general ledger level report.
   b. Additionally, all receipts, timecards and other supporting documentation, as noted by USDA, must be available upon request.

   PLEASE NOTE: If an agency is a new SNAP-Ed contractor or has had a fiscal finding within the last year, all SNAP-Ed backup documentation must be submitted with each bill and this requirement will continue until further notice by the DOH designated SNAP-Ed contract manager.

Source and Amount of FFY14 Funds	
USDA	~~*$92,918*~~ *$8,849*

Budget Revisions
The LHJ is allowed, in the Federal Fiscal year period, to request an adjustment be made to a funded line item listed in the approved budget, with pre-approval from the DOH designated SNAP-Ed contract manager. Any anticipated changes to the budget must be pre-approved by DOH.

DOH Program Contact
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