

**KITTITAS COUNTY PUBLIC HEALTH DISTRICT
2005-2006 CONSOLIDATED CONTRACT**

CONTRACT NUMBER: C13037 AMENDMENT NUMBER: 9

PURPOSE OF CHANGE: To amend that contract between the DEPARTMENT OF HEALTH hereinafter referred to as "DOH", and KITTITAS COUNTY PUBLIC HEALTH DEPARTMENT hereinafter referred to as the "Contractor", under the provisions of the General Provisions, Amendments clause therein, and to make necessary changes within the scope of that contract and any subsequent amendments thereto.

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

1. Exhibit B (8) the Allocation Sheet shall be amended in its entirety and replaced with revised, attached Exhibit B (9) to reflect the following:
 - a. Addition of **\$10,042** to FFY06 PHEPR Pandemic Influenza federal revenue code 333.92.83 for the August 31, 2005 through August 30, 2006 time period.
 - b. This amendment increases the contract by **\$10,042** with the revised total maximum consideration not to exceed **\$869,262**.
2. Exhibit A, the Statement of Work, shall be amended as follows and attached:

Change: Public Health Emergency Preparedness and Response (CDC & HRSA)
3. 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 hereto remain in full force and effect.

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

CONTRACTOR

Bonnie G. Coors 6-22-06
Kittitas County Public Health Department (Date)

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Quinn Thompson 7/21/06
DOH Contracts Manager (Date)

APPROVED AS TO FORM ONLY
Assistant Attorney General

**KITTITAS COUNTY PUBLIC HEALTH DISTRICT
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Public Health Emergency Preparedness and Response (CDC & HRSA grants)

Contract Requirements effective September 1, 2005

Emergency Preparedness and Response Goals

- Respond appropriately and effectively to emergency incidents-*
- Ensure that effective disease surveillance systems are in place statewide-*
- Develop surge capacity for the health system response-*
- Increase internal and external awareness of public health threats and our activities-*

Kittitas County Public Health

The purpose of this Statement of Work is to provide Local Health Jurisdictions (LHJs) with funding in the amount of ~~\$102,156.00~~ **\$112,198.00** to develop improved capacity and infrastructure for public health preparedness and response to terrorism and other public health emergencies. Based on the FY05 Strategic Planning Matrix, this work will support the ultimate goal of building an improved statewide system, with state and local public health jurisdictions and local/regional partners better prepared for and able to respond to acts of terrorism, other outbreaks of infectious disease, public health threats, and emergencies.

This phase will provide funding to further develop local and regional written response plans. Additionally, funds are being provided to test local and regional plans through the conduct of exercises to validate and update these plans, identify needed training, and related tasks.

Activities Required:

As a Local Health Jurisdiction, Kittitas County Public Health receives funding to increase capacity within their jurisdiction. To meet the requirements of this agreement, Kittitas County Public Health will:

1. Continue to refine and update local response plans, filling in gaps and incorporating lessons learned from exercises and drills. Revised plans will be submitted to DOH.
2. Ensure the LHJ will participate in the regional exercise or drill.
3. Ensure the LHJ does the following: a.) conduct a tabletop exercise or drill to test its emergency response plans within its jurisdiction, soliciting participation by local hospitals and emergency management officials, OR b.) conduct a dispensing drill in which the LHJ practices setting up and operating a clinic within the jurisdiction to dispense pharmaceuticals from the Strategic National Stockpile. Operation of a flu vaccination clinic by the LHJ will fulfill this requirement if the clinic is operated according to the policies and procedures outlined in the local emergency response plan, including the use of the Incident Command System to control clinic operations.
4. Ensure the LHJ exercise/drill will be followed by a detailed after action report, utilizing the Standard After Action Report (AAR) Formats which DOH will develop, and including corrective action plans identifying needed plan modifications and necessary training. The AAR will also include proposed timelines and assignments for implementing corrective action items.
5. Ensure the LHJ will identify staff members likely to assume key ICS roles during an emergency response and will assure that each receives NIMS training (IS700) through FEMA and the Homeland Security Institute, or through DOH ICS training. A report on LHJ staff participation in such training will be provided to DOH.
6. Ensure the LHJ will update and work to complete its SNS plan, and will submit a revised SNS plan to DOH. Submit a quarterly SNS progress report to the Regional SNS Coordinator.

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7. Ensure the LHJ will implement the Standardized Job Action Sheets (JAC) in its local SNS Plan and procedures. This will be reflected in the revised SNS Plan submitted to DOH.
8. Ensure the LHJ will provide to DOH an updated copy of its 24/7 on-call system and procedures for assuring that a public health professional responds promptly to urgent reports.
9. Ensure the LHJ will provide documentation to DOH that it promptly shared with public health partners any changes to its 24/7 system.
10. Ensure the LHJ will test its 24/7 on call system at least once every six months, and will submit to DOH an After Action Report on each test summarizing lessons learned. One test will be after normal business hours and one test may be an evaluation of an actual event. The first test will occur by 2/28/06, and the second by 7/15/06, with the after action report submitted to DOH within 30 days after each test.
11. Ensure a plan for improvement, related to any problems identified in the after action reports on tests of the 24/7 response system, will be submitted to DOH along with the after action reports.
12. Ensure the LHJ will participate in the statewide assessment of communicable disease surveillance, and will submit a 24/7 capacity assessment using the template developed by DOH in conjunction with regions.
13. Ensure the LHJ will support the Regional Epidemiologist in implementing the surveillance enhancement initiative using the MRSA Best Practices model. Those activities will be reflected in the narrative report submitted by the Regional Epidemiologist to DOH.
14. Ensure the LHJ will revise and update its Epidemiology Response Plan, with revised plans submitted to DOH.
15. Ensure the LHJ will provide to DOH an updated Pandemic Influenza plan.
16. Ensure the LHJ will actively participate in the implementation of LMS through the participation of key staff members in LMS training, and by entering data on all LHJ staff into the system when it becomes available. A roster of LHJ staff members entered into the LMS will be provided to DOH.
17. Ensure the LHJ will revise its Training Plan and submit the new plan to DOH. The new plans will describe the relationship between exercise/drill experience (as reflected in AARs) and training needs.
18. Ensure the LHJ will send a representative to at least half of the Region 7 Hospital Meetings held during the year. LHJ representatives will use these meetings to enhance cooperation between public health and hospitals in the development of emergency planning and response capacity. Minutes of these meetings, reflecting LHJ participation, will be submitted to DOH twice yearly by the Region 7 RERC.
19. Maintain satellite phone service agreement.
20. Participate in DOH monthly test of satellite phone response.
21. Complete plans for emergency communications with PH partners in jurisdiction.
22. Participate in monthly test of SECURES
23. Identify and provide at least 1 candidate to be the SECURES SysAdmin
24. Maintain User Account Coordinators (PHIMS & PHRED data steward) and SECURES system administrators
25. Maintain Digital certificates
26. Participate in regional epi meetings.
27. Complete standardized surveillance system evaluation and implement improvements based on needs identified in previous evaluation.
28. Integrate veterinarians into surveillance system and provide information related to zoonotic disease surveillance and reporting.
29. Identify hospital liaisons for 24/7 reporting of notifiable conditions and facilitate development of hospital reporting protocols. Reporting to include number of hospitals, number with reporting liaisons and number with written protocols for reporting to LHJs.

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30. Update Pandemic Flu Plan and submit to DOH.

Activities: Numbers correspond to activities listed above.	Objective: Numbers correspond to PHEPR goals.	Deliverables: All deliverables must be submitted to DOH.	Due Dates: All deliverables must be submitted to DOH by the following dates:
1	1.1	Revised local EPR plan submitted to DOH.	8/30/2006
2	1.3	LHJ will participate in the regional exercise or drill.	8/30/2006
3	1.3	Submit pre-exercise plan to DOH.	5/15/2006
3	1.3	Conduct tabletop exercise or drill.	7/15/2006
4	1.3	AAR will be submitted to DOH (AAR includes proposed timelines and assignments for implementing corrective action items).	8/30/2006
5	1.4	A report on LHJ staff participation in NIMS training (IS700) will be provided to DOH	8/30/2006
6	1.5	Submit revised SNS plan to DOH, including MOUs for PODs and staffing rosters. LHJ will complete and submit the quarterly SNS Reports to the Regional SNS Coordinator	8/30/2006 Quarterly Dates TBD
7	1.5	Implement the Standardized Job Action Sheets (JAC) in its local SNS Plan and procedures	8/30/2006
8	2.1	LHJ will provide to DOH an updated copy of its 24/7 on-call system and procedures.	7/30/2006
9	2.1	LHJ will provide documentation to DOH that it promptly shared with public health partners any changes to its 24/7 system.	7/30/2006
10	2.1	LHJ will test its 24/7 on call system at least once every six months. Submit to the Regional Epidemiologist an After Action Report.	5/31/2006 7/15/2006 <i>Testing: Ongoing AARs: 7/15/2006</i>
11	2.1	Submit plan for improvement in the after action reports on tests of the 24/7 response system to DOH	6/30/2006 7/30/2006 <i>Testing: Ongoing AARs: 7/15/2006</i>
12	2.2	Submit a 24/7 capacity assessment to DOH.	7/30/2006 7/15/2006

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Activities: Numbers correspond to activities listed above	Objective: Numbers correspond to PHEPR goals.	Deliverables: All deliverables must be submitted to DOH.	Due Dates: All deliverables must be submitted to DOH by the following dates:
13	2.2	Narrative report submitted by the Regional Epidemiologist to DOH will describe LHJ support in implementing the surveillance enhancement initiative.	7/30/2006
14	2.3	Submit updated Epidemiology Response Plan to DOH	7/30/2006
15	2.3	Submit update Pandemic Influenza plan to DOH	7/30/2006
16	7.1	Roster of LHJ staff members entered into the LMS will be provided to DOH	8/30/2006
17	7.5	Revise Training Plan and submit plan to DOH	8/30/2006
18	8.1	Submit minutes of regional hospital planning meetings, reflecting LHJ participation, will be submitted to DOH twice yearly by the Region 7 RERC	N/A
19	5.3	Maintain satellite phone by paying the monthly service agreement.	
21	5.3	Complete plans to distribute HAN and other health alerts as pertinent to county partners	8/30/2006
All	All	Submit <u>semi-annual</u> PHEPR progress report to DOH.	Semi-annually: 3/15/2006 7/31/2006
26	2.7	Participate in regional epi meetings.	7/30/06
27	2.2	Complete statewide surveillance system evaluation and implement improvements based on needs identified in previous evaluation.	7/15/06
28	2.4, 2.5	Integrate veterinarians into surveillance system and provide information related to zoonotic disease surveillance and reporting.	7/30/06
29	8.4	Identify hospital liaisons for 24/7 reporting of notifiable conditions and facilitate development of hospital reporting protocols. Reporting to include number of hospitals, number with reporting liaisons and number with written	7/30/06

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Activities: Numbers correspond to activities listed above.	Objective: Numbers correspond to PHEPR goals.	Deliverables: All deliverables must be submitted to DOH.	Due Dates: All deliverables must be submitted to DOH by the following dates:
		protocols for reporting to LHJs.	
30		Submit updated Pandemic Flu Plan to DOH.	3/1/2006

Pandemic Influenza Planning

31. Complete the online assessment of local health jurisdiction pandemic influenza (pan flu) preparedness activities, utilizing the CDC self-assessment tool which will be provided by DOH. Pan flu assessments are to be completed and submitted online to DOH by the due date listed below. Note that RERCs are available to assist LHJs in addressing and completing these activities.
32. Conduct LHJ-wide community pan flu preparedness forums to include local businesses, tribes, hospitals, pharmacies, community health centers, skilled nursing facilities, health care provider personnel, health care provider agencies, emergency management, first responders, local elected officials, and other community sectors, and document efforts. Activities conducted since September 1, 2005 can be included. DOH will also make pan flu response public awareness information available to communities to complement and support community pan flu preparedness forum activities undertaken.
33. Track and report community pan flu preparedness forum planning details and community participation through the Washington Public Health Training Network (WAPHTN), or in an alternate format to be provided by DOH. Track and report information from all community forums held, including those which may or may not have included an exercise.
34. Complete and submit an update of the community based LJJ pan flu response plan that was submitted in March 2006 to DOH, incorporating issues identified during community forums as well as during any pan flu exercises conducted. The update of the community-based LJJ pan flu plan must be coordinated with tribal pan flu planning efforts and must address each of the minimum pan flu planning requirements specified in RCW Chapter 63, Laws of 2006, an act relating to preparation and response to pandemic influenza. (See <http://www.leg.wa.gov/pub/billinfo/2005-06/Pdf/Bills/Session%20Law%202006/6366-S.SL.pdf>)
35. Develop an action plan to conduct a pan flu tabletop, functional, or full-scale exercise within the LHJ involving all appropriate community partners during the next grant period (Sept 2006-August 2007). DOH will provide a standard format for reporting exercise planning results.
36. Regional emergency response coordinators will work with all the LHJs within their region to ensure timely and complete expenditure of all the Phase 1 funds. If an LHJ anticipates an under-spend situation they will work with their RERC to identify other region wide pan flu priorities that are consistent with the Phase 1 deliverables. If the region cannot identify other activities they will notify DOH of the expected unspent funds. DOH will then work to reallocate those funds toward other Phase 1 projects elsewhere in the state. LHJs that transfer funds in this manner will incur no penalties nor experience any negative consequences on their future funding.

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<p><u>Activities:</u> <i>Letters correspond with required activities.</i></p>	<p><u>Deliverables:</u> <i>All deliverables must be submitted to the RERC and DOH SERC, except under Activity A where the pan flu assessment is completed and submitted directly to DOH online.</i></p>	<p><u>Due Dates:</u> <i>All deliverables must be submitted to the RERC and DOH SERC by the following dates:</i></p>
31	Complete and submit online assessment of local pan flu response activities, as specified in the online state pan flu response assessment tool.	5/15/2006
32	Submit a list of individuals/organizations invited to forum(s), in a format to be provided by DOH.	8/30/2006
33	Provide information to DOH on community forums held, including forums which may or may not include an exercise, through either the Washington Public Health Training Network (WAPHTN) or in a format to be provided by DOH.	8/30/2006
34	Submit a progress report on the status of your pan flu plan update, in a format to be provided by DOH.	8/30/2006
34	Submit updated community-based LHJ pan flu response plan, including tribal response activities as appropriate.	11/1/2006
35	Submit pan flu exercise action plan in a format provided by DOH, for exercise of community-based LHJ pan flu response plan, to be held between 9/1/06 and 8/31/07.	8/30/2006

ALLOCATIONS

Agency Name:

Consolidated Contract
KITTITAS COUNTY PUBLIC
HEALTH DEPARTMENT

Contract No:

C13037

Date:

May 11, 2006

EXHIBIT B (9)

Program	Revenue Code	Period	Amount	Total	GRAND TOTAL
WIC/USDA Farmers Market Admin	333.10.52	Jan 05 - Sep 05	\$358	\$358	\$358
WIC/USDA NLS	333.10.57	Jan 05 - Sep 05	\$64,150		
	333.10.57	Oct 05 - Sep 06	\$99,228		
	333.10.57	Oct 06 - Dec 06	\$20,720	\$184,098	\$184,098
WIC/USDA Breastfeeding	333.10.57	Jan 05 - Sep 05	\$1,044		
	333.10.57	Oct 05 - Sep 06	\$1,281		
	333.10.57	Oct 06 - Dec 06	\$0	\$2,325	\$2,325
EHP/ Drinking Water/SS	333.66.48	Jul 05 - Jun 06	\$3,750		
	333.66.48	Jul 06 - Dec 06	\$1,250	\$5,000	\$5,000
EHP/Drinking Water/TA	333.66.48	Jul 05 - Jun 06	\$1,000		
	333.66.48	Jul 06 - Dec 06	\$1,000	\$2,000	\$2,000
PHEPR Hosp Prep	333.90.03	Jan 05 - Aug 05	\$2,000	\$2,000	\$2,000
FA317 Immun ConCon Fed	333.92.68	Jan 05 - Dec 05	\$4,347		
	333.92.68	Jan 06 - Dec 06	\$4,347	\$8,694	\$8,694
FFY 05 FA 317 Immun Spc Prj Fed	333.92.68	Jan 05 - Dec 05	\$1,533	\$1,533	\$1,533
VFC Immun ConCon Fed	333.92.68	Jan 05 - Dec 05	\$5,111		
	333.92.68	Jan 06 - Dec 06	\$5,111	\$10,222	\$10,222
FFY 05 VFC Immun Spc Prj Fed	333.92.68	Jan 05 - Dec 05	\$731	\$731	\$731
PHEPR Focus A	333.92.83	Jan 05 - Aug 05	\$28,912	\$28,912	\$28,912
PHEPR Focus B	333.92.83	Jan 05 - Aug 05	\$33,218	\$33,218	\$33,218
PHEPR Focus E	333.92.83	Jan 05 - Aug 05	\$18,675	\$18,675	\$18,675
PHEPR Focus G	333.92.83	Jan 05 - Aug 05	\$19,951	\$19,951	\$19,951
PHEPR SNS	333.92.83	Jan 05 - Aug 05	\$9,076	\$9,076	\$9,076
FFY06 PHEPR LHJ Funding	333.92.83	ug 31, 05 - Aug 30, 06	\$100,156	\$100,156	\$100,156
Tobacco CDC	333.92.83	Jan 05 - Jun 05	\$2,950		
	333.92.83	Jul 05 - Jun 06	\$5,900	\$8,850	\$8,850
FFY06 PHEPR Pandemic Influenza	333.92.83	ug 31, 05 - Aug 30, 06	\$10,042	\$10,042	\$10,042
HCCW Infant Toddler	333.95.75	Jan 05 - Jun 05	\$12,500		
	333.95.75	Jul 05 - Sep 05	\$6,250		
	333.95.75	Oct 05 - Jun 06	\$18,750	\$37,500	\$37,500
FFY06 PHEPR Hospital Prep	333.98.89	Sep 05 - Aug 06	\$2,000	\$2,000	\$2,000
PHBG LHD	333.99.91	Jan 05 - Sep 05	\$3,175		
	333.99.91	Oct 05 - Dec 06	\$4,233	\$7,408	\$7,408
PHBG Local Prevention	333.99.91	Jan 05 - Sep 05	\$37,500		

ALLOCATIONS

Agency Name:

Consolidated Contract
KITTITAS COUNTY PUBLIC
HEALTH DEPARTMENT

Contract No: C13037
Date: May 11, 2006

EXHIBIT B (9)

Program	Revenue Code	Period	Amount	Total	GRAND TOTAL
	333.99.91	Oct 05 - Sep 06	\$25,992	\$63,492	\$63,492

ALLOCATIONS
Agency Name:

Consolidated Contract
KITTITAS COUNTY PUBLIC
HEALTH DEPARTMENT

Contract No: C13037
Date: May 11, 2006

EXHIBIT B (9)

Program	Revenue Code	Period	Amount	Total	GRAND TOTAL
MCHBG/MCH	333.99.94	Jan 05 - Sep 05	\$33,521		
	333.99.94	Oct 05 - Sep 06	\$44,695		
	333.99.94	Oct 06 - Dec 06	\$11,174	\$89,390	\$89,390
EHP Drinking Water Group B Systems Group B Systems	334.04.91	Jan 05 - Jun 05	\$8,775		
	334.04.91	Jul 05 - Jun 06	\$8,520		
	334.04.91	Jul 06 - Dec 06	\$5,680	\$22,975	\$22,975
OAS Activities	334.04.91	Jan 06 - Jun 06	\$24,008	\$24,008	\$24,008
Oral Health	334.04.91	Jan 05 - Jun 05	\$4,500		
	334.04.91	Jul 05 - Jun 06	\$9,000		
	334.04.91	Jul 06 - Dec 06	\$4,500	\$18,000	\$18,000
Local Capacity Development Funds	334.04.92	Jan 05 - Jun 05	\$22,543		
	334.04.92	Jul 05 - Jun 06	\$45,199		
	334.04.92	Jul 06 - Dec 06	\$22,656	\$90,398	\$90,398
Youth Tobacco Prevention	334.04.93	Jan 05 - Jun 05	\$3,750		
	334.04.93	Jul 05 - Jun 06	\$7,500	\$11,250	\$11,250
TPC Account-Comm	334.04.97	Jan 05 - Jun 05	\$18,750		
	334.04.97	Jul 05 - Jun 06	\$38,250	\$57,000	\$57,000
			TOTAL	\$869,262	\$869,262

Total Fed: \$645,631
Total State: \$223,631
GRAND TOTAL \$869,262

Grand Total prior to this amendment: \$859,220

Addition of \$10,042 in FFY06 PHEPR Pandemic Influenza federal revenue code 333.92.83 for the 8/31/05 through 8/30/06 time period.