EXECUTIVE SUMMARY
For
2022-2024 Consolidated Contract Amendment #4
Between
Washington State Department of Health & Lewis County

Amount of Total Contract for 2022-2024: $3,772,252
Decrease from last contract: $57,490
Fund Number: 190
Program/Division Affected:
This amendment affects six (6) areas of the Consolidated Contract #CLH31017.

Purpose:
This amendment **amends** the Statements of Work in the following areas:

- COVID-19 Mass Vaccination-FEMA - Effective January 1, 2022
- DCHS-ELC COVID-19 Response - Effective January 1, 2022
- Maternal & Child Health Block Grant - Effective January 1, 2022
- Office of Immunization COVID-19 Vaccine - Effective January 1, 2022
- Supplemental Nutrition Assistance Program-Education - Effective January 1, 2022
- WIC Nutrition Program - Effective January 1, 2022

See the attached table for fund allocation reference.

Background Information:
- The **Consolidated Contract** is the primary vehicle for transferring federal and state funding to Local Health Jurisdictions (LHJs) for planning and local implementation of public health prevention and early intervention programs and activities.
- Funding is effective for four years and is allocated annually with amendments throughout the year.

Lewis County Public Health & Social Services Department ALLOCATIONS
Contract Number: CLH31017
Contract Term: 2022-2024

Effective Date: January 1, 2022
Latest Amendment # 4

Indirect Rate as of January 2018:	28.28%
Indirect Rate as of July 2018:	27.26%
Indirect Rate as of July 2019:	27.91%
Indirect Rate as of July 2020:	27.48%
Indirect Rate as of January 2022:	22.48%

Report Inquiry	
Amendment #4	
	(57,490.00)
Contract Total	
	3,772,252.00
State $	$ 1,489,877.00
Federal $	$ 2,282,375.00

filter NAME here *filter FY here* *filter NAME/ CFDA here*

Contract Total Row Labels	Fiscal Year	CON CON Program Title	BARS Code	Start Date	End Date	4	Grand Total
COVID-19 Mass Vaccination - FEMA	FFY22	Mass Vaccination FEMA 100%					
		97.036	333.97.03	1/1/2022	4/1/2022		0
					7/1/2022	0	0
COVID-19 Mass Vaccination - FEMA Total						0	0
DCHS-ELC COVID-19 Response	FFY19	ELC COVID ED LHJ Allocation					
		93.323	333.93.32	1/1/2022	10/18/2022	(138,413)	0
	FFY20	ELC EDE LHJ Allocation					
		93.323	333.93.32	1/1/2022	12/31/2022	(199,903)	981,193
DCHS-ELC COVID-19 Response Total						(338,316)	981,193
ELC COVID-19	FFY19	ELC COVID CARES					
		93.323	333.93.32	1/1/2022	4/22/2022		12,420
ELC COVID-19 Total							12,420
Emergency Preparedness, Resilience & Response-PHEP	FFY21	PHEP BP3-LHJ Funding					
		93.069	333.93.06	1/1/2022	6/30/2022		24,495
Emergency Preparedness, Resilience & Response-PHEP Total							24,495
Foundational Public Health Services (FPHS)	FFY22	FPHS-LHJ-Proviso (YR1)					
		N/A	336.04.25	1/1/2022	6/30/2022		727,000
	FFY23	FPHS-LHJ-Proviso (YR2)					
		N/A	336.04.25	7/1/2022	6/30/2023		727,000
Foundational Public Health Services (FPHS) Total							1,454,000
Maternal & Child Health Block Grant	FFY22	MCHBG-LHJ Contracts					
		93.994	333.93.99	1/1/2022	9/30/2022	1,703	64,866
Maternal & Child Health Block Grant Total						1,703	64,866
Office of Drinking Water Group A Program	YR24	SRF - Local Asst (15%) (FO-SW) SS					
		N/A	346.26.64	1/1/2022	12/31/2022		8,000
		SRF - Local Asst (15%) (FO-SW) TA					
		N/A	346.26.66	1/1/2022	12/31/2022		2,000
Office of Drinking Water Group A Program Total							10,000
Office of Drinking Water Group B Program	YR23	GFS-Group B (FO-SW)					
		N/A	334.04.90	1/1/2022	6/30/2022		25,877
Office of Drinking Water Group B Program Total							25,877
Office of Immunization COVID-19 Vaccine	FFY22	COVID 19 Vaccines					
		93.268	333.93.26	1/1/2022	6/30/2024	244,399	244,399
		COVID19 Vaccines R4					
		93.268	333.93.26	1/1/2022	6/30/2024		362,090
Office of Immunization COVID-19 Vaccine Total						244,399	606,489
Office of Immunization Perinatal Hepatitis B	FFY22	PPHF OPS-Hep B					
		93.268	333.93.26	1/1/2022	6/30/2022		500
Office of Immunization Perinatal Hepatitis B Total							500
Office of Immunization Regional Representatives	FFY22	VFC IQIP					
		93.268	333.93.26	1/1/2022	6/30/2022		0
			333.93.27	1/1/2022	6/30/2022		33,335
Office of Immunization Regional Representatives Total							33,335
OI-Promotion of Immunizations to Improve Vaccine Rates	FFY22	VFC Ops					
		93.268	333.93.26	1/1/2022	6/30/2022		5,715
			333.93.27	1/1/2022	6/30/2022		3,404
OI-Promotion of Immunizations to Improve Vaccine Rates Total							9,119
Supplemental Nutrition Assistance Program-Education	FFY22	SNAP Ed Prog Mgnt-Region 5					
		10.561	333.10.56	1/1/2022	9/30/2022	33,907	72,413
Supplemental Nutrition Assistance Program-Education Total						33,907	72,413
WIC Nutrition Program	FFY22	WIC Client Svs Contracts					
		10.557	333.10.55	1/1/2022	9/30/2022		325,400
		WIC-BFPC Prog Mgmt					
		10.557	333.10.55	1/1/2022	9/30/2022		43,678
		WIC-Farmer's Market (FMNP)					
		10.557	333.10.55	5/1/2022	9/30/2022	817	817
	FFY23	WIC Client Svs Contracts					
		10.557	333.10.55	10/1/2022	9/30/2023		107,650
WIC Nutrition Program Total						817	477,545
Grand Total						(57,490)	3,772,252

LEWIS COUNTY PUBLIC HEALTH & SOCIAL SERVICES DEPARTMENT
2022-2024 CONSOLIDATED CONTRACT

CONTRACT NUMBER: CLH31017 **AMENDMENT NUMBER: 4**

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

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

1. Exhibit A Statements of Work, includes the following statements of work, which are incorporated by this reference and located on the DOH Finance SharePoint site in the Upload Center at the following URL: https://stateofwa.sharepoint.com/sites/doh-ofsfundingresources/sitepages/home.aspx?=e1:9a94688da2d94d3ea80ac7fbc32e4d7c

   ☐ Adds Statements of Work for the following programs:

   ☒ Amends Statements of Work for the following programs:

   COVID-19 Mass Vaccination-FEMA - Effective January 1, 2022
   DCHS-ELC COVID-19 Response - Effective January 1, 2022
   Maternal & Child Health Block Grant - Effective January 1, 2022
   Office of Immunization COVID-19 Vaccine - Effective January 1, 2022
   Supplemental Nutrition Assistance Program-Education - Effective January 1, 2022
   WIC Nutrition Program - Effective January 1, 2022

   ☐ Deletes Statements of Work for the following programs:

2. Exhibit B-4 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-3 Allocations as follows:

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

   ☒ Decrease of **$57,490** for a revised maximum consideration of **$3,772,252**.

   ☐ 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.

LEWIS COUNTY PUBLIC HEALTH & SOCIAL SERVICES DEPARTMENT	STATE OF WASHINGTON DEPARTMENT OF HEALTH
Signature:	Signature:
Date:	Date:

APPROVED AS TO FORM ONLY
Assistant Attorney General

Lewis County Public Health & Social Services Department

EXHIBIT B-4
ALLOCATIONS
Contract Term: 2022-2024

Contract Number: **CLH31017**
Date: **April 1, 2022**

Indirect Rate January 1, 2022 through December 31, 2022: 22.48%

Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**	Statement of Work LHJ Funding Period Start Date	Statement of Work LHJ Funding Period End Date	DOH Use Only Chart of Accounts Funding Period Start Date	DOH Use Only Chart of Accounts Funding Period End Date	Amount	Funding Period SubTotal	Chart of Accounts Total
FFY22 USDA BFPC Prog Mgmt	NGA Not Received	Amd 2	10.557	333.10.55	01/01/22	09/30/22	10/01/21	09/30/22	$4,487	$43,678	$43,678
FFY22 USDA BFPC Prog Mgmt	NGA Not Received	Amd 1	10.557	333.10.55	01/01/22	09/30/22	10/01/21	09/30/22	$39,191		
FFY23 USDA WIC Client Svs Contracts	NGA Not Received	Amd 1	10.557	333.10.55	10/01/22	09/30/23	10/01/22	09/30/23	$107,650	$107,650	$433,050
FFY22 USDA WIC Client Svs Contracts	202222W100347	Amd 1	10.557	333.10.55	01/01/22	09/30/22	10/01/21	09/30/22	$325,400	$325,400	
FFY22 USDA FMNP Prog Mgmt	**NGA Not Received**	**Amd 4**	**10.572**	**333.10.57**	**05/01/22**	**09/30/22**	**10/01/21**	**09/30/22**	**$817**	**$817**	**$817**
FFY22 IAR SNAP Ed Prog Mgnt-Region 5	**207WAWA5Q3903**	**Amd 4**	**10.561**	**333.10.56**	**01/01/22**	**09/30/22**	**10/01/21**	**09/30/22**	**$33,907**	**$72,413**	**$72,413**
FFY22 IAR SNAP Ed Prog Mgnt-Region 5	207WAWA5Q3903	Amd 1	10.561	333.10.56	01/01/22	09/30/22	10/01/21	09/30/22	$38,506		
FFY21 PHEP BP3 LHJ Funding	NU90TP922043	Amd 2	93.069	333.93.06	01/01/22	06/30/22	07/01/21	06/30/22	$24,495	$24,495	$24,495
COVID19 Vaccines	**NH23IP922619**	**Amd 4**	**93.268**	**333.93.26**	**01/01/22**	**06/30/24**	**07/01/20**	**06/30/24**	**$244,399**	**$244,399**	**$244,399**
COVID19 Vaccines R4	NH23IP922619	Amd 1	93.268	333.93.26	01/01/22	06/30/24	07/01/20	06/30/24	$362,090	$362,090	$362,090
FFY22 PPHF Ops	NH23IP922619	Amd 3	93.268	333.93.26	01/01/22	06/30/22	07/01/21	06/30/22	$500	$500	$500
FFY22 VFC IQIP	NH23IP922619	Amd 3	93.268	333.93.26	01/01/22	06/30/22	07/01/21	06/30/22	$33,335	$33,335	$33,335
FFY22 VFC Ops	NH23IP922619	Amd 3	93.268	333.93.26	01/01/22	06/30/22	07/01/21	06/30/22	$3,404	$9,119	$9,119
FFY22 VFC Ops	NH23IP922619	Amd 2	93.268	333.93.26	01/01/22	06/30/22	07/01/21	06/30/22	$5,715		
FFY19 COVID CARES	NU50CK000515	Amd 2	93.323	333.93.32	01/01/22	04/22/22	04/23/20	07/31/24	$12,420	$12,420	$12,420
FFY19 ELC COVID Ed LHJ Allocation	**NU50CK000515**	**Amd 4**	**93.323**	**333.93.32**	**01/01/22**	**10/18/22**	**05/19/20**	**10/18/22**	**($138,413)**	**$0**	**$0**
FFY19 ELC COVID Ed LHJ Allocation	NU50CK000515	Amd 2	93.323	333.93.32	01/01/22	10/18/22	05/19/20	10/18/22	$138,413		
FFY20 ELC EDE LHJ Allocation	**NU50CK000515**	**Amd 4**	**93.323**	**333.93.32**	**01/01/22**	**12/31/22**	**01/15/21**	**07/31/24**	**($199,903)**	**$981,193**	**$981,193**
FFY20 ELC EDE LHJ Allocation	NU50CK000515	Amd 2	93.323	333.93.32	01/01/22	12/31/22	01/15/21	07/31/24	$1,181,096		
FFY22 MCHBG LHJ Contracts	**B0445251**	**Amd 4**	**93.994**	**333.93.99**	**01/01/22**	**09/30/22**	**10/01/21**	**09/30/22**	**$1,703**	**$64,866**	**$64,866**
FFY22 MCHBG LHJ Contracts	B0445251	Amd 1	93.994	333.93.99	01/01/22	09/30/22	10/01/21	09/30/22	$63,163		
GFS-Group B (FO-SW)		Amd 1	N/A	334.04.90	01/01/22	06/30/22	07/01/21	06/30/22	$25,877	$25,877	$25,877
FPHS-LHJ-Proviso (YR2)		Amd 1	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	$727,000	$727,000	$1,454,000
FPHS-LHJ-Proviso (YR1)		Amd 1	N/A	336.04.25	01/01/22	06/30/22	07/01/21	06/30/23	$727,000	$727,000	
YR24 SRF - Local Asst (15%) (FO-SW) SS		Amd 1	N/A	346.26.64	01/01/22	12/31/22	07/01/21	06/30/23	$8,000	$8,000	$8,000
YR24 SRF - Local Asst (15%) (FO-SW) TA		Amd 1	N/A	346.26.66	01/01/22	12/31/22	07/01/21	06/30/23	$2,000	$2,000	$2,000

EXHIBIT B-4
ALLOCATIONS
Contract Term: 2022-2024

Lewis County Public Health & Social Services Department | **Contract Number:** **CLH31017**
Date: **April 1, 2022**

Indirect Rate January 1, 2022 through December 31, 2022: 22.48%

Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**	Statement of Work LHJ Funding Period Start Date	Statement of Work LHJ Funding Period End Date	DOH Use Only Chart of Accounts Funding Period Start Date	DOH Use Only Chart of Accounts Funding Period End Date	Amount	Funding Period SubTotal	Chart of Accounts Total
TOTAL									**$3,772,252**	**$3,772,252**	
Total consideration:	**$3,829,742**									**GRAND TOTAL**	**$3,772,252**
	($57,490)										
GRAND TOTAL	**$3,772,252**									**Total Fed**	**$2,282,375**
										Total State	**$1,489,877**

*Catalog of Federal Domestic Assistance
**Federal revenue codes begin with "333". State revenue codes begin with "334".

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: COVID-19 Mass Vaccination-FEMA - Effective January 1, 2022

Local Health Jurisdiction Name: Lewis County Public Health & Social Services Department

Contract Number: CLH31017

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

Period of Performance: January 1, 2022 through July 1, 2022

Funding Source	Federal Compliance (check if applicable)	Type of Payment
☒ Federal Contractor	☒ FFATA (Transparency Act)	☒ Reimbursement
☐ State	☐ Research & Development	☐ Fixed Price
☐ Other		

Statement of Work Purpose: The purpose of this statement of work is to establish the task activities, funding period, and billing details for cost reimbursement of FEMA-funded mass vaccination clinics in Washington state.

Revision Purpose: The purpose of this revision is to revise activity language in Task 1 and 1A.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date	LHJ Funding Period End Date	Current Allocation	Allocation Change None	Total Allocation
*MASS VACCINATION FEMA 100%	934V0200	97.036	333.97.03	01/01/22	07/01/22	0	0	0
						0	0	0
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						**0**	**0**	**0**

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.	***NOTE: Task activities for Mass Vaccination Clinics in this statement of work are NOT CONSIDERED SUBRECIPIENT but are as a CONTRACTOR of DOH.** **DOH reimbursement provided for local mass vaccination clinic (see definition below) planning, implementation and operations in coordination between Unified Command and the Regional Incident Management Team (IMT) to administer the vaccine efficiently, quickly, equitably, and safely in all regions of Washington State. State Supported, Regionally Coordinated, Locally Implemented.** ***The Local Health Jurisdiction submitted a Mass Vaccination plan to the Department of Health for approval.***			*Reimbursement of eligible costs. MASS VACCINATION FEMA 100% Funding (MI 934V0200) (See Program Specific Requirements below)

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Definition: Mass vaccination clinics defined as those outside of the usual healthcare delivery method such as pop-up clinics, mobile clinics, non- clinical facility (fairgrounds, arenas, etc.). Guidance on vaccination protocols must be followed as provided by DOH and CDC. *The Department of Health modeled the State of Washington State Patrol Fire Mobilization framework to quickly implement and carry out the Mass Vaccination effort as outlined by FEMA. This process specifically implements contracting with local jurisdictions once capacity is exceeded to effectively carry out the emergency mission as efficiently, equitably, and quickly as possible on a Statewide basis.*			
1A	*The Department of Health contracted with regional incident management teams and/or regional incident management organizations and works in close coordination and cooperation with* Local health jurisdiction (LHJ) *to support the COVID-19 Mass Vaccination efforts. The LHJ meets with the contract manager at the department a minimum of once a month and has ongoing conversations around planning and scheduling of mass vaccination efforts as needed. DOH* will coordinate *with the LHJ and regional IMT/IMO around* planning and implementation of mass vaccination clinics/sites provided within the county(s) with a regional incident management team/organization as approved by DOH. Request for regional IMT should be submitted through the normal process through WebEOC. *DOH will coordinate with the* LHJ *and regional IMT/IMO regarding carrying out the ~~is the coordinating agency for the~~ filed* mass vaccination plan within the county. Regional IMT will be under the delegation authority of DOH and they are to provide support and coordination for all efforts around vaccine planning, resource support and general guidance and information sharing in order to regionally coordinate efforts. Local jurisdictions will maintain all decisional authority around vaccination planning and execution within their jurisdiction/district.	Submit to DOH a mass vaccination plan including: • type of site, • site locations, • throughput, • considerations made to ensure equity to historically marginalized populations, • and to the extent possible a regional map of sites/locations.	Within 30 days of contract amendment execution.	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Provide any information as requested by the regional IMT.			
1B	Funding for eligible Mass Vaccination activities are reimbursed on actual costs as outlined in the DOH guidance to provide the services and to carry out the mission. Funding will be dependent on full participation in the LHJ and IMT processes and all documentation will be required to be provided to fully close out funding requests by the end of the mission period of performance. Allowable costs include expenses such as facility rentals, staff to conduct planning, management, support and operation of the site, medical personnel for vaccinations, site security personnel, wrap around services for staff (meals, travel, lodging), equipment (which must be pre-approved by IMT/DOH if it exceeds $5,000 each), supplies for vaccinations and site operation. LHJs should provide narratives to help assist IMT and DOH finance know what expenditures were necessary to carry out the mission.	Submit estimated budget for the mass vaccination plan. Monthly Cost Summary Spreadsheet to the IMT/IMO by the fifth of the following month.	Within 30 days of contract amendment execution. Monthly	
1C	Vaccination data – will be maintained according to current state and federal requirements. Vaccine Registration Systems – If a local jurisdiction or region does not have a registration system(s) the include internet based, phone option and other methods to ensure equitable registration, the state PrepMod system and tools will be available for use.	Submission of vaccine use into WA IIS database within 24hrs of use. Jurisdiction/Regions will ensure a fair and equitable process for registration of eligible Washingtonians across all available modalities.	Daily	
1D	Regularly report on vaccinations sites and operational activities (number of vaccinations, personnel to operate the site, challenges, successes to share for learning across the public health system).	Provide monthly situation report to IMT/IMO on status of implementation of mass vaccination plan, or more frequently if that is the LHJ procedure. Sites operating for the time period, vaccines administered by site for the time period, estimated costs for the time period, any challenges/successes of note, including assistance requested.	Monthly	

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the DOH Finance SharePoint site. Questions related to this SOW, or any other finance-related inquiry, may be sent to finance@doh.wa.gov.

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 USASpending.gov by DOH as required by P.L. 109-282.

Program Specific Requirements

Program Manual, Handbook, Policy References

Emergency Response Plan (or equivalent)
Medical Countermeasure/Mass Vaccination Plan

Billing Requirements:

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

Special Instructions:

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

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

Eligible costs from the timeframe of January 1, 2022 through July 1, 2022 include facility rentals, medical and support staff for planning, management, support, and operations; as well as wrap-around services for staff (i.e., meals, travel, lodging). Regular and overtime pay associated with this project is allowable for all staff working under this project and must be billed as a direct charge; timesheets are required documentation and must be available upon request by DOH. Indirect rates are not applicable to these funds. Eligible equipment includes facility infection control measures, personal protective equipment (PPE), storage equipment, coolers, freezers, temperature monitoring devices, portable vaccine units for transportation, supplies such as emergency medical supplies (for emergency medical care needs that may arise in the administration of the vaccine), containers for medical waste, as well as proper storage as needed for canisters of liquid nitrogen or dry ice. Eligible equipment purchase costs should not exceed $5,000 per piece. Equipment over $5,000 a piece must be preapproved by the IMT and should be leased rather than purchased. Any diversion from the list of pre-approved expenses will require a narrative on the purchase rationale and will be subject to IMT approval prior to reimbursement. Timesheets are required documentation for all activities related to this project. Staff time-in / time-out must be recorded, as well as a brief description of their activities. A general description of activities is acceptable for those working at the vaccine site; more detailed/specific description is required for those not working at the vaccine site.

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: DCHS - ELC COVID-19 Response - Effective January 1, 2022

Local Health Jurisdiction Name: Lewis County Public Health & Social Services Department

Contract Number: CLH31017

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

Period of Performance: January 1, 2022 through December 31, 2022

Funding Source	Federal Compliance (check if applicable)	Type of Payment
☒ Federal Subrecipient ☐ State ☐ Other	☒ FFATA (Transparency Act) ☐ Research & Development	☒ Reimbursement ☐ Fixed Price

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

Revision Purpose: Update Activity Task #2 "Contact Investigation and Contact Tracing" and "Isolation and Quarantine" sections; Update allocations to actual carryforward amounts.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date	LHJ Funding Period End Date	Current Allocation	Allocation Change Decrease (–)	Total Allocation
FFY19 ELC COVID ED ALLOCATION	1897129G	93.323	333.93.32	01/01/22	10/18/22	138,413	-138,413	0
FFY20 ELC EDE LHJ ALLOCATION	1897120E	93.323	333.93.32	01/01/22	12/31/22	1,181,096	-199,903	981,193
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						**1,319,509**	**-338,316**	**981,193**

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
Participate in public health emergency preparedness and response activities for COVID-19. This may include surveillance, epidemiology, laboratory capacity, infection control, mitigation, communications and or other preparedness and response activities for COVID-19. Examples of key activities include: • Incident management for the response • Testing • Case Investigation/Contact Tracing • Sustainable isolation and quarantine • Care coordination • Surge management				

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	• Data reporting NOTE: The purpose of this agreement is to supplement existing funds for local health jurisdictions to carry out surveillance, epidemiology, case investigations and contact tracing, laboratory capacity, infection control, mitigation, communications, community engagement, and other public health preparedness and response activities for COVID-19.			
	DCHS COVID-19 Response			
1	Establish a budget plan and narrative to be submitted to the Department of Health (DOH) Contract Manager. DOH will send the "Budget narrative Template", "Budget Guidance" and any other applicable documents that may be identified.	Submit the budget plan and narrative using the template provided.	Within 30 days of receiving any new award for DCHS COVID-19 Response tasks.	Reimbursement of actual costs incurred, not to exceed: $*0* ~~*138,413*~~ FFY19 ELC COVID ED LHJ ALLOCATION Funding (MI 1897129G) Funding end date 10/18/2022 *$981,193* ~~*1,181,096*~~ FFY20 ELC EDE LHJ ALLOCATION Funding (MI 1897120E) Funding end date 7/31/2023
2	1) LHJ Active monitoring activities. In partnership with WA DOH and neighboring Tribes, the LHJ must ensure adequate culturally and linguistically responsive testing, investigation and contact tracing resources to limit the spread disease. LHJs must conduct the following activities in accordance with the guidance to be provided by DOH. a. Allocate enough funding to ensure the following Contact Tracing and Case Investigation Support: Hire a minimum of 1.0 data entry FTE to assure system requirements for task 2.1.a. i. Contact tracing 1. Strive to maintain the capacity to *conduct targeted investigations as appropriate.* ~~*surge a minimum of five (5) case investigators and contact tracers for every 100,000 people in the jurisdiction, as needed, based on disease rates. DOH centralized investigation will count toward this minimum.*~~ 2. Have staff that reflect the demographic makeup of the jurisdiction and who can provide culturally and linguistically competent and responsive services. In addition, or alternatively, enter into an agreement(s) with Tribal, community-based and/or culturally-specific organizations to provide such services. DOH centralized investigations will count towards this minimum. 3. Ensure all contact tracing staff are trained in accordance with DOH investigative guidelines and data entry protocols.	Data collected and reported into DOH systems daily. Enter all contact tracing data in CREST following guidance from-DOH.	Enter performance metrics daily into DOH identified systems Quarterly performance reporting updates	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	4. Coordinate with Tribal partners in conducting contact tracing for Tribal members. 5. Ensure contact tracing and case investigations activities meet DOH case and Contact Tracing Metrics. (Metrics to be determined collaboratively by DOH, LHJs and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics. 6. ~~*Perform daily monitoring for symptoms during quarantine period of contacts*~~ ii. Case investigation 1. Strive to maintain the capacity to *conduct targeted investigations as appropriate.* ~~*surge a minimum of five (5) case investigators and contact tracers for every 100,000 people in the jurisdiction, as needed, based on disease rates. DOH centralized investigation will count toward this minimum.*~~ 2. Enter all case investigation and outbreak data in WDRS following DOH guidance. a) Strive to enter all case investigation and outbreak data into *CREST* as directed by DOH. b) Ensure all staff designated to utilize WDRS have access and are trained in the system. c) Include if new positive cases are tied to a known existing positive case or indicate community spread. d) Conduct *targeted* case investigation and monitor outbreaks. e) Coordinate with Tribal partners in conducting case investigations for tribal members. 3. Ensure contact tracing and case investigation activities meet DOH Case and Contact Tracing Metrics. (Metrics to be determined collaboratively by DOH, LHJs, and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics. b. Testing	Enter all case investigation data in WDRS following guidance from-DOH.		

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	i. Work with partners and Tribes to ensure testing is available to every person within the jurisdiction meeting current DOH criteria for testing and other local testing needs. ii. Work with partners and Tribes to ensure testing is provided in a culturally and linguistically responsive manner with an emphasis on making testing available to disproportionately impacted communities and as a part of the jurisdiction's contact tracing strategy. iii. Maintain a current list of entities providing COVID-19 testing and at what volume. Provide reports to DOH on testing locations and volume as requested.	Maintain a current list of entities providing COVID-19 testing and at what volume. Provide reports to DOH Contract manager on testing locations and volume as requested.		
	c. Surveillance FTE support at a minimum of .5 FTE Epidemiologist to support daily reporting needs below. i. Ensure all COVID positive lab test results from LHJ are entered in to WDRS by 1) entering data directly in to WDRS, 2) sending test results to DOH to enter, or 3) working with DOH and entities conducting tests to implement an electronic method for test result submission. ii. Maintain records of all COVID negative lab test results from the LHJ and enter into WDRS when resources permit or send test results to DOH. iii. Collaborate with Tribes to ensure Tribal entities with appropriate public health authority have read/write access to WDRS and CREST to ensure that all COVID lab results from their jurisdictions are entered in WDRS or shared with the LHJ or DOH for entry.	Ensure all COVID positive test results are entered into WDRS within 2 days of receipt		
	d. Tribal Support. Ensure alignment of contact tracing and support for patients and family by coordinating with local tribes if a patient identified as American Indian/Alaska Native and/or a member of a WA tribe. e. Support Infection Prevention and control for high-risk populations i. Migrant and seasonal farmworker support. Partner with farmers, agriculture sector and farmworker service organizations to develop and	Quarterly performance updates related to culturally and linguistic competency and responsiveness, tribal support, infection prevention and control for high-risk populations, community education and regional active monitoring activities. Performance update should include status of all projects listed.		

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	execute plans for testing, quarantine and isolation, and social service needs for migrant and seasonal farmworkers. ii. Congregate care facilities: In collaboration with the state licensing agency (DSHS), support infection prevention assessments, testing. Infection control and isolation and quarantine protocols in congregate care facilities. iii. High risk businesses or community-based operations. In collaboration with state licensing agencies and Labor and Industries, partner with food processing and manufacturing businesses to ensure adequate practices to prevent COVID-19 exposure, conduct testing and respond to outbreaks. iv. Healthcare: Support infection prevention and control assessments, testing, cohorting, and isolation procedures. Provide educational resources to a variety of healthcare setting types (e.g., nursing homes, hospitals, dental, dialysis). v. Non-healthcare settings that house vulnerable populations: In collaboration with state corrections agency (DOC) and other state partners, support testing, infection control, isolation and quarantine and social services and wraparound supports for individuals living or temporarily residing in congregate living settings, including detention centers, prisons, jails, transition housing, homeless shelters, and other vulnerable populations. vi. Schools: In collaboration with OSPI and local health jurisdictions, support infection prevention and control and outbreak response in K-12 and university school settings. f. Ensure adequate resources are directed towards H2A housing facilities within communities, fishing industries and long-term care facilities to prevent and control disease transmission. Funds can be used to hire support staff, provide incentives or facility-based funding for onsite infection prevention efforts, etc.			

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	g. Community education. Work with Tribes and partners to provide culturally and linguistically responsive community outreach and education related to COVID-19. h. Establish sustainable isolation and quarantine *(I&Q)* measures *in accordance with* ***WAC 246-100-045*** *(Conditions and principles for isolation or quarantine).* i. Have at least one (1) location ~~*identified and confirmed*~~ *for conducting I&Q operations identified and confirmed. This location should be sufficient for supporting I&Q services that are adequate for the population for your jurisdiction and have an ability to expand if needed.* This can be through contract/formal agreement ~~*that can support isolation and quarantine adequate to the population for your jurisdiction with the ability to expand;*~~ alternatively, the *jurisdiction may* establish with an adjacent jurisdiction a formal agreement to provide the isolation and quarantine capacity adequate to the population for your jurisdiction with the ability to expand. ii. Maintain ongoing census data for isolation and quarantine for your population. iii. Planning must incorporate transfer or receipt of *people requiring I&Q support* ~~*isolation and quarantine patients*~~ to *and* from adjacent jurisdictions or state facilities in the event of localized increased need. Planning must incorporate *indicators for activating and surging to meet demand and describe the process for coordinating requests for state I&Q support, either through mobile teams or the state facility.* ~~*triggers and coordination to request state isolation and quarantine support either through mobile teams or the state facility to include site identification and access*~~	Quarterly performance updates to include name, address and capacity of identified location that can support isolation and quarantine, and confirmation of appropriate planning and coordination as required. Report census numbers to include historic total by month and monthly total for current quarter to date		

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the DOH Finance SharePoint site. Questions related to this SOW, or any other finance-related inquiry, may be sent to finance@doh.wa.gov.

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 USASpending.gov by DOH as required by P.L. 109-282.

Program Specific Requirements

All work will be performed in accordance with the revised and approved project plans to be submitted to DOH.

Restrictions on Funds (what funds can be used for which activities, not direct payments, etc)
CDC Funding Regulations and Policies
https://www.cdc.gov/grants/documents/General-Terms-and-Conditions-Non-Research-Awards.pdf

Monitoring Visits (frequency, type)
The DOH program contact may conduct monitoring visits during the life of this project. The type, duration, and timing of visit will be determined and scheduled in cooperation with the subawardee. The DOH Fiscal Monitoring Unit may conduct fiscal monitoring site visits during the life of this project

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

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

Other: Required activities, deliverables, and funding is for the entire project period: January 2021 through specified date above. Unspent funds and tasks not completed by December 31, 2021, were reauthorized for work in this new consolidated contract term beginning January 1, 2022. It is the LHJ's responsibility to assure that the unspent funding amount carried forward to this statement of work does not exceed the remaining available balance from the 2018-2021 contract.

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: Maternal and Child Health Block Grant - Effective January 1, 2022e

Local Health Jurisdiction Name: Lewis County Public Health & Social Services Department

Contract Number: CLH31017

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

Period of Performance: January 1, 2022 through September 30, 2022

Funding Source	Federal Compliance (check if applicable)	Type of Payment
☒ Federal Subrecipient	☒ FFATA (Transparency Act)	☒ Reimbursement
☐ State	☐ Research & Development	☐ Fixed Price
☐ Other		

Statement of Work Purpose: The purpose of this statement of work (SOW) is to support local interventions that impact the target population of the Maternal and Child Health Block Grant.

Revision Purpose: The purpose of the revision is to carry over unspent funds from the Oct-Dec contract for continuation of MCHBG-related activities.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date	LHJ Funding Period End Date	Current Allocation	Allocation Change Increase (+)	Total Allocation
FFY22 MCHBG LHJ CONTRACTS	78101221	93.994	333.93.99	01/01/22	09/30/22	63,163	1,703	64,866
						0	0	0
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						**63,163**	**1,703**	**64,866**

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
Maternal and Child Health Block Grant (MCHBG) Administration				
1a	Report actual expenditures for the six-month period October 1, 2021 through March 31, 2022	Submit actual expenditures using the MCHBG Budget Workbook to DOH contract manager	May 27, 2022	Reimbursement for actual costs, not to exceed total funding consideration. Action Plan and Progress Reports must only reflect activities paid for with funds provided in this statement of work for the specified funding period. See Program Specific Requirements and Special Billing Requirements.
1b	Develop 2022-2023 MCHBG Budget Workbook for October 1, 2022 through September 30, 2023 using DOH provided template.	Submit MCHBG Budget Workbook to DOH contract manager	September 9, 2022	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
Implementation				
2a	Report activities and outcomes of 2022 MCHBG Action Plan using DOH- provided template.	Submit quarterly Action Plan reports to DOH Contract manager	January 15, 2022 April 15, 2022 July 15, 2022	Reimbursement for actual costs, not to exceed total funding consideration. Action Plan and Progress Reports must only reflect activities paid for with funds provided in this statement of work for the specified funding period. See Program Specific Requirements and Special Billing Requirements.
2b	Develop 2022-2023 MCHBG Action Plan for October 1, 2022 through September 30, 2023 using DOH-provided template.	Submit MCHBG Action Plan to DOH contract manager	Draft August 19, 2022 Final- September 9, 2022	
Children and Youth with Special Health Care Needs (CYSHCN)				
3a	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 guidance.	Submit CHIF data into Secure Access Washington website: https://secureaccess.wa.gov	January 15, 2022 April 15, 2022 July 15, 2022	Reimbursement for actual costs, not to exceed total funding consideration. Action Plan and Progress Reports must only reflect activities paid for with funds provided in this statement of work for the specified funding period. See Program Specific Requirements and Special Billing Requirements.
3b	Identify unmet needs for CYSHCN on Medicaid and refer to DOH CYSHCN Program for approval to access Diagnostic and Treatment funds to meet the need.	Submit completed Health Services Authorization forms and Central Treatment Fund requests directly to the CYSHCN Program as needed.	30 days after forms are completed.	
3c	Work with partners to share updated local CYSHCN resources with Within Reach / Help Me Grow (HMG).	Review resources for your local area on ParentHelp123.org annually for accuracy and submit any updates to Within Reach.	September 30, 2022	

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the DOH Finance SharePoint site. Questions related to this SOW, or any other finance-related inquiry, may be sent to finance@doh.wa.gov.

Federal Funding Accountability and Transparency Act (FFATA) (Applies to federal subrecipient funding.)
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 USASpending.gov by DOH as required by P.L. 109-282.

Program Specific Requirements

Program Manual, Handbook, Policy References:
Children and Youth with Special Health Care Needs Manual -
https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/PublicHealthSystemResourcesandServices/LocalHealthResourcesandTools/MaternalandChildHealthBlockGrant/ChildrenandYouthWithSpecialHealthCareNeeds

Health Services Authorization (HSA) Form
http://www.doh.wa.gov/Portals/1/Documents/Pubs/910-002-ApprovedHSA.docx

Restrictions on Funds:

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)].

Monitoring Visits: Telephone calls with DOH contract manager as needed.

Billing Requirements: Payment is contingent upon DOH receipt and approval of all deliverables and an acceptable A19-1A invoice voucher. Payment to completely expend the "Total Consideration" for a specific funding period will not be processed until all deliverables are accepted and approved by DOH. Invoices must be submitted quarterly by the 30th of each month following the quarter in which the expenditures were incurred and must be based on actual allowable program costs. Billing for services on a monthly fraction of the "Total Consideration" will not be accepted or approved.

Special Instructions: Contact DOH contract manager below for approval of expenses not reflected in approved budget workbook.

MCHBG funds may be expended on COVID-19 response activities that align with maternal and child health priorities. Examples may include:

- Providing support in educating the MCH population about COVID-19 through partnerships with other local agencies, medical providers, and health care organizations.
- Working closely with state and local emergency preparedness staff to assure that the needs of the MCH population are represented.
- Funding infrastructure that supports the response to COVID-19. For example, Public Health Nurses who are routinely supported through the Title V program may be able to be mobilized, using Title V funds or separate emergency funding, to support a call center or deliver health services.
- Partnering with parent networks and health care providers to provide accurate and reliable information to all families.
- Engaging community leaders, including faith-based leaders, to educate community members about strategies for preventing illness

Restrictions listed above continue to apply.

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: Office of Immunization COVID-19 Vaccine - Effective January 1, 2022

Local Health Jurisdiction Name: Lewis County Public Health & Social Services Department

Contract Number: CLH31017

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

Period of Performance: January 1, 2022 through June 30, 2024

Funding Source	Federal Compliance (check if applicable)	Type of Payment
☒ Federal Subrecipient ☐ State ☐ Other	☒ FFATA (Transparency Act) ☐ Research & Development	☒ Reimbursement ☐ Fixed Price

Statement of Work Purpose: The purpose of this statement of work (SOW) is to provide funding to conduct COVID-19 vaccine activities.

Revision Purpose: The purpose of this revision is to add a purpose statement for the tasks and to add carryover funds from the 2021 contract. NOTE: either allocations can be used when billing for any activity in this statement of work.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date	LHJ Funding Period End Date	Current Allocation	Allocation Change Increase (+)	Total Allocation
COVID19 Vaccines R4	74310230	93.268	333.93.26	01/01/22	06/30/24	362,090	0	362,090
COVID 19 Vaccines	74310229	93.268	333.93.26	01/01/22	06/30/24	0	244,399	244,399
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						**362,090**	**244,399**	**606,489**

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
The purpose of this statement of work is to identify activities and provide funding to support COVID vaccine response outreach, education, and operations. The activities may include other vaccines recommended for the audience population, as long as COVID vaccine is the primary focus and references to other vaccines are secondary.				
3.A	Identify activity/activities to support COVID vaccine response in your community, using the examples below as a guideline. **Example 1:** Develop and implement communication strategies with health care providers, community, and/or other partners to help build vaccine confidence broadly and among groups anticipated to receive early vaccination, as well as dispel vaccine misinformation. Document and provide a plan that shows the communication strategies used with health care	Summary of the engagement strategies to be used with health care providers and other partners, and the locally identified population to be reached.	January 31, Annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	providers and other partners and the locally identified population anticipated to reach. **Example 2:** Engage in other vaccination planning activities such as partnership development, provider education, vaccination point of dispensing (POD) planning, tabletop exercises, engagement with communities, leaders, non-traditional provider, or vulnerable populations to develop strategies to ensure equitable access to vaccination services			
3.B	Implement the communication strategies or other activities, working with health care providers and other partners to reach the locally identified population, support providers in vaccination plans, and support equitable access to vaccination services.	Mid-term written report describing activity/activities and progress made to-date and strategies used (template to be provided)	June 30, Annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
3.C	Catalog activities and conduct an evaluation of the strategies used	Final written report, showing the strategies used and the final progress of the reach (template to be provided)	December 31, Annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
3.D	As needed to meet community needs, expand operations to increase vaccine throughput (i.e., providing vaccinations during evenings, overnight, and on weekends). Activities may include vaccine strike teams, mobile vaccine clinics, satellite clinics, temporary, or off-site clinics to travel and provide vaccination services in non-traditional settings, or to supplement the work of local health departments in underserved communities, and may include administration costs for other vaccines co-administered at the events. These activities may be done by the local health department or in collaboration with community partners. (see Restrictions on Funds below)	Quarterly reports summarizing quantity, type, and frequency of activities	March 31, Annually June 30, Annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
3.E	At the LHJ discretion, provide incentives to persons receiving COVID vaccine, adhering to *LHJ Guidance for COVID Initiatives Application* requirements and allowable/unallowable use of federal funds.	a. LHJ Incentive Plan Proposal b. Quarterly report that summarizes quantity of incentives purchased and distributed	a. Prior to implementing b. March 31, Annually June 30, Annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the DOH Finance SharePoint site. Questions related to this SOW, or any other finance-related inquiry, may be sent to finance@doh.wa.gov.

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 USASpending.gov by DOH as required by P.L. 109-282.

Program Specific Requirements

Restrictions on Funds (i.e., disallowed expenses or activities, indirect costs, etc.):
Coverage of co-administration costs for other vaccines administered at vaccination events does NOT apply to the FEMA Mass Vaccination funding. Coverage of co-administration costs only applies to the vaccine funding (COVID19 Vaccine R4, MI 74310230) allocated for Task 3 of the consolidated contract. FEMA Mass Vaccination funding is only available to cover the costs for COVID vaccine administration and cannot be used for co-administration costs of other vaccines.

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: Supplemental Nutrition Assistance Program-Education - Effective January 1, 2022

Local Health Jurisdiction Name: Lewis County Public Health & Social Services Department

Contract Number: CLH31017

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

Funding Source	Federal Compliance (check if applicable)	Type of Payment
☒ Federal Subrecipient ☐ State ☐ Other	☒ FFATA (Transparency Act) ☐ Research & Development	☒ Reimbursement ☐ Fixed Price

Period of Performance: January 1, 2022 through December 31, 2024

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 (Basic Food, Food Stamps) will make healthy food choices within a limited budget and choose active lifestyles consistent with the current USDA dietary guidelines.

Revision Purpose: The purpose of this revision is to add FFY22 IAR SNAP Ed Program Management category funds.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date	LHJ Funding Period End Date	Current Allocation	Allocation Change Increase (+)	Total Allocation
FFY22 IAR SNAP ED PROG MGNT-REGION 5	76701939	10.561	333.10.56	01/01/22	09/30/22	38,506	33,907	72,413
						0	0	0
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						**38,506**	**33,907**	**72,413**

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.0	**Project Planning, Implementation, and Performance** For SNAP-Ed, the Subrecipient will develop, implement, and evaluate a SNAP-Ed project included in the Washington SNAP-Ed State Plan approved by Department of Social and Health Services (DSHS) and United States Department of Agriculture (USDA); and, as described in the Subrecipient's project work plan approved by Department of Health (DOH).	1. Project provides 100% of SNAP-Ed activities at eligible sites and/or with eligible audiences. 2. On-time delivery, implementation, and evaluation of Project activities as scheduled in approved state plan and project work plan. 3. Project plan supports at least one State SNAP-Ed goal as selected by Subrecipient. 4. Demonstrates progress towards project objective(s), and additional project goal(s) determined by Subrecipient are demonstrated and reported.	For the Period: 01/01/22 to 09/30/23 10/01/23 to 12/31/24 TBD **Due:** per the approved work plan and per the required due dates during the federal fiscal year, and no later than 09/30/23. 10/01/23 to 12/31/24 TBD.	Reimbursement upon on-time receipt and approval of acceptable deliverables/out-comes for the funding period will not exceed ~~$38,506~~ *$72,413*. **Lewis County Public Health** will be paid the allowable costs incurred based on their approved

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		5. Project maintains cost-effectiveness per current approved cost-effective measure provided by DOH or DSHS. **MEASURE** Sites and audiences included in Project by Subrecipient documented as approved eligible sites or audiences. Documented required reporting by Subrecipient of the delivery, implementation, and evaluation of approved Project activities in the required PEARS online reporting modules, where relevant to Project (Program Activities, PSE Site Activities, Indirect Activities, Coalitions, Partnerships, and Success Stories), and in a progress report form/system approved by DOH. Documented reviews of Subrecipient Project activities through required reporting and project and fiscal monitoring reviews and reports. Cost per reach meets current cost-effective measure when reviewed by DOH.		budget and program allowability. See special billing requirements section. **NOTE: The DOH SNAP-Ed program will deny payment for any costs not submitted by the required due dates without prior DOH approval in writing.
1.1	**Project Progress: Monitoring and Compliance** For SNAP-Ed, the Subrecipient will demonstrate satisfactory progress of the approved Project as documented in DOH SNAP-Ed progress reports, progress reviews, and project and fiscal monitoring reports. Monitoring of Subrecipient Project progress includes but is not limited to the following activities: i. one-on-one progress reviews with DOH, ii. progress reports submitted to DOH, iii. project monitoring completed with DOH or DSHS or USDA, and iv. project monitoring site visits completed by SNAP-Ed statewide initiative teams. Satisfactory progress of the Subrecipient's Project includes progress shown in the following areas	1. On-time delivery of proposed list of Project site(s) or audience(s) to DOH. 2. All sites and/or audiences are determined to be eligible per current SNAP-Ed eligibility guidance and DOH process before programming begins with site(s) or audience(s). 3. Demographic data of class participants is collected and reported for all direct education strategies. 4. On-time reporting of actual participant reach to DOH in approved method/form. 5. Intervention strategies implemented as planned or using approved alternate strategies. 6. Approved evaluation plans and methods implemented for the project (e.g. pre and post surveys for direct education; PSE assessments). 7. Evaluation results are used to report progress and outcomes of project, and to adapt the project as needed. 8. Strategy as feasible for working with one or more CSOs implemented and demonstrated to increase	For the Period: 01/01/22 to 09/30/23 10/01/23 to 12/31/24 TBD **Due: Progress reviews.** Occur at minimum once a fiscal year, and no later than 09/30/23. 10/01/23 to 12/31/24 TBD. **Due: Project monitoring.** Occurs at minimum once within every other fiscal year. If project monitoring documents major deficiencies or corrective action, the Subrecipient will be monitored again within the fiscal year. Project monitoring can be scheduled	See payment information as referenced in task number 1.0

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	and documented in reporting and/or monitoring completed: 1. Progress demonstrated in achieving goal(s) outlined in the project. 2. Progress demonstrated in achieving objective(s) outlined in the project's interventions. 3. Progress demonstrated in creating a sustainable project. 4. Progress demonstrated in engaging or involving the community in project planning, implementation, and/or evaluation. 5. Progress demonstrated in working with DSHS community services offices (CSOs). 6. Progress demonstrated in promoting available Federal, state, or local fruit and vegetable incentive programs to SNAP clients. 7. Progress demonstrated in using strategies that are evidence-based and delivered with fidelity, where applicable. 8. Compliance with current SNAP-Ed financial and cost policy guidance and 2 CFR 200 federal Uniform Administrative Requirements (OMB guidance).	knowledge, awareness, or participation of SNAP-Ed eligible audience. 9. Strategy for promoting available Federal, state, or local fruit and vegetable incentive program(s) is implemented and demonstrated to increase knowledge, awareness, or participation of program(s) in SNAP-Ed eligible audience. 10. **Direct education strategies only:** Statewide SNAP-Ed Curriculum team or DOH monitoring reviews show education delivered with fidelity, with no major deficiencies. If major deficiencies documented, corrected properly within timeline required. 11. Compliance maintained with current SNAP-Ed financial and cost policy guidance, 2 CFR 200 federal Uniform Administrative Requirements (OMB guidance), and related DOH SNAP-Ed fiscal policy and procedures. **MEASURE** **Progress reviews** – documentation of one-on-one meeting(s) with DOH SNAP-Ed staff person(s) and Subrecipient completed in person, web conference, phone, or via email as needed. Documentation of progress review notes. **Project monitoring** – completed in person, web conference, phone, or via email as needed. Completion of on-site program observations where applicable. Completion of project monitoring report forms, with monitoring results documented and provided to Subrecipient. **Fiscal monitoring** – documentation of completed fiscal reviews scheduled by SNAP-Ed fiscal analyst or DOH fiscal monitoring unit, with corresponding reports where applicable. Fiscal monitoring completed in person, web conference, phone, or via email as needed.	more frequently if deemed necessary by DOH, or if agreed upon by both parties. **Due: Fiscal monitoring.** Each Subrecipient receives one (1) annual fiscal monitoring visit every other year, unless Subrecipient monitoring results in corrective action or finding, in which case Subrecipient will be monitored again the following year. Fiscal monitoring can be scheduled more frequently if deemed necessary by DOH, or if agreed upon by both parties.	
2.0	**Evaluation Data and Reports** For SNAP-Ed, the Subrecipient will report progress of the approved project and work plan, including ongoing evaluation of the project and	On-time and correct submission of reporting, data, and materials for all SNAP-Ed funded activities implemented, including:	For the Period: 01/01/22 to 09/30/23 10/01/23 to 12/31/24 TBD	See payment information as referenced in task number 1.0

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	outcomes, using an approved form/system on a regular basis that will at a minimum include: 1. Progress reports 2. Reporting in PEARS online reporting system of all SNAP-Ed activities SNAP-Ed activities implemented and evaluation of the project and outcomes are reported in an online program evaluation and reporting system (PEARS) through the following required modules as appropriate for the approved project: Program Activity (direct education), Indirect Activity (health promotion, indirect education channels), PSE Site Activities, Partnerships, Coalitions, Success Stories, and Social Marketing. The following evaluation activities and information are required based on the Subrecipient's approved project and work plan. • Formative evaluation • Process evaluation • Outcome evaluation • Qualitative evaluation • Evaluation of PSE strategies **Please Note**: the deliverables may change based on state SNAP-Ed Evaluation guidance, DSHS, or USDA requirements. **Please Note**: Topics included in Progress Report subject to change based on Department of Health (DOH), Department of Social and Health Services (DSHS), Washington SNAP-Ed (WA SNAP-Ed), or United States Department of Agriculture (USDA) Food and Nutrition Services (USDA) requirements.	1. Progress for all intervention strategies reported for approved project plan. 2. All evaluation results reported for approved project plan (formative, process, outcome, qualitative, PSE). 3. Success stories reported for approved project plan describing progress or success of project activities, or positive change or improvement in SNAP-Ed eligible site(s) or audience(s). 4. Required release form(s) for all photos submitted. 5. **Direct education strategies only:** All required information for scheduled direct education lessons submitted to Statewide SNAP-Ed Curriculum team, using approved form/system, by dates required. On-time and correct submission of required evaluation data for direct education strategies into PEARS electronically, or using approved reporting method, according to time frame provided, including: 6. **Direct education strategies only:** Pre-test surveys for each project class series are entered into PEARS by Subrecipient no later than two weeks after completion of the pre-test survey. 7. **Direct education strategies only:** Post-test surveys for each project class series are entered into PEARS by Subrecipient no later than two weeks after completion of the post-test survey. 8. **Direct education strategies only:** Demographic cards for each class series are entered into PEARS by Subrecipient no later than two weeks after collection of the demographic cards. **MEASURE** Documentation showing completion of progress report and submission to DOH on or before the required due dates, or by approved extension date. Completion of required evaluation data in progress reports and PEARS electronically, or using approved reporting method/form, on or before the required due dates, or by approved extension date.	**Progress Reports:** Due at minimum quarterly, and no later than 10 calendar days after the end of the quarter, except for the last month of the FFY which is due by 9/15/22. If the 10th calendar day falls on a weekend day, the report is due the next business day. • 1st Progress report due 1/11/22 • 2nd Progress report due 4/12/22 • 3rd Progress report due 7/12/22 • Final Progress report due 9/15/22, or follow close-out procedures. • FFY 23-24 TBD **PEARS**: Project evaluation and reporting required between 10/1/21 to 9/15/22. • **Direct education strategies only:** PEARS Program Activities module updated with completed activities no later than two (2) weeks after services are provided. • **Due:** PEARS Indirect Activities, PSE Site Activities, Partnerships, Coalitions, Success Stories, and Social Marketing modules completed no later than the last business day of	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		Direct education strategies only: 1. Entry of required SNAP-Ed participant surveys into PEARS using DOH approved method, on or before the required due dates or by approved extension date. 2. Completion of required evaluation data into PEARS electronically, or using approved reporting method, on or before the required due dates for data entry, or by approved extension date.	the month following when the activity took place, except for the last month of the FFY which is due by 9/15/22. • Jan 2022 by • 2/26/22 • Feb 2022 by 3/31/22 • Mar 2022 by 4/30/22 • Apr 2022 by 5/31/22 • May 2022 by 6/30/22 • Jun 2022 by • 7/30/22 • Jul 2022 by • 8/31/22 • Aug 2022 by 9/15/22 • Final data entry for all activities not already reported, due by 9/15/22, or follow close-out schedule. • FFY23-24 TBD SNAP-Ed Direct education conducted between 01/01/22 and 9/15/22. FFY23-24 TBD • **Direct education strategies only:** Completed Pre- and post-test surveys are entered into PEARS database by Subrecipient no later than two weeks after completion of the survey. All completed pre- and post-test surveys must be entered by Subrecipient, no later than COB 9/15/22,	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
			or follow close-out schedule.	
3.0	**Civil Rights Training** All SNAP-Ed funded staff must complete training each fiscal year in civil rights. *See special requirements section- Civil Rights Documentation must include: • Training and source • Who attended • Date completed	On-time completion of an approved Civil Rights training for all SNAP-Ed funded staff. **MEASURE** Submission of documentation showing completed Civil Rights training for all SNAP-Ed funded staff on or before the required due date.	For the Period: 01/01/22 to 09/30/23 10/01/23 to 12/31/24 TBD **Due:** 01/01/22 for all SNAP-Ed funded staff. FFY23-24 TBD. New hires to complete within 30 days of hire.	See payment information as referenced in task number 1.0
3.1	**Other Required Training and Meetings** The following trainings or meetings are required for all Subrecipients when provided by DOH or WA SNAP-Ed for the staff listed. Unless more staff attendance is required, minimum of one (1) staff person required to attend to satisfy requirements. Multiple staff may attend if costs for attendance are covered in Subrecipient's annual budget. • **Fiscal training** – fiscal agent or project coordinator, whoever is most responsible for creating and monitoring budget, procurements, invoices, budget decisions, or budget amendments for the SNAP-Ed program. • **Food handler training** – all staff who will handle, prepare, cook, assemble, and/or serve food or drink to participants or the public. • **Training on data collection and reporting** – project coordinator or any staff person responsible for collecting, reporting, or entering SNAP-Ed related data. • **Regional meeting(s), when provided** – project coordinator or any qualified designated staff person. • **Annual State SNAP-Ed forum, when provided** - project coordinator or any qualified designated staff person. • **SNAP-Ed Curriculum training (either in person or online)** (only required for direct	On-time completion of all required trainings by required SNAP-Ed staff. Attendance of required or appropriate staff person(s) at all required meetings. Demonstration of satisfactory understanding of the information and concepts included in required trainings. **SNAP-Ed Curriculum**: On-time completion of required training for specific curriculum to be used in direct education strategy by project coordinator or qualified designated staff person responsible for delivering SNAP-Ed curricula to SNAP-Ed eligible audience. **Food handler training**: Completion of a Washington State authorized food handler or food worker training by all staff who will handle and serve food to the public. **Coordinator meetings**: Attendance of project coordinator or qualified, designated staff person to at least 50% of all coordinator meetings provided. **Regional meetings**: Attendance of project coordinator or qualified, designated staff person to at least 50% of all regional meetings provided. **State Forum**: Attendance of project coordinator or qualified, designated staff person to all state forums provided.	For the Period: 01/01/22 to 09/30/23 10/01/23 to 12/31/24 TBD **Fiscal:** Annually, and no later than March 31, 2022. FFY23-24 TBD. **SNAP-Ed Curriculum**: New direct education staff trained within 30 days for specific curriculum to be used in direct education strategy, or before providing SNAP-Ed direct education activities to SNAP-Ed audience. Project coordinator or qualified designated staff person to complete additional SNAP-Ed Curriculum training when new information is provided for specific curriculum to be used in direct education strategy. **Data collection and reporting**: Annually, or more often as needed. If approved data collection system changes, every	See payment information as referenced in task number 1.0

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	education strategies) – project coordinator or qualified designated staff person responsible for delivering SNAP-Ed curricula to SNAP-Ed eligible audience. • **SNAP-Ed Systems Approaches for Healthy Communities training (online or in person, when provided) -** project coordinator and all staff involved in planning, implementing, and evaluating SNAP-Ed project activities. • **Project coordinator meetings (conference calls or in person)** –project coordinator or qualified designated staff person.	**SNAP-Ed Systems Approaches for Healthy Communities:** Demonstrate satisfactory understanding of the information and concepts included in the training. Satisfactory application of knowledge and skill learned from training to SNAP-Ed project, as needed. If required meeting or training is not provided, Subrecipient is not required to make up requirements for attendance and will be in compliance. Attendance at required meetings and completion of required trainings required only when provided. **MEASURE** Documentation showing required person(s) and date(s) of attendance for all web-based and in-person required meetings. Documentation showing required person(s); date(s) of attendance; and, completion of training for all web-based and in-person required trainings. Documentation of satisfactory understanding gained from required trainings, and application of applicable knowledge and skills in progress reviews and/or monitoring reports.	SNAP-Ed funded staff member entering data will be required to complete training on any new expectations or system changes on the day of, or within 30 days of when the training is provided. **Annual Forum**: Annually, when provided, and no later than 9/30/22. FFY23-24 TBD **Coordinator meetings**: Completed on dates scheduled by DOH, when provided. **Regional meetings**: Completed on dates scheduled by DOH, when provided. **SNAP-Ed systems approaches training online:** ~~At least once within the three year period of performance, and no later than the end of the first fiscal year within the three year period of performance.~~ • ~~**Due:** On or before 9/30/22. FFY23-24 TBD~~ *All SNAP-Ed funded staff with programmatic responsibilities will complete at least once. Current staff who have not taken this training will*	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
			complete by September 30, 2022. New hires (defined as May 1, 2022 forward) to take within 6 months of start date.	
4.0	**SNAP-Ed Inventory** SNAP-Ed Subrecipients are required by regulation to keep an up-to-date inventory list that includes all non-capital equipment, approved capital equipment, purchased curriculum, and other SNAP-Ed purchased items that are not disposable. This list should include items purchased in prior fiscal years still in use and in possession of the Subrecipient. This list should be updated per the due dates required. Agencies are required to follow the DOH SNAP-Ed Inventory policy and procedure. *See special requirements section - Monitoring	On-time updates to SNAP-Ed inventory list. 1. Inventory list updated per due dates required. 2. Inventory list contains complete list of all items purchased with SNAP-Ed funds in current fiscal year and previous fiscal years still in use and in possession of the Subrecipient. **MEASURE** Completed documentation showing updated SNAP-Ed inventory using approved form/system provided.	For the Period: 01/01/22 to 09/30/23 10/01/23 to 12/31/24 TBD **Due:** Inventory list is required to be updated at minimum annually and no later than 9/15/22. FFY23-24 TBD. At the time of a fiscal or project monitoring review, or when requested, an up-to-date inventory list must be made available.	See payment information as referenced in task number 1.0
5.0	**SNAP-Ed A19 Invoices** Subrecipients must use the A19 invoice form specific to the DOH SNAP-Ed program. This document will be sent to all Subrecipients prior to October 31st of the current fiscal year.	On-time delivery of correct completion of SNAP-Ed A19 invoices, using the current form for the fiscal year. On-time delivery of detailed ledger supporting the costs to be reviewed by SNAP-Ed program via the most current submission procedure before approval of payment. Complete documentation of all actual costs incurred shall be accompanied by the Subrecipient's financial system report. If Subrecipient does not have a financial reporting system, the Subrecipient must check with the DOH SNAP-Ed program for further guidance. **MEASURE** SNAP-Ed invoices (A19) with all documented costs and any required accompanying materials received at DOH by due dates required, or by approved extension date.	For the Period: 01/01/22 to 09/30/23 10/01/23 to 12/31/24 TBD **Due:** Monthly - Submit invoices to DOH no later than 30 calendar days after the end of the preceding month. (E.g. October A19 invoice submitted no later than November 30) o January: 2/28/22 o February: 3/30/22 o March: 4/30/22 o April: 5/30/22 o May: 6/30/22 o June: 7/30/22 o July: 8/30/22 o August: 9/30/22 **Final invoice is due** November 30th, 2022 or	See payment information as referenced in task number 1.0

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
			follow close-out schedule. FFY23-24 TBD. **Or** ***If pre-approved in writing by DOH**, agencies can submit invoices every two months. Upon approval, a list of submission dates will be provided.	

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the DOH Finance SharePoint site. Questions related to this SOW, or any other finance-related inquiry, may be sent to finance@doh.wa.gov.

Federal Funding Accountability and Transparency Act (FFATA) (Applies to federal grant awards.)
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 USASpending.gov by DOH as required by P.L. 109-282.

Program Specific Requirements/Narrative

- Contractor shall ensure, and shall require of its subcontractor, that services provided by the subcontractor are provided in accordance with the terms and conditions of the Contract; and Contractor is responsible for the acts and omissions of the subcontractor.
- Contractor shall ensure that the subcontractor and subcontractor's staff who will have unsupervised access to children or vulnerable adults served under the Contract have each completed and received a satisfactory background check before providing services to DSHS clients, as required under the Contract.
- Contractor shall ensure that the subcontractor has and maintains insurance with the same types and limits of coverage as required of the Contractor under the Contract.
- Contractor is responsible to ensure that all terms, conditions, assurances, and certifications set forth in this Contract are included in the subcontract, including all confidentiality and data security requirements.
- All contract terms in the above-referenced contract remain in full force and effect and nothing in this Checklist shall be construed as waiver of terms in the above-referenced Contract.

Contract Noncompliance and Corrective Action (see CFR § 200.338 Remedies for noncompliance)
The Subrecipient must meet the required set of acceptable deliverables/outcomes and adhere to contractual obligations. The contract's acceptable deliverables/outcomes along with specified due dates will be determined by the DOH SNAP-Ed program and provided to the Subrecipient in writing. Based on contract performance (as documented in progress reviews, progress reports, project monitoring reports, and fiscal monitoring reports) and after implementation of other specific conditions as appropriate listed in CFR § 200.207 - Specific conditions (see https://www.govregs.com/regulations/2/200.207), DOH reserves the right to withhold up to 10% of funds from the next applicable payment to the Subrecipient for deliverables/outcomes that are documented as consistently incomplete; continually late (without approved extension by DOH in writing); found to be unacceptable or unsatisfactory according to the standards of acceptable deliverables/outcomes outlined in the Statement of Work; or, not carried out sufficiently or consistently and documented as such. After DOH SNAP-Ed provides documentation of the issue(s) and outlines the appropriate corrective action in writing, and with approval from the DOH SNAP-Ed program manager, the first withholding of funds up to 10% would occur one time and allow 60 days for the appropriate corrective action to be completed by the Subrecipient. If

satisfactory corrective action is completed within 60 days, the funds withheld will be released to the Subrecipient. If satisfactory corrective action does not take place within 60 days, up to 5% of funds will be withheld from each subsequent monthly payment until the appropriate corrective action is completed. If satisfactory corrective action is completed after the 60-day window, the initial 10% of funds withheld will not be provided as reimbursement to the Subrecipient as penalty. The subsequent monthly withholdings (of up to 5% per month) will be reimbursed to the Subrecipient upon satisfactory completion of the corrective action. The Subrecipient may request reconsideration by submitting a letter to Washington Department of Health SNAP-Education, PO Box 47886, Olympia, WA 98504-7886, or in writing via email to snap-ed@doh.wa.gov.

All invoices must be approved by DOH prior to payment; approval will not be unreasonably withheld. DOH will authorize payment only upon satisfactory and on-time completion of acceptance deliverables/outcomes and for allowable costs as outlined in the SNAP-Ed federal guidance, statement of work, state plan, and/or budget. DOH will return all incorrect or incomplete invoices and will not pay for services that occur outside the period of performance or that are deemed unallowable costs.

Additional Details Regarding Deliverables

Required deliverables for SNAP-Ed reporting will depend on approved SNAP-Ed plan activities for each Subrecipient, e.g. if direct education is not an approved plan activity for a Subrecipient, submission of pre/post surveys is not a required deliverable for that Subrecipient. To attend required trainings during fiscal year, the Subrecipient must use the travel funds within their current allotted budget to send the minimum number of one (1) staff person to the required training. The Subrecipient may request additional travel funds from DOH for required training(s) if necessary and if funds are available.

Monitoring Expectations

The Subrecipient's premises and records will be made available upon request to DOH, DSHS, and USDA staff for the purposes of observing project activities and reviewing for project and fiscal compliance. All non-capital equipment, capital equipment, reusable educational materials and supplies, and any non-disposable items purchased using SNAP-Ed funds should be tracked in an inventory list and available for review upon request. Based on fiscal and project monitoring results or findings, additional monitoring during the fiscal year may be required at the discretion of the DOH SNAP-Ed program, DOH fiscal analyst, or DOH fiscal monitoring unit. Completed project and fiscal monitoring reports with suggestions, observations, comments, feedback, findings, and/or corrective action will be kept on file at DOH and shared with Subrecipients regularly and by request.

Staff Requirements

Upon request by DOH, the Subrecipient must demonstrate that SNAP-Ed staff meet requirements appropriate to their positions including but not limited to: background checks, food handlers' permits, qualifications, and training required by DOH.

Project Coordinator Requirements

The Subrecipient must maintain a SNAP-Ed project coordinator. The project coordinator is the main contact between Department of Health SNAP-Ed team and the Subrecipient. DOH SNAP-Ed expectations for the project coordinator responsibilities include:

- Ensure all contract deliverables are met.
- Coordinate the planning, implementation, evaluation, and reporting of all parts of the approved project plan.
- Comply with and remain knowledgeable about all WA SNAP-Ed and DOH SNAP-Ed policies and procedures.
- Comply with and remain knowledgeable about the National SNAP-Ed Guidance.
- Ensure staff and any sub-Subrecipients funded through this contract stay informed of current and new SNAP-Ed policies, and are held accountable to policies when needed.
- Ensure staff and any sub-Subrecipients meet requirements appropriate to their positions, including but not limited to: background checks, food handlers' permits, and trainings required by WA SNAP-Ed and DOH.
- Attend, or designate and send qualified staff member as proxy to, required DOH and State SNAP-Ed meetings and trainings.
- Monitor or maintain knowledge of project budget status, including estimated spend out and total dollars spent to date.
- Submit plan and budget amendments for approval as outlined in the current year's policy and procedures.
- Coordinate the on-time completion of all data entry and reporting.
- Ensure photo and media release forms are obtained for persons featured in SNAP-Ed programming photographs or videos.

Communication Requirements

The Subrecipient must maintain communication with DOH SNAP-Ed. Communication required between DOH SNAP-Ed and the Subrecipient will not be unreasonable or excessive. DOH SNAP-Ed expectations for communication include:

- Submit updates to DOH following any change in contact information for the project coordinator, fiscal agent, contract signatory, or any SNAP-Ed funded staff within 10 business days of the change.
- Be available for regular and intermittent meetings, both in person and phone, with DOH SNAP-Ed as agreed upon or as needed.
- Respond to all DOH and SNAP-Ed Statewide initiative requests within the timeline requested.
- Maintain or obtain an internet connection for communication with DOH, for access to DOH SharePoint webpages, to view updates and messages from Washington SNAP-Ed through the WA SNAP-Ed Providers website, and for reliable reporting of SNAP-Ed activities. If reliable internet connection cannot be secured, the Subrecipient and DOH SNAP-Ed will agree on a plan for necessary communication, data entry, and reporting.
- Obtain a Secure Access Washington (SAW) account to access DOH SNAP-Ed SharePoint webpages.

SNAP-Ed Assurances:

The following assurances must be followed (see program Guidance https://snaped.fns.usda.gov/program-administration/guidance-and-templates)

- The Subrecipient is fiscally responsible for activities funded with Supplemental Nutrition Assistance Program Education funds and is liable for repayment of unallowable costs.
- Programming is provided to approved SNAP-Ed eligible audiences.
- Only expanded or additional coverage of those activities funded under the Expanded Food and Nutrition Education Program (EFNEP) may be claimed under the SNAP-Ed grant. Approved activities are those designed to expand the State's current EFNEP coverage in order to serve additional SNAP-Ed targeted individuals. In no case may activities funded under the EFNEP grant be included in the budget for SNAP-Ed.
- Contracts are procured through competitive bid procedures governed by State procurement regulations.
- Program activities are conducted in compliance with all applicable Federal laws, rules, and regulations including Civil Rights and OMB regulations governing cost issues.
- Program activities do not supplant existing nutrition education and obesity prevention programs, and where operating in conjunction with existing programs, enhance as well as supplement them. This applies to all activities and costs under the Federal budget.
- Program activities are reasonable and necessary to accomplish SNAP-Ed objectives and goals.
- All materials developed with SNAP- Ed funds include the appropriate USDA non-discrimination statement and credit SNAP as a funding source in standard font that is easily readable.

SNAP-Ed Statewide Initiatives

Subrecipients are expected to communicate with, respond to, and comply with requests, guidance, requirements, and/or on-site visits from all contracted SNAP-Ed statewide initiative entities.

Any SNAP-Ed curriculum modifications should be developed and executed based on the most current Guidance for Curriculum Modification, found under "Guidance and Process" on WA SNAP-Ed Providers website. Subrecipients must consult DOH SNAP-Ed as directed.

After notification to the DOH SNAP-Ed implementing agency, the Subrecipient may adjust or deny requests, requirements, and/or site visits from any contracted SNAP-Ed statewide initiative entities if said request, requirement, and/or site visit is deemed unreasonable, burdensome, unnecessarily costly, or inequitable after appropriate consideration and deliberation between the Subrecipient, DOH SNAP-Ed, and the contracted SNAP-Ed statewide initiative entity/entities; and, when necessary, DSHS. After appropriate consideration and deliberation, the resulting decision about whether or not the Subrecipient must comply or can adjust or deny a specific will be provided in writing to the Subrecipient from DOH SNAP-Ed and/or DSHS.

Health and Safety

Subrecipients are not required to work under conditions that could endanger their health, safety, or well-being. Additionally, Subrecipients should ensure they are not putting any SNAP-Ed audience or community members in situations that could endanger their health, safety, or well-being. Participation in SNAP-Ed by the SNAP-Ed audience is voluntary. If an activity is deemed unsafe, Subrecipients must adapt activities as needed to allowable and safe alternatives. For a given situation, all Subrecipients and SNAP-Ed activities should follow current health and safety laws, regulation and guidance from the designated authorities in the applicable city/town, county, state, and/or the related federal authority,

e.g. CDC, USDA. If Subrecipient is unable to adapt activities as needed to safe, allowable alternatives within their allocation, funding for the current fiscal year may change after sufficient and acceptable technical assistance between Subrecipient and DOH SNAP-Ed and after prior written notification to the Subrecipient. Any change in annual funding due to inability to adapt project activities as needed to safe, allowable alternatives will not be a permanent change in annual funding, unless accompanied by actions outlined under the 'Contract Noncompliance and Corrective Action' section.

Audits
The Subrecipient must make State financial and program audits or reviews conducted by other entities available to the DOH, DSHS, USDA, or its designee.

Indirect Rate/Allocation Plan
All indirect rate/allocation plans must be submitted and preapproved by the DOH grants office and the DOH SNAP-Ed program. The Subrecipient is responsible for ensuring that indirect costs included in the Subrecipient's SNAP-Ed plan and budget are supported by an indirect rate and/or cost allocation plan approved by the appropriate agency. The Subrecipient cannot bill indirect costs that are determined to be unacceptable and will be disallowed.

Annual Civil Rights Training Requirement (see USDA Instruction Number 113-1 Chapter XI) http://www.fns.usda.gov/sites/default/files/113-1.pdf "Training is required so that people involved in all levels of administration of programs that receive Federal financial assistance understand civil rights related laws, regulations, procedures, and directives. Local agencies are responsible for training their sub recipients, including 'frontline staff.' 'Frontline staff' who interact with program applicants or participants, and those persons who supervise 'frontline staff' must be provided civil rights training an annual basis."

Records Maintenance - Record Retention and Management - State Agency and All Subrecipients 7CFR 272.2
DOH SNAP-Ed regulations require that all records related to the SNAP-Ed program be retained for six (6) years from fiscal closure. This requirement applies to fiscal documentation and procurement records, contract related documents and emails, progress reports, monitoring reports, and SNAP-Ed client information (pre/post surveys, demographic cards, etc.). Supporting documentation may be kept at the Subrecipient level, but shall be available for review within six years from the date of the last quarterly claim submittal. Any costs that cannot be substantiated by source documents will be disallowed as charges to SNAP-Ed.

Travel
The Subrecipient is expected to comply with the Office of Financial Management's Travel Management Requirement and Restrictions as found in policy 10.10 (http://www.ofm.wa.gov/policy/10.htm), with the travel requirements found in the current year's SNAP-Ed federal guidance, and with any travel related DOH SNAP-Ed policy and procedures. If the Subrecipient organization's travel related policy and procedures are in conflict with any of the aforementioned travel related federal or state policies and procedures, the Subrecipient organization will follow the stricter of the travel related policy and procedures unless otherwise approved and allowable by DOH or higher authority.

Amendments
Subrecipients should check the current year's federal SNAP-Ed guidance, the current year's DOH SNAP-Ed budget amendment guidance, and/or with a DOH SNAP-Ed program consultant to know what changes they can make on their own and what changes require an amendment and pre-approval in writing. Notify DOH staff prior to implementing amendments that significantly change the scope or direction of the approved project plan, including creating new or completely ending interventions, or adding different recruitment or delivery sites for reaching SNAP eligible population. Following the current year's guidance when required, subrecipients must submit a written plan amendment or written budget amendment request to DOH, and receive written approval from DOH, prior to making any changes within their project or budget and prior to making any purchases included within the amendment. Any requests needing USDA approval must be submitted to DOH no later than April 1st of each fiscal year, or no later than date specified by USDA, DSHS, or DOH. Following the current year's guidance when required, if Subrecipients submit plan or budget no cost amendments that do not require DSHS or USDA approval, DOH can review those and make approvals on a case by case basis during the federal fiscal year following the current year's guidance when required. All cost amendments that do not require DSHS or USDA approval should be submitted to DOH no later than July 16th of each fiscal year.

Overtime
Staff overtime is not billable in the DOH SNAP-Ed program unless it has been reviewed by the DOH SNAP-Ed program in advance and approved in writing.

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 contract 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 Subrecipient within 10 working days upon notice by the funding source of funding availability.

Special Billing Requirements

1. All invoices, billing, and reimbursements must be in compliance with all applicable Federal laws, rules, regulations including the current year SNAP-Ed Guidance and OMB circulars governing cost issues.
2. Total costs billed will not exceed the USDA-approved budget amount listed in the box below.
   - Bills must be for only SNAP-Ed specific activities, using a DOH A19-1A Invoice voucher.
   - A SNAP-Ed specific A19-1A must be submitted to the subrecipient's designated DOH SNAP-Ed staff member within 30 days of the last day of the month for which the work is being billed, OR
   - A Subrecipient may request pre-approval to bill every 2 months instead, in which case, that Subrecipient is required to adhere to the billing due dates provided by DOH.
3. The SNAP-Ed program will deny payment for any costs not submitted by the due date without prior approval. If for ANY reason a Subrecipient is unable to submit the SNAP-Ed A-19-1A on the due date, the Subrecipient is required to submit a request for an exception to the DOH no later than 7 days prior to due date to the DOH SNAP-Ed program. The SNAP-Ed program reserves the right and responsibility to either approve or deny the request for an exception and will reply to the request.
4. Supporting documentation for each month must be submitted with each SNAP-Ed A19-1A.
   - At the very least this means a copy of a Subrecipient's financial expanded/detailed general ledger level report.
   - Additionally, all receipts, timecards and other supporting documentation, as noted by USDA, must be available upon request.
5. If a Subrecipient meets one of the criteria below, they will need to submit all SNAP-Ed backup documentation with each bill and this requirement will continue until further notice by DOH.
   - All new SNAP-Ed Subrecipients within their 1st fiscal year.
   - Subrecipients with current fiscal findings.
   - Subrecipients who have not submitted adequate or accurate backup documentation within the last year.
   - Subrecipients who receive a rating of "High" from the DOH Federal Subrecipient Risk Assessment Tool.

BUDGET	
Source	**Amount**
USDA	~~$38,506~~ *$72,413*

Exhibit A
Statement of Work
Contract Term: 2022-2024

DOH Program Name or Title: WIC Nutrition Program - Effective January 1, 2022

Local Health Jurisdiction Name: Lewis County Public Health & Social Services Department

Contract Number: CLH31017

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

Period of Performance: January 1, 2022 through December 31, 2024

Funding Source	Federal Compliance (check if applicable)	Type of Payment
☒ Federal Subrecipient ☐ State ☐ Other	☒ FFATA (Transparency Act) ☐ Research & Development	☒ Reimbursement ☐ Fixed Price

Statement of Work Purpose: The purpose is to provide Women, Infants, and Children (WIC) Nutrition Program services by following WIC federal regulations, WIC state office policies and procedures, WIC directives, and other rules. Refer to the Program Specific Requirements section of this document.

Revision Purpose: To add FFY22 USDA FMNP Program Management funds.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date	LHJ Funding Period End Date	Current Allocation	Allocation Change Increase (+)	Total Allocation
FFY22 USDA WIC CLIENT SVS CONTRACTS	76101234	10.557	333.10.55	01/01/22	09/30/22	325,400	0	325,400
FFY23 USDA WIC CLIENT SVS CONTRACTS	76101244	10.557	333.10.55	10/01/22	09/30/23	107,650	0	107,650
FFY22 USDA BFPC PROG MGMT	76214231	10.557	333.10.55	01/01/22	09/30/22	43,678	0	43,678
FFY22 USDA FMNP PROG MGMT	76540237	10.572	333.10.57	05/01/22	09/30/22	0	817	817
						0	0	0
						0	0	0
						0	0	0
TOTALS						**476,728**	**817**	**477,545**

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	**WIC Nutrition Program**			See "Billing Requirements" below.
1.1	Maintain authorized participating caseload at 100% based on quarterly average as determined from monthly caseload management reports generated at state WIC office. The Department of Health (Department) State WIC Nutrition Program has the option of reducing authorized participating caseload and corresponding funding when: 1. Unanticipated funding situations occur. 2. Reallocations are necessary to redistribute caseload statewide. 3. Caseload declines.	Outcomes based on monthly participation data from state WIC caseload management reports.	**Authorized participating caseload for January 2022 through December 2024 = 1,730**	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.2	Submit the annual Nutrition Services Plan for each year of the contract.	Nutrition Services Plan	First year due 9/30/22 Second year due 9/30/23	Payment withheld if not received by due date.
1.3	Submit the annual Nutrition Services Expenditure Report for each year of the contract.	Nutrition Services Expenditure Report	11/30/22 11/30/23	Payment withheld if not received by due date.
1.4	Tell participants about other health services in the agency. If needed, develop written agreements with other health care agencies and refer participants to these services.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.5	Provide nutrition education services to participants and caregivers in accordance with federal and state requirements.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.6	Issue WIC benefits while assuring adequate WIC card security and reconciliation.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.7	Collect data, maintain records, and submit reports to effectively enforce the non-discrimination laws (Refer to Civil Rights Assurances below).	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.8a	Submit entire WIC and Breastfeeding Peer Counseling Budget Workbook for each year of the contract	Budget Workbook	First year due 9/30/22 Second year due 9/30/23	
1.8b	Submit Rev-Exp Report spreadsheet from the WIC Budget Workbook monthly with A-19	Revenue and Expense Report and A-19	First year due monthly through December 31, 2022 Second year due monthly through December 31, 2023	
2	**Breastfeeding Promotion**			See "Billing Requirements" below.
2.1	Provide breastfeeding promotion activities in accordance with federal and state requirements.	Status report of chosen activities in Nutrition Services Plan. Documentation must be available for review by WIC monitor staff.	First year due 11/30/22 Second year due 11/30/23 Biennial WIC Monitor	
2.2	Work with community partners to improve practices that affect breastfeeding. Choose one or more of the following projects: ▪ Provide staff, health care providers and community partners virtual breastfeeding training resources. ▪ Work with employers who likely employ low-income people to create worksite environments that support breastfeeding. ▪ Work with birthing hospitals to improve maternity care practices that affect WIC participant breastfeeding rates. ▪ Provide participants access to lactation consultants. Other projects will need pre-approval from the State WIC Office	Status report of chosen activities in Nutrition Services Plan. Documentation must be available for review by WIC monitor staff.	First year due 8/30/22 Second year due 8/30/23 Biennial WIC Monitor	
3	**Breastfeeding Peer Counseling Program (BFPC)**			See "Billing Requirements" below.

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
3.1	Provide Breastfeeding Peer Counseling Program activities in accordance with federal and state requirements. The WIC Breastfeeding Peer Counseling Program is meant to enhance, not replace, WIC Breastfeeding promotion and support activities.	Breastfeeding Peer Counseling Annual Report and expenditures from the previous federal fiscal year. Documentation must be available for review by WIC monitor staff.	First year due 12/31/22 Second year due 12/31/23 Biennial WIC Monitor	
3.2	Track Breastfeeding Peer Counseling Program expenditures and bill separately from the WIC grant.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
4	**Farmers Market Nutrition Program (FMNP)**			See "Billing Requirements" below.
4.1	Distribute all Farmers Market Nutrition Program checks to eligible WIC participants between June and September 30 of current year.	Send completed readable copy of FMNP check registers to State WIC office on a weekly basis following FMNP procedures. Documentation must be available for review by WIC monitor staff.	Weekly June-Sept. 2022 and June-Sept. 2023 All sent by Oct. 1, 2022 and by Oct. 1, 2023 Biennial WIC Monitor	

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the DOH Finance SharePoint site. Questions related to this SOW, or any other finance-related inquiry, may be sent to finance@doh.wa.gov.

Federal Funding Accountability and Transparency Act (FFATA) (Applies to federal grant awards.)
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 USASpending.gov by DOH as required by P.L. 109-282.

Program Specific Requirements
Program Manual, Handbook, Policy References:
The LHJ shall be responsible for providing services according to rules, regulations and other information contained in the following:

- WIC Federal Regulations, USDA, and FNS 7CFR Part 246.
- Washington State WIC Nutrition Program Policy and Procedure Manual
- Office of Management and Budget, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, 2 CFR 200
- Farmers Market Nutrition Program Federal Regulations, USDA, FNS 7CFR Part 248
- Other directives issued during the term of the contract

Staffing Requirements:
The LHJ shall:

- Use Competent Professional Authority staff, as defined by WIC policy, to determine participant eligibility, prescribe an appropriate food package and offer nutrition education based on the participants' needs.
- Use a Registered Dietitian (RD) or other qualified nutritionist to provide nutrition services to high risk participants, to include development of a high-risk care plan. The RD is also responsible for quality assurance of WIC nutrition services. See WIC Policy for qualifications for a Registered Dietitian and other qualified nutritionist.

- Assign a qualified person to be the Breastfeeding Coordinator to organize and direct local agency efforts to meet federal and state policies regarding breastfeeding promotion and support. The Breastfeeding Coordinator must be an International Board-Certified Lactation Consultant or attend an intensive lactation management course, or other state approved training.

Restrictions on Funds:
The LHJ shall follow the instructions found in the Policy and Procedure Manual under WIC Allowable Costs and 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

Special References:
What is the WIC program?

1. The WIC program in the state of Washington is administered by the Department of Health.
2. The WIC program is a federally funded program established in 1972 by an amendment to the Child Nutrition Act of 1966. The purpose of the program is to provide nutrition and health assessment; nutrition education; nutritious food; breastfeeding counseling; and referral services to pregnant, breastfeeding, and postpartum women, infants, and young children in specific risk categories.
3. Federal regulations governing the WIC program (7 CFR Part 246) require implementation of standards and procedures to guide the state's administration of the WIC program. These regulations define the rights, responsibilities, and legal procedures of WIC employees, participants, persons acting on behalf of a participant, and retailers. They are designed to promote:
   a. High quality nutrition services;
   b. Consistent application of policies and procedures for eligibility determination;
   c. Consistent application of policies and procedures for food benefit issuance and delivery; and
   d. WIC program compliance.
4. The WIC program implements policies and procedures stated in program manuals, handbooks, contracts, forms, and other program documents approved by the USDA Food and Nutrition Service.
5. The WIC program may impose sanctions against WIC participants for not following WIC program rules stated on the WIC rights and responsibilities.
6. The WIC program may impose monetary penalties against persons who misuse WIC benefits or WIC food but who are not WIC participants.

Monitoring Visits:
Program and fiscal monitoring are done on a biennial (every two years) basis and are conducted onsite.
The LHJ must maintain on file and have available for review, audit and evaluation:

- All criteria used for certification, including information on income, nutrition risk eligibility and referrals
- Program requirements
- Nutrition education
- All financial records

Assurances/Certifications:

1. **Computer Equipment Loaned by the Department of Health WIC Nutrition Program**
   In order to perform WIC program activities, the Department requires computer equipment, such as computers, signature pads, document scanners, card readers and printers to be in local WIC clinics or to be transported to mobile clinics. This equipment ("Loaned Equipment") is owned by the Department and loaned to the local agency (Contractor). The Loaned Equipment is supported by the Department. This equipment shall be used for WIC business only or according to WIC Policy and Procedures.

   An inventory of Loaned Equipment is kept by the Department. Each time Loaned Equipment is changed, the parties shall complete the Equipment Transfer Form and the Department updates the inventory. A copy of the Transfer Form will be provided to the contractor. Copies of the updated inventory list may be requested at any time.

   The LHJ agrees to:
   a. Defend, protect and hold harmless the Department or any of its employees from any claims, suits or actions arising from the use of this Loaned Equipment.

b. Assume responsibility for any loss or damage from abnormal wear or use, or from inappropriate storage or transportation. The Department may enforce this by:
   1) Requiring reimbursement from the LHJ of the value of the Loaned Equipment at the time of the loss or damage.
   2) Requiring the LHJ to replace the Loaned Equipment with equipment of the same type, manufacturer, and capabilities (as pre-approved by the Department), or
   3) Assertion of a lien against the Contractor's property.
c. Notify the Department immediately of any damage to Loaned Equipment.
d. Notify the Department prior to moving or replacing any Loaned Equipment.

The Department recommends Contractors carry insurance against possible loss or theft.

2. Civil Rights Assurance

a. The LHJ shall perform all services and duties necessary to comply with federal law in accordance with the following Civil Rights Assurance.
b. "The Program applicant hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.); all provisions required by the implementing regulations of the Department of Agriculture; Department of Justice Enforcement Guidelines, 28 CFR 50.3 and 42; and FNS directives and guidelines, to the effect that, no person shall, on the ground of race, color, national origin, sex, age or handicap, be excluded from participation in, be denied benefits of, or otherwise be subject to discrimination under any program or activity for which the Program applicant receives Federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.
c. "By accepting this assurance, the Program applicant agrees to compile data, maintain records and submit reports as required, to permit effective enforcement of the nondiscrimination laws and permit authorized USDA personnel during normal working hours to review such records, books and accounts as needed to ascertain compliance with the nondiscrimination laws. If there are any violations of this assurance, the Department of Agriculture, Food and Nutrition Service, shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the Program applicant, its successors, transferees, and assignees, as long as it receives assistance or retains possession of any assistance from the Department. The person or persons whose signatures appear on the contract are authorized to sign this assurance on behalf of the Program applicant."

3. 2CFR 200

The LHJ shall comply with all the fiscal and operations requirements prescribed by the state agency as directed by Federal WIC Regulations (7CFR part 246.6), 2CFR part 200, the debarment and suspension requirements of 2CFR part 200.213, if applicable, the lobbying restrictions of 2CFR part 200.245, and FNS guidelines and instructions and shall provide on a timely basis to the state agency all required information regarding fiscal and program information.

Billing Requirements:

1. Definitions

Contract Period: January 1, 2022 - December 31, 2024

Contract Budget Period: The time period for which the funding is budgeted.

- There are four federal budget periods

  January 1, 2022 through September 30, 2022;
  October 1, 2022 through September 30, 2023;
  October 1, 2023 through September 30, 2024;
  October 1, 2024 through December 31, 2024.

2. Billing Information:
   a. Billings are submitted on an A-19-1A invoice. These invoices are provided by the Department in the WIC Budget Workbook and include accounting codes for different budget categories.
   b. A-19s are submitted monthly and must be received by the Department within 60 days following the close of each calendar month. Additional A-19s may be submitted at any time, but must be received within 90 days of the close of the federal budget period.
   c. Funds are allocated by budget categories and by federal budget periods (refer to the budget spreadsheet).
   d. Funds are encumbered or spent only during the budget period; no carry forward from previous time periods or borrowing from future time periods is allowed.

e. Payments are limited to the amounts allocated for the budget period for each budget category.
f. Billings are based on actual costs for completed activities. Advance payments are not allowed. Back up documentation must be retained by the LHJ and available for inspection by the Department or other appropriate authorities.
g. Payments will be made only for WIC approved expenditures. Refer to the Washington State WIC Nutrition Program Policy and Procedure Manual Volume 2, Chapter 4 – Allowable Costs and 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.
h. If billing for indirect costs, a Cost Allocation Plan or Federal Indirect Cost Agreement must be submitted prior to payment.

Special Instructions:
The LHJ shall:
1. Maintain complete, accurate, and current accounting of all local, state, and federal program funds received and expended.
2. Provide, as necessary, a single audit in accordance with the provisions of 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. This circular requires all recipients and sub-recipients of federal funds to have a single audit performed should they spend $750,000 or more of federal grants or awards from all sources. Contractors spending less than $750,000 in federal grants or awards may also be subject to audit.
3. Use Breastfeeding Peer Counseling (BFPC) Program funds only to support the peer counseling program. Once the program is established and peer counselors are trained, the majority of the salary costs must be paid to peer counselors to provide direct services to WIC participants. For a list of allowable costs see Volume 2, Chapter 4 – Allowable Costs. The priority use of BFPC funds is to hire and train peer counselors to provide breastfeeding peer counseling services to WIC participants.

SPECIAL REQUIREMENTS			
Contract Funding Period	**Time Period special requirement funds are available**	**Amount**	**Special Requirement Description**
January 2022 to September 2024	January 2022 to September 2022	$2,450	Added in the USDA WIC Client Services Contracts category to cover training and travel expenses for all local WIC staff to participate in WIC-related trainings.

Other:
Any program requirements that are not followed may be subject to corrective action and may result in monetary fines or repayment of funds.