

**City of Carson City
Agenda Report**

Date Submitted: July 28, 2015

Agenda Date Requested: August 6, 2015
Time Requested: 10 minutes

To: Carson City Board of Supervisors
From: Health & Human Services Department (Nicki Aaker; naaker@carson.org)

Subject Title: For Possible Action: To accept the Ebola Preparedness and Response subgrant from the Nevada Division of Public and Behavioral Health in the amount of \$88,192 for the period July 1, 2015 through September 30, 2016.

Staff Summary: The Nevada Division of Public and Behavioral Health – Public Health Emergency Preparedness Program has received supplemental Ebola funding from the Centers for Disease Control and Prevention (CDC) and is providing subgrants to local health authorities, tribal partners, and state labs within Nevada. This grant will be used to support local public health preparedness planning and operational readiness for responding to infectious diseases, such as Ebola.

Type of Action Requested: (check one)
 Resolution Ordinance
 Formal Action/Motion Other (Specify) Information Only

Does This Action Require A Business Impact Statement: Yes No

Recommended Board Action: I move to accept the Ebola Preparedness and Response subgrant from the Nevada Division of Public and Behavioral Health in the amount of \$88,192 for the period July 1, 2015 through September 30, 2016.

Explanation for Recommended Board Action: Grant funds would be used for community preparedness, non-pharmaceutical interventions, and responder (worker) safety and health.

Applicable Statute, Code, Policy, Rule or Regulation: N/A

Fiscal Impact: N/A; no fiscal match is required.

Explanation of Impact: N/A

Funding Source: Division of Public and Behavioral Health – Public Health Emergency Preparedness Program funds from the Centers for Disease Control and Prevention (CDC).

Alternatives: To deny Carson City Health and Human Services permission to accept the Ebola Preparedness and Response supplemental subgrant through the Nevada Division of Public and Behavioral Health – Public Health Emergency Preparedness Program.

Supporting Material: Nevada Division of Public & Behavioral Health – Public Health
Emergency Preparedness Program subgrant for the Centers for Disease Control and Prevention’s
Ebola Preparedness and Response federal grant #3U90TP000534-03S2.

Prepared By: Nicki Aaker, MSN, MPH, RN

Reviewed By: N. Aaker Date: 7/28/15
(Department Head)
[Signature] Date: 7/28/15
(City Manager)
[Signature] Date: 7/28/15
(District Attorney)
Nancy Paulra Date: 7/28/15
(Finance Director)

Board Action Taken:

Motion: _____ 1) _____ Aye/Nay
2) _____ _____

(Vote Recorded By)



State of Nevada
 Department of Health and Human Services
Division of Public & Behavioral Health
 (hereinafter referred to as the Division)

HD #: **14890**
 Budget Account: 3218
 Category: 24
 GL: 8501
 Job Number: 9307415A

NOTICE OF SUBGRANT AWARD

Program Name: Public Health Preparedness (PHP) Preparedness, Assurance, Inspections and Statistics (PAIS)		Subgrantee Name: Carson City Health and Human Services (CCHHS)	
Address: 4150 Technology Way, Suite #200 Carson City, NV 89706-2009		Address: 900 East Long St. Carson City, NV 89706	
Subgrant Period: July 1, 2015 through September 30, 2016		Subgrantee's: EIN: <u>88-6000189</u> Vendor #: <u>T80990941J</u> Dun & Bradstreet: <u>073787152</u>	
Purpose of Award: Funds are intended to demonstrate achievement in the following Public Health Preparedness activities for Ebola Preparedness and Response activities, according to the CDC Grant Guidance.			
Region(s) to be served: <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Specific county or counties: <u>Carson City, Lyon, Douglas</u>			
Approved Budget Categories:		Disbursement of funds will be as follows:	
1. Personnel	\$ <u>33,148.00</u>	Payment will be made upon receipt and acceptance of an invoice and supporting documentation specifically requesting reimbursement for actual expenditures <i>specific to this subgrant</i> . Total reimbursement will not exceed \$88,192.00 during the subgrant period.	
2. Contractual/Consultant	\$ <u>44,632.00</u>		
3. Travel	\$ <u>1,152.00</u>		
4. Equipment	\$ <u>0.00</u>		
5. Supplies	\$ <u>760.00</u>		
6. Other	\$ <u>8,500.00</u>		
7. Indirect	\$ <u>0.00</u>		
Total Cost: \$ <u>88,192.00</u>			
Source of Funds:		% of Funds:	CFDA:
1. Centers for Disease Control and Prevention		100%	93.074
Federal Grant #: 3U90TP000534-03S2			
Terms and Conditions: In accepting these grant funds, it is understood that: 1. Expenditures must comply with appropriate state and/or federal regulations; 2. This award is subject to the availability of appropriate funds; and 3. The recipient of these funds agrees to stipulations listed in the incorporated documents.			
Incorporated Documents: Section A: Assurances; Section B: Description of Services, Scope of Work and Deliverables; Section C: Budget and Financial Reporting Requirements; Section D: Request for Reimbursement; Section E: Audit Information Request; and Section F: DPBH Confidentiality Addendum <u>or</u> Business Associate Addendum (based on PHI usage) Attachment 1: Detailed Work Plan			
Robert Crowell Mayor	Signature	Date	
Erin Lynch Health Program Manager II, PHP	<i>Erin Lynch</i>	<u>7/17/15</u>	
Chad Westom Bureau Chief, PAIS for Marta E. Jensen Acting Administrator, Division of Public & Behavioral Health	<i>Erin Lynch for Chad Westom</i>	<u>7/17/15</u>	

**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
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SECTION A

Assurances

As a condition of receiving subgranted funds from the Nevada State Division of Public and Behavioral Health, the Subgrantee agrees to the following conditions:

1. Grant funds may not be used for other than the awarded purpose. In the event Subgrantee expenditures do not comply with this condition, that portion not in compliance must be refunded to the Division.
2. To submit reimbursement requests only for expenditures approved in the spending plan. Any additional expenditure beyond what is allowable based on approved categorical budget amounts, without prior written approval by the Division, may result in denial of reimbursement.
3. Approval of subgrant budget by the Division constitutes prior approval for the expenditure of funds for specified purposes included in this budget. Unless otherwise stated in the Scope of Work the transfer of funds between budgeted categories without written prior approval from the Division is not allowed under the terms of this subgrant. Requests to revise approved budgeted amounts must be made in writing and provide sufficient narrative detail to determine justification.
4. Recipients of subgrants are required to maintain subgrant accounting records, identifiable by subgrant number. Such records shall be maintained in accordance with the following:
 - a. Records may be destroyed not less than three years (unless otherwise stipulated) after the final report has been submitted if written approval has been requested and received from the Administrative Services Officer (ASO) of the Division. Records may be destroyed by the Subgrantee five (5) calendar years after the final financial and narrative reports have been submitted to the Division.
 - b. In all cases an overriding requirement exists to retain records until resolution of any audit questions relating to individual subgrants.

Subgrant accounting records are considered to be all records relating to the expenditure and reimbursement of funds awarded under this subgrant award. Records required for retention include all accounting records and related original and supporting documents that substantiate costs charged to the subgrant activity.

5. To disclose any existing or potential conflicts of interest relative to the performance of services resulting from this subgrant award. The Division reserves the right to disqualify any subgrantee on the grounds of actual or apparent conflict of interest. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest will automatically result in the disqualification of funding.
6. To comply with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offeror for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
7. To comply with the Americans with Disability Act of 1990, P.L. 101-136, 42 U.S.C. 12101, as amended, and regulations adopted thereunder contained in 28 C.F.R. 26.101-36.999 inclusive and any relevant program-specific regulations
8. To comply with the requirements of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, 45 C.F.R. 160, 162 and 164, as amended. If the subgrant award includes functions or activities that involve the use or disclosure of protected health information (PHI) then the subgrantee agrees to enter into a Business Associate Agreement with the Division as required by 45 C.F.R. 164.504(e). If PHI will not be disclosed then a Confidentiality Agreement will be entered into.
9. Subgrantee certifies, by signing this notice of subgrant award, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pr. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp. 19150-19211). This provision shall be required of every subgrantee receiving any payment in whole or in part from federal funds.

**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
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10. Sub-grantee agrees to comply with the requirements of the Title XII Public Law 103-227, the "PRO-KIDS Act of 1994," smoking may not be permitted in any portion of any indoor facility owned or regularly used for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments. Federal programs include grants, cooperative agreements, loans and loan guarantees, and contracts. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug and alcohol treatment.
11. Whether expressly prohibited by federal, state, or local law, or otherwise, that no funding associated with this subgrant will be used for any purpose associated with or related to lobbying or influencing or attempting to lobby or influence for any purpose the following:
 - a. Any federal, state, county or local agency, legislature, commission, council, or board;
 - b. Any federal, state, county or local legislator, commission member, council member, board member, or other elected official; or
 - c. Any officer or employee of any federal, state, county or local agency, legislature, commission, council or board.
12. Division subgrants are subject to inspection and audit by representative of the Division, Nevada Department of Health and Human Services, the State Department of Administration, the Audit Division of the Legislative Counsel Bureau or other appropriate state or federal agencies to:
 - a. Verify financial transactions and determine whether funds were used in accordance with applicable laws, regulations and procedures;
 - b. Ascertain whether policies, plans and procedures are being followed;
 - c. Provide management with objective and systematic appraisals of financial and administrative controls, including information as to whether operations are carried out effectively, efficiently and economically; and
 - d. Determine reliability of financial aspects of the conduct of the project.
13. Any audit of Subgrantee's expenditures will be performed in accordance with generally accepted government auditing standards to determine there is proper accounting for and use of subgrant funds. It is the policy of the Division, as well as federal requirement as specified in the Office of Management and Budget (2 CFR § 200.501(a)), revised December 26, 2013, that each grantee annually expending \$750,000 or more in federal funds have an annual audit prepared by an independent auditor in accordance with the terms and requirements of the appropriate circular. A COPY OF THE FINAL AUDIT REPORT MUST BE SENT TO:

***The Nevada State Division of Public and Behavioral Health
Attn: Contract Unit
4150 Technology Way, Suite 300
Carson City, NV 89706-2009***

This copy of the final audit must be sent to the Division within nine (9) months of the close of the subgrantee's fiscal year. To acknowledge this requirement, Section E of this notice of subgrant award must be completed.

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**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
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SECTION B

Description of Services, Scope of Work and Deliverables

Carson City Health and Human Services (CCHHS), hereinafter referred to as Subgrantee, agrees to provide the following services and reports according to the identified timeframes:

- The attached Detailed Work Plan (Attachment 1) is for activities, July 1, 2015 through September 30, 2016. The Detailed Work Plan contains activity description, outcomes, output, and estimated date of completion for each activity broken down by Capability.
- Submit written Progress Reports to the Division electronically on or before:

➤ October 31, 2015	1 st Quarter Progress Report	(For the period of 7/1/15 - 9/30/15)
➤ January 31, 2016	2 nd Quarter Progress Report	(For the period of 7/1/15 - 12/31/15)
➤ April 30, 2016	3 rd Quarter Progress Report	(For the period of 7/1/15 – 3/31/16)
➤ July 31, 2016	4 th Quarter Progress Report	(For the period of 7/1/15 – 6/30/16)
➤ October 31, 2016	Final Progress Report	(For the period of 7/1/15 – 9/30/16)
- Additional information may be requested by the Division, as needed, due to evolving state and federal reporting requirements.

**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
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SECTION C

Budget and Financial Reporting Requirements

Identify the source of funding on all printed documents purchased or produced within the scope of this subgrant, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada State Division of Public and Behavioral Health through Grant Number 3U90TP000534-03S2 from the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Division nor the CDC."

Any activities performed under this subgrant shall acknowledge the funding was provided through the Division by Grant Number 3U90TP000534-03S2 from the CDC.

Subgrantee agrees to adhere to the following budget:

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Category	Total cost	Detailed cost	Details of expected expenses		
1. Personnel	\$ 33,148				
				Annual Salary	% of time
		\$ 8,260	Manager, Disease Prevention and Control (8 months) (\$82,600 x 15% = \$12,390/12 months = \$1,032.50 x 8 months = \$8,260)	\$ 82,600	15%
		\$ 5,547	Management Assistant 2 (8 months) (\$41,600 x 20% = \$8,320/12 months = \$693.33 x 8 months = \$5,547)	\$ 41,600	20%
		\$ 3,630	Disease Investigation Specialist - Trainee 1 (6 months) (\$36,300 x 20% = \$7,260/12 months = \$605 x 6 months = \$3,630)	\$ 36,300	20%
		\$ 3,630	Disease Investigation Specialist - Trainee 2 (8 months) (\$36,300 x 15% = \$5,445/12 months = \$453.75 x 8 months = \$3,630)	\$ 36,300	15%
		\$ 2,610	PHP Planner (6 months) (\$52,200 x 10% = \$5,220/12 months = \$435 x 6 months = \$2,610)	\$ 52,200	10%
		\$ 9,471	Fringe Benefits – 40% of \$23,677		
2. Contractual / Consultant	\$ 44,632				
		\$ 5,500	Hazwoper Training - 5 days / 40 hours classroom at the location	5 days	\$ 1,100
		\$ 4,500	HICS 5 Training	30 trainings	\$ 150
		\$ 10,000	Plan Writer - Infection Control for EMS		\$ 10,000
		\$ 24,632	Consultant - Plan Developer		\$ 24,632
3. Travel	\$ 1,152				
		\$ 1,152	IN-STATE TRAVEL: Disease Investigator Trainee – Hospital Training Assessment, Carson City, Gardnerville & Yerington 3 trips x 1 staff x 200 miles x \$0.575/mile = \$345 EMS Plan meetings – Douglas County 6 trips x 1 staff x 34 miles x \$0.575/mile.= \$117 Mitigation Plan meetings – Carson City & Douglas County 12 trips x 2 staff x 50 miles x \$0.575/mile= \$690		
4. Equipment	\$ 0				
5. Supplies	\$ 760				
		\$ 510	Office Supplies - \$51 per month x 10 months		
		\$ 250	Printing of Training Materials		

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6. Other	\$ 8,500	
	\$ 5,000	Portable Disinfection Unit – 2 units @ \$2,500 each
	\$ 200	Disinfectant Solution
	\$ 3,000	Portable BioSeal System
	\$ 300	BioSeal Bags - 2 rolls x \$150 each
6. Indirect	\$ 0	No Indirect Rate charged
Total Cost	\$ 88,192	

- Division of Public and Behavioral Health policy is to allow no more than 10% flexibility (no more than a cumulative amount of \$8,819), within the approved Scope of Work, unless otherwise authorized. Upon reaching the 10% funding adjustment threshold, additional adjustments between categories cannot be made without prior written approval from the Division. Changes to the Scope of Work cannot be made without prior approval from the Division and the federal funding agency.
- Equipment purchased with these funds belongs to the federal program from which this funding was appropriated and shall be returned to the program upon termination of this agreement.
- Travel expenses, per diem, and other related expenses must conform to the procedures and rates allowed for State officers and employees. It is the Policy of the Board of Examiners to restrict contractors/Subgrantees to the same rates and procedures allowed State Employees. The State of Nevada reimburses at rates comparable to the rates established by the US General Services Administration, with some exceptions (State Administrative Manual 0200.0 and 0320.0).

Subgrantee agrees to request reimbursement according to the schedule specified below for the actual expenses incurred related to the Scope of Work during the subgrant period.

- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred, summarizing the total amount and type of expenditures made during the reporting period.
- Submit monthly Requests for Reimbursement no later than 30 days following the end of the month; submit a Request for Reimbursement for activities completed through the month of September no later than October 31, 2016.
- The maximum available through the subgrant is \$88,192.00.
- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred.
- Provide complete travel detail including purpose of travel and attach copies of travel claim summary (if available).
- Attached invoice copies for all items listed in Contract/Consultant and Equipment. Also attach invoices for all Supplies and Other purchases that are over \$500 per item. **NOTE:** Supplies are items which have a consumable life of less than 1 year and Equipment are items over \$5,000 per item OR have a consumable life of over 1 year (ie: laptops, iPads, printers, etc...).
- Costs associated with food or meals are NOT permitted unless included with per diem as a part of official travel. Meals cannot be claimed within 50 miles of the official workstation.
- Additional expenditure detail will be provided upon request from the Division.

Additionally, the Subgrantee agrees to provide:

- Provide a copy of all plans developed and all After Action Reports (AAR) for exercises within 45 days of completion.

**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
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- A complete financial accounting of all expenditures to the Division within 30 days of the **CLOSE OF THE SUBGRANT PERIOD**. Any un-obligated funds shall be returned to the Division at that time, or if not already requested, shall be deducted from the final award.

The Division agrees:

- Review and approve activities through programmatic and fiscal reports and conduct annual site visits at the Subgrantee's physical site as necessary.
- Provide technical assistance, upon request, to the Subgrantee.
- The Division reserves the right to hold reimbursement under this subgrant until any delinquent forms, reports, and expenditure documentation are submitted to and accepted by the Division.

Both parties agree:

- Based on the quarterly narrative progress and monthly financial reporting forms, as well as site visit findings, if it appears to the Division that activities will not be completed in time specifically designated in the Detailed Work Plan, or project objectives have been met at a lesser cost than originally budgeted, the Nevada Division of Public and Behavioral Health may reduce the amount of this subgrant award and reallocate funding to other preparedness priorities within the state. This includes but is not limited to:
 - Reallocating funds between the subgrantee's categories, and
 - Reallocating funds to another subgrantee or funding recipient to address other identified PHP priorities, by removing it from this agreement through a subgrant amendment.
- The Subgrantee will, in the performance of the Detailed Work Plan specified in this subgrant, perform functions and/or activities that could involve confidential information; therefore, the Subgrantee is requested to fill out and sign Section F, which is specific to this subgrant, and will be in effect for the term of this subgrant.
- All reports of expenditures and requests for reimbursement processed by the Division are **SUBJECT TO AUDIT**.
- This subgrant agreement may be **TERMINATED** by either party prior to the date set forth on the Notice of Subgrant Award, provided the termination shall not be effective until **30 days** after a party has served written notice upon the other party. This agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Agreement shall be terminated immediately if for any reason the Division, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

Financial Reporting Requirements

- A Request for Reimbursement is due on a monthly or quarterly basis, based on the terms of the subgrant agreement, no later than the 15th of the month.
- Reimbursement is based on actual expenditures incurred during the period being reported.
- Payment will not be processed without all reporting being current.
- Reimbursement may only be claimed for expenditures approved within the Notice of Subgrant Award.

**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
NOTICE OF SUBGRANT AWARD**

SECTION D

Nevada Department of Health and Human Services		HD #: 14890
Division of Public & Behavioral Health		Budget Account: 3218-22
Public Health Preparedness Program		GL #: 8501
		Job #: 9307415A
		Draw #: _____

REQUEST FOR REIMBURSEMENT

Program Name: Public Health Preparedness Preparedness, Assurance, Inspections and Statistics	Subgrantee Name: Carson City Health and Human Services (CCHHS)
Address: 4150 Technology Way, Suite 200 Carson City, NV 89706	Address: 900 East Long Street Carson City, NV 89706
Subgrant Period: July 1, 2015 through September 30, 2016	Subgrantee EIN #: 88-6000189 Subgrantee Vendor #: T80990941J Dunn & Bradstreet #: 073787152

FINANCIAL REPORT AND REQUEST FOR FUNDS

(report in dollars and cents; must be accompanied by expenditure report/back-up)

Month(s): _____ Calendar Year: _____

Approved Budget Category	A Approved Budget	B Total Prior Requests	C Current Request	D Year To Date Total	E Budget Balance	F Percent Expended
1 Personnel	\$ 33,148.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 33,148.00	0%
2 Contract/Consultant	\$ 44,632.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 44,632.00	0%
3 Travel	\$ 1,152.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 1,152.00	0%
4 Equipment	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	0%
5 Supplies	\$ 760.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 760.00	0%
6 Other	\$ 8,500.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 8,500.00	0%
7 Indirect	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	0%
8 Total	\$ 88,192.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 88,192.00	0%

This report is true and correct to the best of my knowledge.

Authorized Signature _____	Title _____	Date _____
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Reminder: Request for Reimbursement cannot be processed without an expenditure report/back-up. Reimbursement is only allowed for items contained within Subgrant Award documents. If applicable, travel claims must accompany report.

FOR DIVISION USE ONLY

Program contact necessary? Yes No Contact Person: _____

Reason for contact: _____

Fiscal review/approval date: _____ Signed: _____

Scope of Work review/approval date: _____ Signed: _____

ASO or Bureau Chief (as required): _____ Date: _____

**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
NOTICE OF SUBGRANT AWARD**

**Carson City Health and Human Services (CCHHS)
Reimbursement Worksheet
July 1 - July 31, 2015**

Carson City Health and Human Services (CCHHS) Reimbursement Worksheet July 1 - July 31, 2015							
Personnel	Title	Description					Amount
						TOTAL	
Contract / Consultant		Description					Amount
						TOTAL	
Travel (Name of Traveler)	Travel Dates	To	Mileage @ \$0.575/mi	Lodging & Per Diem	AirFare & Misc	Purpose/ Description (Attach copy of claim)	Amount
						TOTAL	
Supplies (Items under \$5,000 & consumed within 1 yr)		Description					Amount
						TOTAL	
Equipment (Items over \$5,000 or <u>not</u> consumed within 1 yr)		Description (attach invoice copies for all items)					Amount
						TOTAL	
Other		Description					Amount
						TOTAL	
Indirect		Description					Amount
						TOTAL	
						TOTAL EXPENDITURES	

**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
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**Nevada State Division of Public & Behavioral Health: Public Health Preparedness
CDC Ebola Preparedness & Response Activities
Budget Breakdown by Capability Form
Carson City Health & Human Services (CCHHS)
July 1, 2015 through September 30, 2016**

Contact Name:	<u>Angela Barosso</u>
Phone Number:	<u>775-283-7217</u>
E-Mail Address:	<u>Abarosso@carson.org</u>
Applicant/Agency Name:	<u>CCHHS</u>
Total Agency Request:	<u>\$88,192.00</u>

Insert your total monthly expenditure amount beside each Capability. Return this document along with your monthly reimbursement request. This will provide a tracking to expedite the Quarterly progress reporting.
**Please contact us if you have any questions.

Budget Summary

		Monthly Expenditure:	Budget	Current \$ Expended
CDC Ebola Preparedness Capabilities:				
1. Community Preparedness			\$23,063.00	\$ -
2. Public Health Surveillance and Epi Investigation			\$17,016.00	\$ -
3. Public Health Laboratory Testing	No Activity			\$ -
4. Non-Pharmaceutical Interventions			\$41,069.00	\$ -
5. Responder Safety and Health			\$ 3,300.00	\$ -
6. Emergency Public Information & Warning/Info Sharing			\$ 3,744.00	\$ -
7. Medical Surge:	No Activity			\$ -
	TOTAL		\$88,192.00	\$ -

**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
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SECTION E

Audit Information Request

1. Non-Federal entities that **expend** \$750,000.00 or more in total federal awards are required to have a single or program-specific audit conducted for that year, in accordance with 2 CFR § 200.501(a). Within nine (9) months of the close of your organization's fiscal year, you **must** submit a copy of the final audit report to:

***Nevada State Division of Public and Behavioral Health
Attn: Contract Unit
4150 Technology Way, Suite 300
Carson City, NV 89706-2009***

2. Did your organization expend \$750,000 or more in all federal awards during your Organization's most recent fiscal year?

YES NO

3. When does your organization's fiscal year end?

4. What is the official name of your organization?

5. How often is your organization audited?

6. When was your last audit performed?

7. What time period did your last audit cover

8. Which accounting firm conducted your last audit?

Signature

Date

Title

**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
NOTICE OF SUBGRANT AWARD**

SECTION F

Confidentiality Addendum

BETWEEN

Nevada Division of Public and Behavioral Health

Hereinafter referred to as "Division"

and

Carson City Health and Human Services

Hereinafter referred to as "Contractor"

This CONFIDENTIALITY ADDENDUM (the Addendum) is hereby entered into between Division and Contractor.

WHEREAS, Contractor may have access, view or be provided information, in conjunction with goods or services provided by Contractor to Division that is confidential and must be treated and protected as such.

NOW, THEREFORE, Division and Contractor agree as follows:

I. DEFINITIONS

The following terms shall have the meaning ascribed to them in this Section. Other capitalized terms shall have the meaning ascribed to them in the context in which they first appear.

1. **Agreement** shall refer to this document and that particular inter-local or other agreement to which this addendum is made a part.
2. **Confidential Information** shall mean any individually identifiable information, health information or other information in any form or media.
3. **Contractor** shall mean the name of the organization described above.
4. **Required by Law** shall mean a mandate contained in law that compels a use or disclosure of information.

II. TERM

The term of this Addendum shall commence as of the effective date of the primary inter-local or other agreement and shall expire when all information provided by Division or created by Contractor from that confidential information is destroyed or returned, if feasible, to Division pursuant to Clause VI (4).

III. LIMITS ON USE AND DISCLOSURE ESTABLISHED BY TERMS OF CONTRACT OR LAW

Contractor hereby agrees it shall not use or disclose the confidential information provided, viewed or made available by Division for any purpose other than as permitted by Agreement or required by law.

IV. PERMITTED USES AND DISCLOSURES OF INFORMATION BY CONTRACTOR

Contractor shall be permitted to use and/or disclose information accessed, viewed or provided from Division for the purpose(s) required in fulfilling its responsibilities under the primary inter-local or other agreement.

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
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ATTACHMENT 1

Detailed Work Plan

Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Cooperative Agreements/ PHEP Supplemental for Ebola Preparedness and Response Activities

Carson City Health and Human Services
July 1, 2015 – September 30, 2016

Capability 1: Community Preparedness		\$23,063
Problem Statement #1		
Carson City Health and Human Services (CCHHS) does not have complete information on the training needs regarding infectious disease of the three hospitals in the tri-county area of Carson City, and Douglas and Lyon counties.		
Baseline Capacity #1		
We have identified that the 3 hospitals are currently frontline facilities, with 1 potentially an assessment facility. We have communicated with two of the hospitals directly regarding serious infectious disease plans and training of staff. We have conducted 2 drills/exercises with EMS and healthcare facilities, but do not yet have an assessment of gaps from the AARs. We do not yet have an assessment of how many applicable staff can don/doff PPE appropriately; do not have an assessment of how many staff are aware of their roles / responsibilities and have received the appropriate training.		
Outcomes		
<ol style="list-style-type: none"> 1) By January 2016, 100% of hospitals in the tri-county area will have demonstrated awareness of the gaps in their training by completing the training assessment. 2) By August 2016, appropriate hospital staff will be able to demonstrate newly acquired knowledge and skills based on the additional training provided. 		
Activities	Output Documentation	Date of Completion
1) Development and implementation of a training assessment tool for hospitals.	1) 100% of hospitals have completed the training assessment.	January 2016
2) Identification of appropriate organizations / trainers for classes, such as NDEM or contractor.	2) 100% of applicable facilities will have completed the training identified in the assessment, such as PPE, HICS 5, Hazwoper, etc.	March 2016
3) Hiring a contractor, as needed, and scheduling of training, as appropriate, for each facility.		August 2016
Problem Statement #2		
East Fork Fire Protection District (EFFPD) EMS in Douglas County does not have an Infection Control Plan for serious infectious disease.		
Baseline Capacity #2		
EFFPD has protocols for infection control and blood borne pathogens, but does not have an overarching plan for infection disease that addresses the extra precautions needed for viral hemorrhagic fevers or other emerging infections.		
Outcomes		
<ol style="list-style-type: none"> 1) By June 2016, 100% of identified EFFPD EMS units will be able to demonstrate awareness-level knowledge of the infection control plan. 2) By August 2016, 100% of identified EFFPD EMS units will be able to demonstrate effective infection control procedures. 		
Activities	Output Documentation	Dates of Completion

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1) Development of an infection control plan for East Fork Fire EMS units.	1) East Fork Fire EMS has a draft infection control plan. 2) 100% of East Fork Fire EMS units have completed training on the infection control plan. 3) East Fork Fire EMS has a completed infection control plan.	February 2016
2) Conduct training on the infection control plan for East Fork Fire EMS.		June 2016
3) Conduct a drill on the infection control plan and completion of an AAR/IP.		July 2016
4) Revision and finalization of the infection control plan based on the lessons learned from the drill.		September 2016

Capability 2: Public Health Surveillance and Epidemiological Investigation	\$17,016
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Problem Statement #1

CCHHS has not conducted active or direct active monitoring of a traveler from an Ebola-impacted country, so we have not been able to practice the CDC-recommended procedures or complete our investigation guidelines and finalize our preparedness and response plan.

Baseline Capacity #1

CCHHS has participated in state and federal level Ebola planning and response calls; conducted two exercises with the local hospital, EMS and emergency management; drafted Viral Hemorrhagic Fever (VHF) Investigation Guidelines; and developed a draft Ebola Response Plan.

Outcomes

- 1) By October 2016, CCHHS identified epi and nursing staff will demonstrate knowledge of the VHF Investigation Guidelines.
- 2) By January 2016, identified CCHHS staff will be able to demonstrate awareness-level knowledge of monitoring and management of persons under investigation (PUIs).

Activities	Output Documentation	Date of Completion
1) Staff update of the VHF Investigation Guidelines.	1) Updated VHF Investigation Guidelines. 2) 100% of identified epi and nursing staff have completed training on the investigation and monitoring guidelines for Ebola PUIs and/or confirmed cases by target date. 3) Updated Ebola preparedness and response plan.	September 2015
2) Conduct training and a tabletop exercise for epi and nursing staff that incorporate the investigation and monitoring guidelines.		February 2016
3) Integration of the December 2014 changes to the Interim U.S. Guidance for Monitoring and Movement of Persons with Potential Ebola Virus Exposure into the CCHHS Ebola Response Plan.		March 2016

**Capability 3: Public Health Laboratory Testing
No Activities - \$0**

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Capability 4: Non-Pharmaceutical Interventions		\$41,069
Problem Statement #1		
Carson City needs a community mitigation plan that specifies the policy and procedures for controlled movement of persons, isolation and quarantine, and other appropriate public health actions, and the appropriate legal authorities, including how they will be enforced.		
Baseline Capacity #1		
CCHHS has developed a Pandemic Flu Plan that references recommendations for isolation and quarantine, but with the Ebola outbreak, those issues need to be revisited. Also, CCHHS management has conferred with the DA's office, but the previous administration's opinion is that isolation and quarantine is a state responsibility. PHP has obtained a copy of the Douglas County DA's memo on quarantine and will review with City management, as the Douglas County DA's office has a different opinion.		
Outcomes		
1) CCHHS staff will have awareness and knowledge of appropriate public health actions and the legal authorities to support community mitigation of an infectious disease outbreak. 2) Carson City and Douglas County judges and staff will have access to a body of knowledge on involuntary confinement for communicable disease, including procedural frameworks, statutory text, summaries, relevant case law, and model orders.		
Activities	Output Documentation	Date of Completion
1) Hiring a contractor to develop a Community Mitigation plan with the CDC-recommended elements.	1) A Carson City Community Mitigation plan for a communicable disease. 2) 100% of identified staff complete training on the community mitigation plan by the targeted date. 3) Carson City and Douglas County Bench Book for Involuntary Confinement (for a communicable disease).	April 2016
2) Using the Southern Nevada Bench Book for tuberculosis as a template, develop a bench book for involuntary confinement of persons for Carson City and Douglas County.		August 2016
3) Train identified staff on the community mitigation plan.		July 2016
Problem Statement #2		
CCHHS needs to have an appropriate environmental cleaning and waste management strategy for community settings where a probable or confirmed patient was located.		
Baseline Capacity #2		
During the fall, CCHHS contacted Nevada Division of Environmental Protection (NDEP) for recommendations for waste management companies and called Waste Management to determine if they could handle the applicable level of infectious waste. We were not able to locate an appropriate facility.		
Outcomes		
1) 100% of appropriate staff will demonstrate knowledge of disinfection / waste management strategies. 2) 100% of identified staff will be able to deploy portable disinfection equipment, as needed, in public settings, such as City and other public facilities.		
Activities	Output Documentation	Dates of Completion
1) Staff research into environmental cleaning and waste management companies in Northern Nevada.	1) Written policy and procedures for environmental cleaning and waste management in community settings.	December 2015
2) Purchase of portable disinfection equipment.		January 2016

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3) Development of written protocols/procedures for waste management and disinfection.	2) 100% of identified EMS staff will have completed training in deploying portable disinfection equipment by targeted date.	March 2016
4) Coordination and training with Carson City and East Fork Fire EMS on disinfection protocols/procedures.		August 2016

Capability 5: Responder Safety and Health		\$3,300
Problem Statement #1		
The Sheriff/Coroner and the funeral homes have limited BioSeal supplies to safely handle and store human remains.		
Baseline Capacity #1		
Over 7 years ago, CCHHS assisted the Sheriff/Coroner with purchase of the BioSeal system and supplies for a mass fatality incident. Since the tri-county hospitals do not have morgues, the funeral homes pick up bodies directly from the hospitals or residences, so safe handling techniques are imperative.		
Outcomes		
Sheriff/Coroner and/or funeral homes will have the ability to safely seal/store remains of an Ebola or serious infectious disease patient.		
Activities	Output Documentation	Date of Completion
1) Purchase of a portable BioSeal system with body bags.	1) An additional BioSeal system that is available to the coroner / funeral system.	September 2015
2) Facilitation of training for contract coroners and funeral home staff by the Sheriff/Coroner or designee, as needed (the system comes with a training video).		November 2015

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Capability 6: Emergency Public Information and Warning		\$3,744
Problem Statement #1		
CCHHS needs a revised communications plan that includes Ebola-specific messaging on prevention and mitigation, social media strategies for target audiences, and the ability for 24/7 information triage.		
Baseline Capacity #1		
CCHHS has recently updated its PIC Manual and CERC Plan. However, there is no specific messaging for Ebola. We have limited staff to handle inquiries from the public and the media. We currently have one person handling most of our social media and we are aware of the need to continually post accurate information and monitor our website and social media sites during an emergency. We need to train more staff and develop some strategies for reaching targeted audiences with appropriate messages.		
Outcomes		
1) CCHHS will be able to demonstrate the ability to produce timely and accurate Ebola prevention messaging using pre-developed templates. 2) CCHHS will have increased staff to assist with social media posting and monitoring by 200%. 3) If successful, ability to handle public inquiries and disseminate information 24/7.		
Activities	Output Documentation	Date of Completion
1) Update of PIC/CERC plans, incorporating Ebola-specific messaging.	1) Revised PIC/CERC plans.	November 2015
2) Pursuit of an agreement with the 2-1-1 Crisis Call Center, in collaboration with Emergency Management.	2) 100% of identified staff attend training by target date.	April 2016
3) Training of additional staff in social media posting and monitoring.	3) Social media strategies created for Ebola traveler and prevention education efforts.	February 2016
4) Identification of social media strategies for targeted audiences.		March 2016

Capability 7: Medical Surge
No Activities - \$0