



PUBLIC HEALTH BOARD MEETING (VIRTUAL)
Electronic Meeting
May 24, 2022 at 12:30 PM

AGENDA

Virtual Board of Health Meeting
Tuesday, May 24 · 12:30 – 1:30pm
Google Meet joining info
Video call link: <https://meet.google.com/ekk-eufo-yog>
Or dial: (US) +1 216-930-8754 PIN: 639 123 846#
More phone numbers: <https://tel.meet/ekk-eufo-yog?pin=6622769157494>

CALL TO ORDER

APPROVAL OF CURRENT AGENDA & MINUTES FROM PREVIOUS MEETING

1. Approval of Current Agenda
2. Approval of April 2022 San Juan County Utah Board of Health Minutes

PUBLIC COMMENT

INFORMATIONAL/RECOGNITION ITEMS

3. Board Member Retirement Planning

BUSINESS ACTION ITEMS

4. Nomination & Appointment of Board of Health Chair, Facilitated by Lois Young, Vice Chair
 - Review of Responsibilities by Grant Sunada, Public Health Director
 - Discussion, Nominations, and Vote by Board Members
5. Memorandum of Agreement -- USU Blanding & San Juan Public Health, Internships, by Grant Sunada, Public Health Director and Sam Arungwa, Utah State University Blanding Faculty Member

ADJOURNMENT

6. Confirm Date, Time, and Location of Next Meeting

****In compliance with the Americans with Disabilities Act, persons needing auxiliary communicative aids and services for this meeting should contact the San Juan County Clerk's Office: 117 South Main, Monticello or telephone 435-587-3223, giving reasonable notice****



PUBLIC HEALTH BOARD MEETING
735 S 200 W, Blanding, Utah 84511. Conference Room
April 21, 2022 at 12:00 PM

MINUTES

The public will be able to view the meeting via Google Meet at this video call link:
<https://meet.google.com/anq-rekd-zrh>

Or by dialing: (US) +1 631-709-2282 PIN: 740 487 355#

CALL TO ORDER, WELCOME, & ROLL CALL

- Confirm meeting is being recorded

Vice-Chair Lois Young called the meeting to order at 12:07 pm.

PRESENT

Vice-Chair Lois Young
 County Commissioner Willie Grayeyes
 Board Member Genevieve Mitchell
 Board Member Gary Suttlemyre
 Board Member Suzette Morris
 Board Member Revina Talker
 Board Member Trent Herring

APPROVAL OF MINUTES

Approval of 2/17/2022 Meeting Minutes:

Motion made by County Commissioner Grayeyes, Seconded by Board Member Suttlemyre.
 Voting Yea: Vice-Chair Young, County Commissioner Grayeyes, Board Member Mitchell, Board Member Suttlemyre, Board Member Morris, Board Member Talker
 Voting Abstaining: Board Member Herring

Approval of 2/22/2022 Meeting Minutes:

Motion made by County Commissioner Grayeyes, Seconded by Board Member Suttlemyre.
 Voting Yea: Vice-Chair Young, County Commissioner Grayeyes, Board Member Mitchell, Board Member Suttlemyre, Board Member Morris, Board Member Talker

Voting Abstaining: Board Member Herring

1. Previous Meeting Minutes

PUBLIC COMMENT

CONSENT AGENDA

After some explanation and orientation for new board members a motion was made to approve the consent agenda.

Motion made by County Commissioner Grayeyes, Seconded by Board Member Suttlemyre.
Voting Yea: Vice-Chair Young, County Commissioner Grayeyes, Board Member Mitchell, Board Member Suttlemyre, Board Member Morris, Board Member Talker, Board Member Herring

2. County Approved Contract - Building Resilient Inclusive Communities (BRIC) Amendment 1
3. County Approved Contract - FY22 Violence and Injury Prevention Program Amendment 1
4. County Approved Contract - HIV Prevention Amendment 5
5. County Approved Contract - STD Amendment 3
6. County Approved Contract - TB Prevention and Control Amendment 3

BUSINESS ACTION ITEMS

7. Nomination and Election of Board Officers
 - Review duties of Chairperson, Vice Chairperson, and Secretary
 - Review length of tenure

The Board of Health discussed electing new Board Officers. A motion was made to table the discussion until the next meeting to allow potential nominees time to learn all of the responsibilities.

Motion made by County Commissioner Grayeyes, Seconded by Board Member Herring.
Voting Yea: Vice-Chair Young, County Commissioner Grayeyes, Board Member Mitchell, Board Member Suttlemyre, Board Member Morris, Board Member Talker, Board Member Herring

8. Health Equity Symposium Debrief - Utah Association of Local Health Departments - March 31 & April 1, 2022
 - Award for Utah Navajo Health System: Outstanding Contribution & Support by a Friend of Public Health

- What did we learn that can help promote health for all of San Juan County?

The Board members that attended the symposium discussed lessons learned and how we can use that knowledge to help San Juan County.

9. Consideration of Budget Allocation of Minimum Performance Standards SFY22 Amendment 1

Health Officer, Grant Sunada, presented SJPHs overall financial situation and explained the increase the Minimum Performance Standards funding from the State of Utah. Discussion was had about using the new funding for reducing admin/overhead costs, increasing work hours for Epidemiologist, and funding a community health assessment. The Board agreed that these would be a good use of the new funding and made a motion to continue working out the details.

Motion made by Herring, Seconded by Board Member Morris.

Voting Yea: Vice-Chair Young, County Commissioner Grayeyes, Board Member Mitchell, Board Member Suttlemyre, Board Member Morris, Board Member Herring

10. Location and Time of Next Board Meeting

It was proposed that the Board of Health Meeting should be held in different parts of San Juan County on a rotation. This would allow easier access to more of the public.

A special Virtual Health Board Meeting for the election of Board Officers will be 5/24/2022 at 12:30pm.

The next regular Health Board meeting will be 6/16/2022 at 12:00pm in either White Mesa or Montezuma Creek.

Motion made by Herring, Seconded by Board Member Morris.

Voting Yea: Vice-Chair Young, Board Member Mitchell, Board Member Suttlemyre, Board Member Morris, Board Member Herring

BUDGET UPDATE

11. Annual Audit by Tyler Ketron, Business Manager

Business Manager, Tyler Ketron gave an update on the yearly audit that is ongoing at San Juan County. The outcome of the audit will be discussed in the next meeting.

DIRECTOR'S REPORT

12. Director's Report - April 2022

Health Officer, Grant Sunada provided updates on Covid boosters and lowering Covid numbers in San Juan County. Other topics presented included department highlights and job openings that the Health Department is working to fill.

INFORMATIONAL/RECOGNITION ITEMS

13. Upcoming Events

- May 6, 2022: UNHS Women's Health Fair, Montezuma Creek
- May 12, 2022: White Mesa’s Victim Advocate of Hands Down, Standing Strong Program will be hosting “Protecting Our Families” Awareness Fair
- May 13, 2022: UNHS Women's Health Fair, Blanding
- May 20, 2022: UNHS Women's Health Fair, Monument Valley

ADJOURNMENT

A motion to adjourn was made at 2:06 pm.

Motion made by Board Member Suttlemyre, Seconded by Board Member Herring.
Voting Yea: Vice-Chair Young, Board Member Mitchell, Board Member Suttlemyre, Board Member Morris, Board Member Herring

****In compliance with the Americans with Disabilities Act, persons needing auxiliary communicative aids and services for this meeting should contact the San Juan County Clerk’s Office: 117 South Main, Monticello or telephone 435-587-3223, giving reasonable notice****

APPROVED: _____
San Juan County Public Health Board

DATE: _____

BYLAWS

OF THE SAN JUAN COUNTY BOARD OF HEALTH

ARTICLE I

Authority, Name and Structure

- Section 1.1 The San Juan County Health Department is organized as a county health department pursuant to Utah Code Ann., Section 26A-1-103.
- Section 1.2 The Board is established and governed by County Ordinance 2018-01, and under authority of Utah Code Ann., Title 26A, Sections 26A-1-101 through 26A-1-127.
- Section 1.3 The Board shall act as the Local Health Authority as defined in the Utah Local Health Department Act
- Section 1.4 The name of the Board shall be the San Juan County Board of Health, hereinafter called Board.
- Section 1.5 The Board shall adopt and implement through policies and procedures, where applicable, Utah Code Ann., Sections 26A-1-127 through 26A-1-127, as well as the articles specified in these Bylaws. The Board shall adopt and implement written procedures to determine the general public health policies as required by Utah Code Ann., Section 26A-1-109(8).
- Section 1.6 The Board shall consist of seven members.
- Section 1.7 After initial appointments, Board members shall serve for four (4) year terms. Members appointed to fill vacancies shall hold office until the expiration of the terms of their predecessors.

ARTICLE II

Purpose and Function

- Section 2.1 The role of the Board is to adopt and implement policy in regards to public health.
- Section 2.2 The purposes of the Board shall be to evaluate, advise, and recommend policies and procedures of operation for the San Juan County Health Department to promote the general health of all citizens of the county.

Section 2.3 Specific functions of the Board include, all activities identified in Utah Administrative Code (26A-1-109), (26A-1-110), (26A-1-111), and Utah Administrative Rules R380-40 which include:

- A. Establish policies and regulations as necessary.
- B. Adopt an annual budget.
- C. Monitor revenue and expenditures.
- D. Oversee compliance of the local health department with the Minimum Performance Standards (R380-40).
- E. Assure a process of ongoing planning,
- F. At least annually evaluate the performance of the Local Health Officer.
- G. Report at least annually to the county governing body and municipalities the health status and operation of the Local Health Department.
- H. Assure an annual independent financial audit is conducted and review and accept the health department's audit findings.

ARTICLE III

Composition of Board

Section 3.1 The Board shall be composed of influential citizens with experience, abilities and points of view that will contribute to the effective management of San Juan County Health Department. All members of the Board shall reside within San Juan County.

The following representation shall consist of:

- A. One (1) person representing San Juan County Commission, approved by the Commission.
- B. One (1) person representing Blanding City, appointed by Blanding City
- C. One (1) person representing Monticello City, appointed by Monticello City
- D. One (1) person representing Bluff City, appointed by Bluff City.
- E. Three (3) members selected and approved by the Board and ratified by the San Juan County Commission, with a goal of representing the interests of the communities of Aneth, Montezuma Creek, Oljato, Monument Valley, White Mesa, and/or other unincorporated areas of the county.
(One person may be able to represent more than one of the above listed groups, if appropriate.)

Section 3.2 No member of the Board shall be on the payroll of the Health Department. The Health Director shall be a non-voting member of the Board.

Section 3.3 Membership on the Board may be terminated by resignation. Termination of a Board member's position will be considered by the Board after three (3) consecutive absences.

Recommendations for termination of elected body appointees will be made by the Board to the appropriate body.

Section 3.4 Vacancies of Board of Health positions shall be filled by nomination and approval by the Board, and ratification by the County Commission.

Vacancies of elected officials shall be filled by recommendation and approval of the respective governing councils.

Section 3.5 Expired terms of Board appointees shall be filled by the nomination and appointment by the Board and ratified by the Commission.

If an elected official is appointed a member of the Board, the expiration of said official's elective term of office shall serve to terminate that person's term on the Board.

Article IV

Conducting Business

Section 4.1 Officers of the Board shall consist of the chairperson, vice chairperson, secretary and such other officers as may be determined by the Board members.

Election of officers will be held in first meeting of the calendar year by Board members. Officers elected in the first annual meeting shall take office immediately.

Section 4.2 Regular meetings of the Board shall be held not less than once every three (3) months, at a time and place designated by the Board.

A. Special meetings may be called by the chairperson, the Director, or by majority of the members by giving three (3) days written or oral notice, or in case of emergency, as soon as possible after the members of the Board have been notified.

B. All meetings will be conducted by the chairperson or vice chairperson. In the absence of both officers, meetings may be conducted by the Secretary of the Board or an acting-chairperson, designated by the chairperson.

Section 4.3 A quorum shall be constituted by a majority of the voting members of the Board. A quorum shall consist of four (4) voting Board members. No proxies are permitted.

Section 4.4 Electronic Meetings

Meetings of the Board of Health may be held electronically in accordance with the following requirements:

A. Electronic Board meetings may be conducted by telephone, telecommunication, computer conference, or video conference. So long as a quorum of the Board is

physically present for a meeting, other members of the Board may participate in the meeting electronically without a formal approval process. If fewer than a quorum of the Board is physically present at a Board meeting, any member of the Board may request the electronic Board meeting and the meeting must be approved by a quorum of the Board. Approval may occur at the Board meeting in question.

- B. Members of the public are not entitled to request electronic meetings of the Board or to monitor or participate in Board meetings from remote locations.
- C. Electronic Board meetings shall originate from the location in which Board members would meet if the meeting were not being held electronically (the anchor location).
- D. In any electronic Board meeting, at least two members of the Board must be physically present at the anchor location.
- E. For any electronic Board meeting, the Board must provide space, facilities and equipment at the anchor location so that interested persons and the public may attend and monitor the open portions of the meeting including the comments made by members participating in the meeting from remote locations.
- F. Notice of each electronic Board meeting will be provided to the public at least 24 hours prior to the electronic meeting and in accordance with the requirements of Utah Code Ann.' 52-4-207. The notice will include a description of electronic means to be used to connect remote Members to the Board meeting.

Section 4.5 Voting: All questions at a meeting of the Board shall be decided by majority vote of the quorum of the members present or in attendance electronically who are entitled to vote. Each voting member shall be entitled to one vote.

Section 4.6 The Director of the Department of Health may serve as secretary to the Board and may assign certain functions to department staff members. Records will be kept in the office of the Director of Health. The secretary shall attend or be responsive to all meetings of the Board, and preserve in the books of the Board true minutes of the proceedings. The minutes of the meetings shall be sent to the members of the Board along with notice of the next regular meeting at least one (1) week before said meeting

ARTICLE V

Standing Committee

Section 5.1 Ad hoc committees may be called at the discretion of the Board by recommendation of the Department of Health with Board approval.

ARTICLE VI

Scope of Authority

Section 6.1 All decisions derived from the function of the Board which is not in conflict with State and County law shall be public policy and law and in full force in effect.

ARTICLE VII

Amendments

Section 7.1 These bylaws may be amended by a majority vote of the Board of Health and ratified by the County Commissioners.

RESOLVED BY THE SAN JUAN COUNTY BOARD OF HEALTH, STATE OF UTAH, this

7th day of March, 2019.

 _____

Kd Perkins, Chairperson
San Juan County Board of Health

 _____

San Juan County Commission

Attest:  _____

Kirk Bengé, Health Officer
San Juan County Public Health Dept.



Michael Nielson, D.O.
Medical Director

Brittney Carlson, RN
Nursing Director

Item 4.

Grant Sunada, PhD, MPH
Executive Director & Health Officer

Ronnie Nieves
Environmental Director

Rebecca Benally, MEd
Health Promotion Director

Local Board of Health Members

<u>NAME</u>	<u>APPT TYPE</u>	<u>EMAIL</u>	<u>PHONE</u>	<u>DATE OF APPT</u>	<u>TERM END</u>	<u>Position</u>
Revina Talker	at large	rtalker@unhsinc.org	970-529-0076	Feb, 2022	Feb, 2026	
Gary Suttlemyre	Monicello City rep	gary.suttlemyre@gmail.com	435-459-9442	June, 2018	June, 2022	
Trent Herring	Blanding City rep	therring@bmhutih.org	435-678-4655	Feb, 2022	Feb, 2026	
Lois Young	Bluff Township rep	visionpool@gmail.com	206-437-1121	Jan, 2019	Jan, 2023	Vice Chair
Suzette Morris	at large	mossiah99@yahoo.com	435-459-0389	Aug, 2021	Aug, 2025	
Willie Grayeyes	County Commission rep	williegrayeyes@sanjuancounty.org	435-587-3225	Jan, 2019	Jan, 2023	
Genevieve Mitchell	at large	genmitchell913@gmail.com	505-488-3121	Nov, 2021	Nov, 2025	
Michael Nielson	Medical Director	mnielson@sanjuanhealth.org	435-587-5054			NOT a board member



UTAH DEPARTMENT OF HEALTH CONTRACT

PO Box 144003, Salt Lake City, Utah 84114
288 North 1460 West, Salt Lake City, Utah 84116

2229214
Department Log Number

222700714
State Contract Number

1. **CONTRACT NAME:** The name of this contract is Public Health Crisis Response Workforce Supplemental SFY 2022 – San Juan County
2. **CONTRACTING PARTIES:** This contract is between the Utah Department of Health (DEPARTMENT) and the following CONTRACTOR:

PAYMENT ADDRESS

San Juan County
735 S 200 W, Ste 2
Blanding UT, 84511

MAILING ADDRESS

San Juan County
735 S 200 W, Ste 2
Blanding UT, 84511

Vendor ID: 06866HL
Commodity Code: 99999

Pursuant to Utah Code Ann. 26B-1-201, as of July 1, 2022, the parties agree that the contracting parties, with all its contractual obligations, duties, and rights, will be the Department of Health and Human Services (“Department”) and Contractor.

3. **GENERAL PURPOSE OF CONTRACT:** The general purpose of this contract is to recruit, hire, and train personnel to address projected jurisdictional COVID-19 response needs, including hiring personnel to build capacity to address STLT public health priorities deriving from COVID-19, which supports Department efforts to enhance Utah’s public health workforce through the CDC Crisis COVID-19 Public Health Workforce Supplemental located at <https://www.cdc.gov/cpr/readiness/funding-ph.htm>.
4. **CONTRACT PERIOD:** The service period of this contract is 09/01/2021 through 06/30/2023, unless terminated or extended by agreement in accordance with the terms and conditions of this contract.
5. **CONTRACT AMOUNT:** The DEPARTMENT agrees to pay \$159,977.00 in accordance with the provisions of this contract. This contract is funded with 100% federal funds, 0% state funds, and 0% other funds.
6. **CONTRACT INQUIRIES:** Inquiries regarding this Contract shall be directed to the following individuals:

CONTRACTOR

DEPARTMENT

Grant Sunada
(435) 587-3838
gsunada@sanjuancounty.org

Family Health and Preparedness
Preparedness Grants
Kevin McCulley
(801) 273-6669
kmcculley@utah.gov

7. SUB – RECIPIENT INFORMATION:

DUNS: 079815014

Indirect Cost Rate: 0%

Federal Program Name:	Centers for Disease Control and Prevention	Award Number:	6 NU90TP922163-01-01
Name of Federal Awarding Agency:	Department of Health and Human Services	Federal Award Identification Number:	NU90TP922163
CFDA Title:	Public Health Emergency Response: Cooperative Agreement for Emergency Response: Public Health Crisis Response	Federal Award Date:	5/19/2021
CFDA Number:	93.354	Funding Amount:	\$159977

8. REFERENCE TO ATTACHMENTS INCLUDED AS PART OF THIS CONTRACT:

Attachment A: Special Provisions

9. DOCUMENTS INCORPORATED INTO THIS CONTRACT BY REFERENCE BUT NOT ATTACHED:

- A. All other governmental laws, regulations, or actions applicable to services provided herein.
- B. All Assurances and all responses to bids as provided by the CONTRACTOR.
- C. Utah Department of Health General Provisions and Business Associates Agreement currently in effect until 6/30/2023.

10. This contract, its attachments, and all documents incorporated by reference constitute the entire agreement between the parties and supersedes all prior written or oral agreements between the parties relating to the subject matter of this contract.

Intentionally Left Blank


Contract with Utah Department of Health and San Juan County, Log # 2229214

IN WITNESS WHEREOF, the parties enter into this agreement.

CONTRACTOR

STATE

By:  1/16/2021
Willie Grayeyes Date
County Commission Chair

By:  1/13/2022
Shari A. Watkins, C.P.A. Date
Director, Office Fiscal Operations

ATTACHMENT A - SPECIAL PROVISIONS
 CDC Crisis Response Cooperative Agreement:
 COVID-19 Public Health Workforce Supplemental Funding

- I. Definitions
- A. "CDC" means the Centers for Disease Control and Prevention.
 - B. "CWF" means Crisis Workforce Supplemental Funding Cooperative Agreement.
 - C. "DEI" means diversity, equity, and inclusion.
 - D. "Department" means the Utah Department of Health, Bureau of Emergency Medical Services and Preparedness.
 - E. "FTE" Full Time equivalent.
 - F. "General Provisions" means the agreement between the parties titled "General Provisions and Business Associate Agreement" effective July 1, 2019 through June 30, 2024.
 - G. "STLT" means State, Tribal, Local, and Territorial (STLT) governments.
 - H. "Subrecipient" means Local Healthcare Department.
- II. Purpose
- A. The purpose of this agreement is to recruit, hire, and train personnel to address projected jurisdictional COVID-19 response needs, including hiring personnel to build capacity to address STLT public health priorities deriving from COVID-19, which supports Department efforts to enhance Utah's public health workforce through the CDC Crisis COVID-19 Public Health Workforce Supplemental located at <https://www.cdc.gov/cpr/readiness/funding-ph.htm>.
- III. Department Contact Information
- A. Department encourages inquiries concerning this grant and special provisions, which should be directed to the following Department contacts:

For programmatic technical assistance, contact:
 Jenny Starley, Program Manager
 Bureau of Emergency Medical Services and Preparedness
 (385) 258-0543
jstarley@utah.gov

For financial or budget assistance, contact:
 Jerry Edwards, Financial Manager
 Office of Fiscal Operations, Utah Department of Health
 (801) 538-6647
- IV. Payments
- A. Subrecipient shall submit a final Monthly Expenditure Report, as required by the General Provisions, and for the final funding transfer (no later than July 5, 2023).
 - B. Department agrees to reimburse Subrecipient up to the maximum amount of the contract for expenditures made by the Subrecipient directly related to the program, as defined in the General Provisions.
- V. COVID-19 Funding
- A. This funding is approved for COVID-19 Public Health Workforce activities, as described in the supplemental funding guidance, located at <https://www.cdc.gov/cpr/readiness/funding-ph.htm>.
- VI. Budget and Reporting

- A. Subrecipient may begin spending funds on reimbursable personnel costs as described in Subrecipient's submitted budget upon full execution of this contract. (See Section IX.A.1-4 for examples of such costs.) Non-personnel cost categories (See Section IX.A.5-6 for examples of such costs) require budget review and approval by Department (via email) prior to Subrecipient expenditure.
- B. Subrecipient shall submit to Department bi-annual progress and fiscal reports by:
 - 1. January 7, 2022 (for activity period July 1, 2021 - December 31, 2021);
 - 2. July 7, 2022 (for activity period January 1, 2022 - June 30, 2022);
 - 3. January 7, 2023 (activity period July 1, 2022 - December 31, 2022); and
 - 4. July 7, 2023 (activity period January 1, 2023 - June 30, 2023).
- C. Progress Reporting Requirements:
 - 1. Subrecipient shall provide progress reports to Department regarding hiring goals and DEI metrics by using the Hiring Diversity Goals template located within the Crisis Workforce Development template, tab 9.
- D. Fiscal Reporting Requirements:
 - 1. Subrecipient shall provide fiscal reports to Department on the status update of fiscal commitments made by using the Spend Plan template located within the Crisis Workforce Development template, tab 11 .
- E. Closeout Reporting Requirements, due September 14, 2023:
 - 1. Subrecipient shall submit a closeout report, using a template provided by Department, and will include:
 - a) Final performance progress and evaluation;
 - b) Fiscal report;
 - c) Equipment and supplies tangible personal property report; and
 - d) Final report on DEI metrics.
- F. Subrecipient shall submit additional information to Department upon request to support state and federal reporting requirements.
- G. Subrecipient shall update the Department with any changes to programmatic, and financial points of contact as they occur.

VII. Department Responsibilities

- A. Department agrees to distribute additional closeout report templates via email no later than thirty (30) days prior to the due date.
- B. Department agrees to provide technical assistance upon request by Subrecipient.

VIII. Coronavirus Disease 2019 (COVID-19) Funds

- A. Department, as a recipient of a grant or cooperative agreement awarded by the Department of Health and Human Services (HHS) with funds made available under the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (P.L. 116-123); the Coronavirus Aid, Relief, and Economic Security Act, 2020 (the "CARES Act") (P.L. 116-136); the Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139); the Consolidated Appropriations Act and the Coronavirus Response and Relief Supplement Appropriations Act, 2021 (P.L. 116-260) and/or the American Rescue Plan of 2021 [P.L. 117-2] agrees, as applicable to the award, to:
 - 1. Comply with existing and/or future directives and guidance from the Secretary regarding control of the spread of COVID-19;
 - 2. In consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care regardless of the individual's home jurisdiction and/or appropriate public health measures (e.g., social distancing, home isolation); and
 - 3. Assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation.

- B. Department and Subrecipient will comply with Section 18115 of the CARES Act, with respect to the reporting to the HHS Secretary of results of tests intended to detect SARS–CoV–2 or to diagnose a possible case of COVID–19. Such reporting shall be in accordance with guidance and direction from HHS and/or CDC. HHS laboratory reporting guidance is posted at: www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf.
- C. Further, consistent with the full scope of applicable grant regulations (45 C.F.R. 75.322), the purpose of this award, and the underlying funding, the Department and Subrecipient is expected to provide to CDC copies of and/or access to COVID-19 data collected with these funds, including but not limited to data related to COVID-19 testing. CDC will specify in further guidance and directives what is encompassed by this requirement.
- D. This award is contingent upon agreement by the recipient to comply with existing and future guidance from the HHS Secretary regarding control of the spread of COVID-19. In addition, Department is expected to flow down these terms to any subaward, to the extent applicable to activities set out in such subaward.

IX. Allowable Costs

- A. This list is not exhaustive; CDC encourages individual jurisdictional and local needs to be met, as applicable.
 - 1. Overtime costs are a very likely and reasonable expense during the response to COVID-19, subrecipient may include projected overtime in their budgets.
 - a) Subrecipient should be careful to estimate costs based on current real-time needs and will still be required to follow federal rules and regulations in accounting for the employees' time and effort.
 - 2. Funding can be used to hire personnel for roles that may range from senior leadership positions to early career or entry-level positions and may include, but is not limited to:
 - a) Permanent full-time and part-time staff (which may include converting part-time positions to full-time positions during the performance period)
 - b) Temporary or term-limited staff
 - c) Fellows
 - d) Interns
 - e) Contractors or contracted employee
 - 3. The costs, including wages and benefits, related to recruiting, hiring, and training of individuals to serve as:
 - a) Professional or clinical staff, including public health physicians and nurses (other than school-based staff); mental or behavioral health specialists to support workforce and community resilience; social service specialists; vaccinators; or laboratory scientists or technicians;
 - b) Disease investigation staff, including epidemiologists; case investigators; contact tracers; or disease intervention specialists;
 - c) School nurses and school-based health services personnel, including hiring school-based nurses, converting current nurses from part-time to full-time work, increasing hours, increasing nursing salaries or otherwise supporting retention efforts;
 - d) Program staff, including program managers; communications and policy staff; logisticians; planning and exercise specialists; program evaluators; pandemic preparedness and response coordinators to support the current pandemic response and identify lessons learned to help prepare for possible future disease outbreaks; health equity officers or teams; data managers, including informaticians, data scientists, or data entry

- personnel; translation services; trainers or health educators; or other community health workers;
- e) Administrative staff, including human resources personnel; fiscal or grant managers; clerical staff; staff to track and report on hiring under this cooperative agreement; or others needed to ensure rapid hiring and procurement of goods and services and other administrative services associated with successfully managing multiple federal funding streams for the COVID-19 response; and
 - f) Any other positions as required to prevent, prepare for, and respond to COVID-19.
4. These individuals may be employed by:
 - a) STLT public health governments or their fiscal agents;
 - b) Schools, school boards, school districts, or appropriate entities for providing school-based health care;
 - c) Nonprofit private or public organizations or community-based organizations with demonstrated expertise in implementing public health programs and established relationships with STLT public health departments, particularly in medically underserved areas; or
 - d) Employment agencies, contracted vendors, or other temporary staffing agencies.
 5. Purchase of equipment and supplies necessary to support the expanded workforce including personal protective equipment, equipment needed to perform the duties of the position, computers, cell phones, internet costs, cybersecurity software, and other costs associated with support of the expanded workforce (to the extent these are not included in recipient indirect costs).
 6. Administrative support services necessary to implement activities funded under this section, including travel and training (to the extent these are not included in recipient indirect costs).

X. Allowable Activities

- A. This list is not exhaustive; CDC encourages individual jurisdictional and local needs to be met, as applicable, and to use a variety of mechanisms to expand the public health workforce, including, but not limited to:
 1. Using CDC's Social Vulnerability Index (located at <https://www.atsdr.cdc.gov/placeandhealth/svi/index.html>) data and tools to inform jurisdiction COVID-19 planning, response, and hiring strategies.
 2. Contracting services: Using the General Services Administration (GSA) COVID-19 Related Support Services (CRSS) contract mechanism available at Acquisition Gateway to obtain contract staff or services.
 3. Cross-training: Cross-train staff hired to work on COVID-19 response for other communicable disease response and future pandemic response activities.
 4. Forming partnerships: Form partnerships with academic institutions, creating student internship or fellowship opportunities, and building graduation-to-workforce pipelines.
 5. Planning: Continuity of operations (plans, protocols, and systems-based) related to emergency preparedness is within scope. If that is something that recipients think is important to do for COVID-19 and beyond.
 6. Strategic Planning: LHD strategic planning, if there is an identified gap in your plans, with how the local health department is organized, or need assistance identifying those gaps, that is certainly something CDC would support. This could mean hiring a consultant or purchasing a decision-support tool to help you review your strategic vision for the future.

7. Strike Force Teams: developing, training, and equipping response-ready “strike force” teams capable of deploying rapidly to meet emergent needs, including through the Emergency Management Assistance Compact.
8. Training: Focus on COVID-19 and preparedness activities, cross-training of COVID-19 staff for other communicable disease response activities, clinical staff activities.

XI. Unallowable Costs

- A. Research.
- B. Clinical care
- C. Publicity and propaganda (lobbying):
 1. Other than for normal and recognized executive-legislative relationships, no funds may be used for:
 - a) Publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body
 - b) The salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body
 2. See Additional Requirement 12 for detailed guidance on this prohibition an additional guidance on lobbying: https://www.cdc.gov/grants/documents/Anti-Lobbying_Restrictions_for_CDC_Grantees_July_2012.pdf

XII. Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS)

- A. Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services
 Shirley K Byrd, Grants Management Officer
 Centers for Disease Control and Prevention
 Branch IV, Team II
 2935 Flowers Road
 Atlanta, GA
 Email: skbyrd@cdc.gov (Include “Mandatory Grant Disclosures” in subject line)

AND

U.S. Department of Health and Human Services
 Office of the Inspector General
 ATTN: Mandatory Grant Disclosures, Intake Coordinator
 330 Independence Avenue, SW
 Cohen Building, Room 5527
 Washington, DC 20201
 Fax: (202)-205-0604 (Include “Mandatory Grant Disclosures” in subject line) or

Email: MandatoryGranteeDisclosures@oig.hhs.gov



UtahStateUniversity
Blanding



Memorandum of Understanding Between Utah State University Prevention Science (UPSc) Institute & San Juan Public Health

A partnership and collaboration between San Juan Public Health (SJPH) and Utah State University (USU) Prevention Science (UPSc) Institute based in Blanding, San Juan County. We have identified important projects that are mutually beneficial to both organizations. These projects are related to the reduction and prevention of crime, disease, and poverty rates.

UPSc plans to provide teaching/research strategic consultation and technical training that are related to prevention science programming. UPSc at USU will also provide labor resource support which includes faculty and students. The Faculty members are subject matter experts who are willing and able to contribute their expertise. The student workers will include the following: internships, practicums, capstone projects, work study, university teaching and research assistantships (UTARAs), community-engaged learning (CEL) participants.

In the area of crime reduction/prevention science, USU UPSc will develop higher education pipelines and pathways for inmates to re-enter the community in safe and productive ways. Crime prevention science programs will also target young people in order to reduce risk of criminal offenses. In areas of Disease prevention science, projects will include promoting evidence-based resources (e.g., immunizations and vaccinations) through healthcare providers, community partnerships, and public communication (e.g., strengthening USU's Extension Collaborative on Immunization Teaching & Engagement (EXCITE) partnership with the Centers for Disease Control and Prevention (CDC). In the areas of poverty prevention science, USU UPSc will create collaborations with the Department of Workforce Services (e.g., Supplemental Nutrition Assistance Program) and SJPH programs/resources (e.g. Women, Infants, and Children Program) and other related programs to create employment pathways that improve residents' workforce experience, access to higher education, and economic well-being.

SJPH will create opportunities for rural students to contribute to health promotion and disease prevention projects. These projects will allow them to build experience that prepares them for careers that prevent crime, disease, and poverty rates and build up their own economic stability. SJPH staff will provide professional mentoring and applied learning related to promoting health in ways that also build understanding of, and address, the social determinants of health (e.g., crime, income, education, housing, employment).

The source of funding for SJPH is the contract titled "Public Health Crisis Response Workforce Supplemental SFY 2022 – San Juan County" (State Contract Number: 222700714). Allowable Costs include individual jurisdictional and local needs to be met, as applicable, (such as, internships) and related wages and benefits (such as, recruiting, hiring, and training).

USU funding sources will include federal work study funding available to universities. Intern compensation will range from \$10 to \$20 per hour, for 10-20 hours per week (up to 29 hours per week in some cases when permitted). The duration for an internship or student work study will be 1-2 semesters at 14 weeks per semester. As a high estimate, three semesters (750 hours) will total \$20,000 total per year compensation per student. SJPH will pay the required 25% match of the costs or approximately \$5,000 using this example.

Signatures:

San Juan County Board of Health, Chair

San Juan County Commission, Chair

Signature: _____

Signature: _____

Name: _____

Name: _____

Date: _____

Date: _____

Utah State University, Blanding

Utah State University, Blanding

Signature: _____

Signature: _____

Name: _____

Name: _____

Date: _____

Date: _____