

SECTION B

Description of Services, Scope of Work and Deliverables

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

Scope of Work for Carson City Health and Human Services

Goal 1: Preserve healthcare, workforce, and infrastructure functions and minimize social and economic impacts.

Domain 1: Improve incident management for early crisis response.			
	Planned activity(s)	Activity Documentation	Due Date
Objective 1: Identify and prioritize risk-reduction strategies and risk mitigation efforts in coordination with community partners and stakeholders.	1) Activate the agency’s department operations center (DOC) at a level appropriate to meet the needs of the response. <ul style="list-style-type: none"> • Staff the DOC with the numbers and skills necessary to support the response, assure worker safety and continually monitor absenteeism. • Use established systems to ensure continuity of operations and implement COOP plans as needed. 	Incident Action Plans (IAPs), Quarterly Progress Reports	Quarterly Q1: Due July 31, 2020 Q2: Due October 31, 2020 Q3: Due January 31, 2021 Q4: Due April 31, 2021
	2) Assure the health and safety of the jurisdiction’s workforce, including but not limited to implementation of staff resiliency programs, occupational health/safety programs, responder mental health support.	Quarterly Progress Reports	Q1, Q2, Q3, Q4
	3) Identify gaps and implement strategies that encourage risk reduction behaviors for vulnerable populations.	Quarterly Progress Reports	Q1, Q2, Q3, Q4
	Output(s) for planned activities:		
1) Share risk reduction strategies and risk mitigation efforts with partners and stakeholders. 2) Update plans and jurisdictional response actions incorporate the latest CDC guidance and direction. 3) Provide materials and facilitate training designed to improve the jurisdiction’s public health and healthcare system response.			

Domain 2: Support local jurisdiction recovery.

Objective 1: Plan and adapt for disruption caused by community spread and interventions to prevent further spread.	Planned activity(s)	Activity Documentation	Due Date
	1) Maintain situation awareness to support local jurisdictional recovery efforts to restore pre-event functioning.	IAPs, Quarterly Progress Reports	Q1, Q2, Q3, Q4
	2) Conduct surveillance to monitor disruption in the community caused by COVID-19 and related mitigation activities (e.g., school closures and cancellation of mass gatherings).	Quarterly Progress Reports	Q1, Q2, Q3, Q4
	3) Conduct a Hotwash/After Action Review and develop an improvement plan.	Hotwash/AAR report, Improvement Plan	Q1, Q2, Q3, Q4
Output(s) for planned activities:			
1) Monitor the continuity of essential functions throughout the jurisdiction.			
2) Provide organizations guidance to continue the functions which their customers depend.			
3) Preserve healthcare, workforce, and infrastructure functions and minimize social and economic impacts.			

Domain 3: Provide information management.

Objective 1: Ensure information sharing among public health staff, healthcare personnel, airport entry screening personnel, EMS providers, and the public.	Planned activity(s)	Activity Documentation	Due Date
	1) Develop, coordinate, and disseminate information, alerts, warnings, and notifications regarding risks and self-protective measures to the public, particularly with at-risk and vulnerable populations, and incident management responders.	IAPs, Quarterly Progress Reports	Q1, Q2, Q3, Q4
	2) Ensure redundant platforms are in place for pushing out messages to the public and the healthcare sector regarding risks to the public, risk of transmission, and protective measures.	IAPs, Quarterly Progress Reports	Q1, Q2, Q3, Q4
Output(s) for planned activities:			
1) Disseminate accurate community messaging and adjust as needed.			
2) Update scripts for jurisdictional call centers with specific COVID-19 messaging.			
3) Identify gaps and develop culturally appropriate risk messages for at-risk populations including messages focused on risk-reduction behaviors.			

Domain 4: Enhance countermeasures and mitigation in the community.

Objective 1: Anticipate disruption caused by community spread and interventions to prevent further spread.	Planned activity(s)	Activity Documentation	Due Date
	1) Develop plans and triggers for the implementation of community interventions, including: <ul style="list-style-type: none"> Integrating interventions related to social service providers, criminal justice systems, homeless persons, and other vulnerable populations and at-risk populations. 	IAPs, Quarterly Progress Reports	Q1, Q2, Q3, Q4
	2) Review and update state quarantine and isolation laws, regulations, and procedures. Funds may also be used to develop training and educational materials for local health departments and judicial officials.	IAPs, Quarterly Progress Reports	Q1, Q2, Q3, Q4
	3) Ensure jurisdictional capacity for distribution of medical materiel and supplies.	IAPs, Quarterly Progress Reports	Q1, Q2, Q3, Q4
Output(s) for planned activities:			
1) Implement mitigation strategies for populations at risk of morbidity, mortality, and other adverse outcomes. 2) Update response and recovery plans to include populations at risk. 3) Ensure services (e.g., housing, transportation, food) are in place for community members impacted by social distancing interventions.			

Domain 5: Provide surge management.

Objective 1: Develop strategies to decompress hospitals.	Planned activity(s)	Activity Documentation	Due Date
	1) Activate mechanisms for surging public health responder staff.	IAP, Quarterly Progress Reports	Q1, Q2, Q3, Q4
	2) Coordinate with HPP, healthcare coalitions, health care organizations, emergency management, and other relevant partners and stakeholders to assess the public health and medical surge needs of the community.	IAP, Quarterly Progress Reports	Q1, Q2, Q3, Q4
3) Engage with healthcare providers and healthcare coalitions to address issues related to infection prevention measures, such as: <ul style="list-style-type: none"> Changes in hospital/healthcare facility visitation policies, Social distancing, and 	IAP, Quarterly Progress Reports	Q1, Q2, Q3, Q4	

	<ul style="list-style-type: none"> • Infection control practices in hospitals and long-term care facilities, such as: <ul style="list-style-type: none"> ▪ PPE use, ▪ Hand hygiene, ▪ Source control, and ▪ Isolation of patients. 		
<p>Output(s) for planned activities:</p> <ol style="list-style-type: none"> 1) Activate volunteer organizations. 2) Define triggers for enacting crisis standards of care. 3) Train hospitals, long term care facilities and other high-risk facilities on infection prevention and control. 			
<p>Domain 6: Enhance biosurveillance.</p>			
<p>Objective 1: Enhance core epidemiological activities to support response such as risk assessment, case classification, analysis, visualization, and reporting.</p>	<p align="center">Planned activity(s)</p>	<p align="center">Activity Documentation</p>	<p align="center">Due Date</p>
	<ol style="list-style-type: none"> 1) Conduct surveillance and case identification (including but not limited to, public health epidemiological investigation activities such as contact follow-up). 	<p>Quarterly Progress Reports</p>	<p>Q1, Q2, Q3, Q4</p>
	<ol style="list-style-type: none"> 2) Rapidly report test results between the laboratories, the public health department, healthcare facilities, and CDC to support public health investigations. 	<p>Quarterly Progress Reports</p>	<p>Q1, Q2, Q3, Q4</p>
	<ol style="list-style-type: none"> 3) Implement analysis, visualization, and reporting for surveillance and other available data. To support understanding of the outbreak, transmission, and impact of interventions. 	<p>Quarterly Progress Reports</p>	<p>Q1, Q2, Q3, Q4</p>
	<p>Output(s) for planned activities:</p> <ol style="list-style-type: none"> 1) Coordinate data systems for epidemiologic and laboratory surveillance. 2) Ensure efficient and timely data collection. 3) Ensure ability to rapidly exchange data with public health partners. 		

BUDGET NARRATIVE
(Form Revised June 2019)

Total Personnel Costs		including fringe	Total:	\$435,504
	Total Fringe Cost	\$137,411	Total Salary Cost:	\$298,093
	Total Budgeted FTE	4.84000		

Travel **Total:** **\$6,997**

Identify staff who will travel, the purpose, frequency and projected costs. Utilize GSA rates for per diem and lodging (go to www.gsa.gov) and State rates for mileage (57.5 cents as of January 1, 2020) as a guide unless the organization's policies specify lower rates for these expenses. For an employee using their personnel vehicle for the employee's convenience, the reimbursement rate is one-half the standard rate. The Division of Public and Behavioral Health, per the State Administrative Manual (SAM), requires employees to travel at least 50 miles from their designated workstation prior to being eligible for reimbursement of Per Diem expenses.

Out-of-State Travel

\$0

<u>Title of Trip & Destination such as CDC Conference: San Diego, CA</u>	<u>Cost</u>	<u># of Trips</u>	<u># of days</u>	<u># of Staff</u>	
Airfare: cost per trip (origin & designation) x # of trips x # of staff	\$0	0		0	\$0
Baggage fee: \$ amount per person x # of trips x # of staff	\$0	0		0	\$0
Per Diem: \$ per day per GSA rate for area x # of trips x # of staff	\$0	0	0	0	\$0
Lodging: \$ per day + \$ tax = total \$ x # of trips x # of nights x # of staff	\$0	0	0	0	\$0
Ground Transportation: \$ per r/trip x # of trips x # of staff	\$0	0	0	0	\$0
Mileage: (rate per mile x # of miles per r/trip) x # of trips x # of staff	\$0.000	0		0	\$0
Parking: \$ per day x # of trips x # of days x # of staff	\$0	0	0	0	\$0

Justification:

Who will be traveling, when and why, tie into program objective(s) or indicate required by funder.

In-State Travel

\$6,997

<u>Origin & Destination</u>	<u>Cost</u>	<u># of Trips</u>	<u># of days</u>	<u># of Staff</u>	
Airfare: cost per trip (origin & designation) x # of trips x # of staff	\$0	0		0	\$0
Baggage fee: \$ amount per person x # of trips x # of staff	\$0	0		0	\$0
Per Diem: \$ per day per GSA rate for area x # of trips x # of staff	\$0	0	0	0	\$0
Lodging: \$ per day + \$ tax = total \$ x # of trips x # of nights x # of staff	\$0	0	0	0	\$0
Motor Pool: (\$ car/day + ## miles/day x \$ rate per mile) x # trips x # days	\$0.00	0	0		\$0
Mileage: (\$0.575 x 67.6 miles per r/trip) x 180 trips x 1 staff	\$38.870	180		1	\$6,997
Parking: \$ per day x # of trips x # of days x # of staff	\$0	0	0	0	\$0

Justification:

CCHHS staff will be required to courier lab samples to the UNR Public Health lab three times per week for the 60-weeks of the grant period.

Supplies **Total:** **\$13,668**

List tangible and expendable personal property, such as office supplies, program supplies, etc. Unit cost for general items are not required. Listing of typical or anticipated program supplies should be included.

Office supplies \$ 20 x 4 staff x 14 months	\$1,120.00
Copies: \$ 15/mo. x 14 months x 4 FTE	
Staff	\$840.00
Digital thermometers for public patients to monitor temperatures during isolation and quarantine; support supply for patients throughout quad-county region (\$7.28/thermometer x 500)	\$3,640.00
Infrared Thermometers for screening of public health department staff and visitors (\$88/thermometer x 3)	\$264.00
Cleaning and sanitizing supplies for CCHHS facilities and staff use to include, but not be limited to sanitizing wipes, hand sanitizer, soap, surface disinfectant) (\$350/month x 14 months)	\$4,900.00
N95 Fit Testing Kits for use in Quad-Counties 4 @ \$726/kit	\$2,904.00

Justification: *Provide narrative to justify purchase of meals, snacks, large expense or unusual budget items. Include details how budget item supports deliverables of the project.*

Equipment	Total:	\$10,000
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List Equipment purchase or lease costing \$5,000 or more, and justify these expenditures. All other equipment costing less than \$5,000 should be listed under Supplies.

Equipment to support EMS, Public Health, and Hospitals responders to include, but not be limited to air scrubbers, PAPRs, and backpack sanitizing sprayers	\$10,000.00
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Contractual	\$189,110
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Identify project workers who are not regular employees of the organization. Include costs of labor, travel, per diem, or other costs. This category is appropriate when hiring an individual to give professional advice or services (e.g., training, expert consultant, etc.) for a fee, but not as an employee of the subgrantee organization. List all consultant/contract personnel in order of priority need. (Consultant travel and expenses should be included in this section). Time Needed x Rate = Request).

<u>Name of Contractor, Subrecipient:</u> To Be Determined	Total	\$49,000
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Method of Selection: Competitive Bid

Period of Performance: January 20, 2020 - March 15, 2021

Scope of Work: *Fiscal support to include, but not be limited to, account payable preparation, bid requests, purchase order approval processes, document scanning for requests for reimbursement*

* Sole Source Justification: *Define if sole source method, not needed for competitive bid*

<u>Budget</u>	
Personnel	\$49,000.00
Travel	\$0.00
Total Budget	\$49,000.00

Method of Accountability:

Define - Progress and performance will be assessed by the Department Manager and approved by the Public Health Preparedness Manager and CCHHS Director.

<u>Name of Contractor, Subrecipient:</u> Douglas County	Total	\$82,096
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Method of Selection: Sole Source

Period of Performance: January 20, 2020 - March 15, 2021

Scope of Work: Registered Nurse experienced in disease investigation and case management. Familiar with CCHHS systems. Requested RN Noami Aschenbach. Works for Douglas County Community Clinic.

* Sole Source Justification: A certain level of expertise and experience with CCHHS systems was needed for this position. In establishing the Department Operations Center and then progressing to the Quad-County Emergency Operations Center, staff sought for positions were those from within the region that already possessed the expertise.

Budget

Personnel	\$82,096.41
Travel	\$0.00
Total Budget	\$82,096.41

Method of Accountability:

Define - Progress and performance will be assessed by the Investigations Group supervisor and approved by the Public Health Preparedness Manager and CCHHS Director.

Name of Contractor, Subrecipient: Marathon **Total** **\$43,615**

Method of Selection: Competitive Bid

Period of Performance: January 20, 2020 - March 15, 2021

Scope of Work:

Assist with COVID patient investigations and monitoring. Assist with patient tracking protocols and training of other staff to support the investigations group.

* Sole Source Justification: Define if sole source method, not needed for competitive bid

Budget

Personnel	\$43,615.00
Travel	\$0.00
Total Budget	\$43,615.00

Method of Accountability:

Define - Progress and performance will be monitored by the investigations group supervisor and approved by the Public Health Preparedness Manager.

Name of Contractor, Subrecipient: East Fork Fire Protection District **Total** **\$10,278**

Method of Selection: Sole Source

Period of Performance: January 20, 2020 - March 15, 2021

Scope of Work:

Assist with COVID response in the CCHHS Department Operations Center prior to the establishment of the Quad-County Emergency Operations Center. Positions filled included Operations Section Chief and Planning Section Chief.

* Sole Source Justification: A certain level of expertise and experience was needed in the CCHHS Department Operations Center for which CCHHS did not have the depth. The training and expertise was solicited from agencies across the Quad-County region with the support being provided by East Fork Fire Protection District based on staff availability. Agencies that traditionally have the training and expertise for these positions reside in the fire service.

Budget

Personnel	\$10,278.00
Travel	\$0.00
Total Budget	\$10,278.00

Method of Accountability:

Define - Progress and performance will be monitored by the Quad-County Multi-Agency Coordinating (MAC) group and approved by the Public Health Preparedness Manager.

Name of Contractor, Subrecipient: Lyon County Social Services **Total** **\$4,121**

Method of Selection: Sole Source

Period of Performance: January 20, 2020 - March 15, 2021

Scope of Work:

Assist with COVID response in the CCHHS Department Operations Center prior to the establishment of the Quad-County Emergency Operations Center. Positions filled included county liaison officer for Lyon County.

* Sole Source Justification: A certain level of expertise and experience was needed in the CCHHS Department Operations Center for which CCHHS did not have the depth to serve Lyon County. The training and expertise was solicited from agencies across the Quad-County region with the support being provided by Lyon County Social Services based on staff availability.

Budget

Personnel	\$4,121.00
Travel	\$0.00
Total Budget	\$4,121.00

Method of Accountability:

Define - Progress and performance will be monitored by the Quad-County Multi-Agency Coordinating (MAC) group and approved by the Public Health Preparedness Manager.

Other **Total:** **\$49,349**

Provide a description and the purpose/need for each item. Show the calculation for the cost of each item and provide supporting information/justification.

Personal Protective Equipment (PPE) for CCHHS staff and healthcare partners to include, but not be limited to N95 masks, faceshields, gowns, gloves, and eye protection) \$49,349
\$0

Justification: *Include narrative to justify any special budget line items included in this category, such as stipends, scholarships, marketing brochures or public information. Tie budget piece to project deliverable.*

TOTAL DIRECT CHARGES **\$704,628**

Indirect Charges **Indirect Rate:** **0.000%** **\$0**

Indirect Methodology: Explain how indirect is calculated (e.g. 10% of all direct expenses per Federally approved indirect agreement). If using a Federally approved indirect rate, be sure to include a copy of the agreement.

TOTAL BUDGET **Total:** **\$704,628**