



BOARD OF SUPERVISORS AGENDA ITEM REPORT
CONTRACTS / AWARDS / GRANTS

Award Contract Grant

Requested Board Meeting Date: August 7, 2018

* = *Mandatory, information must be provided*

or Procurement Director Award

***Contractor/Vendor Name/Grantor (DBA):**

University of Arizona, Sponsored Projects Services

***Project Title/Description:**

Zika Virus Reporting and Identification Call Center

The original contract may be found by searching 17%004 in eContracts.

***Purpose:**

To provide 24 hours a day / 7-days a week contact for citizens in Pima County and healthcare providers reporting travel related exposures to the Zika virus and requiring evaluation for testing.

Amendment #2 extends the term for an additional year and adds funding at the same amount.

***Procurement Method:**

Procurement Exempt, Intergovernmental Agreement

***Program Goals/Predicted Outcomes:**

Provision of a telephone reporting line with live, trained, healthcare professionals to receive calls from healthcare providers and the public and provide county specific information for vector-borne disease, accept vector-borne disease reports from healthcare providers, and assess individuals for travel exposure to Zika virus. Reports will be transmitted to Pima County Health Department Epidemiology via regular or after-hours telephone, fax, and/or secure email. The phone line will be staffed 24 hours a day, seven days a week.

***Public Benefit:**

Access to a 24/7 healthcare professional to offer relevant healthcare information, evaluate travel exposure, assess symptoms and make recommendations for vector-borne disease and Zika virus testing.

***Metrics Available to Measure Performance:**

- Arizona Poison and Drug Information Center will provide a telephone number to Pima County Health Department, that will be public facing and available 24/7 for Zika and vector-borne disease information.
- Arizona Poison and Drug Information Center will develop, maintain, and provide a spreadsheet documenting each call received, action taken, notification to appropriate agency and additional information as required.
- Arizona Poison and Drug Information center will report data weekly to Pima County Health Department Epidemiology, in addition to providing real-time and immediate notifications of positive screens for Zika virus.

***Retroactive:**

Yes. The contract takes effect July 31, 2018 but the Board of Supervisors did not meet for the four weeks prior to that date and County did not receive the signed amendment from the University in time for the July 3, 2018 meeting. If not approved, the County will not be able to use the grant funding set aside for this purpose.

To: CoB - 7-24-18
PJS - 3
(1)

Contract / Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e.,15-123): _____
Effective Date: _____ Termination Date: _____ Prior Contract Number (Synergen/CMS): _____
 Expense Amount: \$* _____ Revenue Amount: \$ _____

***Funding Source(s) required:**

Funding from General Fund? Yes No If Yes \$ _____ % _____
Contract is fully or partially funded with Federal Funds? Yes No
If Yes, is the Contract to a vendor or subrecipient? _____
Were insurance or indemnity clauses modified? Yes No
If Yes, attach Risk's approval.
Vendor is using a Social Security Number? Yes No
If Yes, attach the required form per Administrative Procedure 22-73.

Amendment / Revised Award Information

Document Type: CT Department Code: HD Contract Number (i.e.,15-123): 18*512
Amendment No.: 02 AMS Version No.: 01
Effective Date: 07/31/2018 New Termination Date: 07/31/2019
Prior Contract No. (Synergen/CMS): CT-HD-17-004

Expense or Revenue Increase Decrease Amount This Amendment: \$ 49,900.00
Is there revenue included? Yes No If Yes \$ _____

***Funding Source(s) required:** Centers for Disease Control and Prevention (CDC) via
Emergency Preparedness Grant ADHS17-133197 (Arizona Department of Health Services)
Funding from General Fund? Yes No If Yes \$ _____ % _____

Grant/Amendment Information (for grants acceptance and awards) Award Amendment

Document Type: _____ Department Code: _____ Grant Number (i.e.,15-123): _____
Effective Date: _____ Termination Date: _____ Amendment Number: _____
 Match Amount: \$ _____ Revenue Amount: \$ _____

***All Funding Source(s) required:**

***Match funding from General Fund?** Yes No If Yes \$ _____ % _____
***Match funding from other sources?** Yes No If Yes \$ _____ % _____
***Funding Source:** _____

***If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?** _____

Contact: Sharon Grant
Department: Health Telephone: 724-7842
Department Director Signature/Date: Paula S. Parkes 20 July 2018 / 7/23
Deputy County Administrator Signature/Date: [Signature] 7/23/18
County Administrator Signature/Date: C. A. [Signature] 7/23/18
(Required for Board Agenda/Addendum Items)

Cover Sheet for Contracts Funded in Whole or in Part with Federal Funds 2 C.F.R. 200.331

Pima County Health Department
3950 S. Country Club Rd., Suite #100
Tucson, AZ 85714

Program Name: Zika Virus Reporting and Identification Call Center

Awardee: University of Arizona
Sponsored Projects Services
PO Box 210158, Rm 510
Tucson, AZ 85721-0158

DUNS: 80-634-5617

Awardee is a Subrecipient: Contractor:

FAIN or PC award #: ADHS17-133197

Federal Award Date: 07/2016

Award Start Date: 08/01/2016 End Date: 07/31/2019

CFDA & Title: (1) 93.074 Public Health Emergency Preparedness
(2) _____
(3) _____
(4) _____
(5) _____

Program Description: Operate a 24 hour public health emergency and vector-borne disease reporting and response line.

Total Award Amount: \$49,900

Federal Funds This Award: \$49,900

Total Fed. Funds this Awardee: \$149,700

Fed. Award Amount (1) \$49,900
by CFDA# above: (2) _____
(3) _____
(4) _____
(5) _____

Federal Source: Center for Disease Control and Prevention (CDC)

Other Amount: _____

Other Source: _____

Match?: Yes No

Match Amount: _____

R&D?: Yes No

Indirect Cost Rate:

Fed: (submit certification) Negotiated ICR: (submit certification) de minimis:

Pima County Contact Information: Sharon Grant, Health, 724-7842

<p>Pima County Department of Health</p> <p>Project: Zika Virus Reporting and Identification Call Center</p> <p>Contractor: University of Arizona Sponsored Projects Services PO Box 210158, Rm 510 Tucson, AZ 85721-0158 Tel: (520) 626-6230</p> <p>Contract No.: CT-HD-18*512; formerly CT-HD-17-004</p> <p>Contract Amendment No.: 02</p>	<div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>CONTRACT</p> <p>NO. <u>CT-HD-18-512</u></p> <p>AMENDMENT NO. <u>02</u></p> <p><small>This number must appear on all invoices, correspondence and documents pertaining to this contract.</small></p> </div> <p>(STAMP HERE)</p>
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Orig. Contract Term: 08/01/2016-07/31/2017	Orig. Amount:	\$ 49,900.00
Termination Date Prior Amendment: 07/31/2018	Prior Amendments Amount:	\$ 49,900.00
Termination Date This Amendment: 07/31/2019	This Amendment Amount:	\$ 49,900.00
	Revised Total Amount:	\$149,700.00

IGA AMENDMENT

The parties agree to amend the above-referenced contract as follows:

1. **Term.** The Contract terminates on July 31, 2019, unless sooner terminated pursuant to the provisions of this Agreement. The parties shall have the option of extending this agreement for two (2) additional one (1) year periods. Any modification shall be by formal written amendment executed by both parties hereto.
2. **Maximum Payment Amount.** The maximum amount the County will spend under this Contract, as set forth in Section III, is increased by \$49,900.00. County's total payments to Contractor under this contract, including any sales taxes, will not exceed \$149,700.00.
3. **Scope of Work.** The Payment Schedule on p5 of Exhibit A1, Scope of Work, is revised as follows:

Payment Schedule

In consideration of the services specified, and subject to availability of funds, the University will bill the County for an annual total of \$49,900 in accordance with the schedule below:

<u>DATE</u>	<u>AMOUNT</u>
October 1, 2018	\$24,950.00
January 1, 2019	\$24,950.00
TOTAL	<u>\$49,900.00</u>

Send all invoices to the following address:

Pima County Health Department
Emergency Preparedness
3950 S. Country Club Road, Suite 100
Tucson, Arizona 85714
Phone: 520-724-7749

The effective date of this Amendment is July 31, 2018.

THE REMAINDER OF THIS PAGE IS INTENTIONALLY LEFT BLANK

All other provisions of the Contract not specifically changed by this Amendment remain in effect and are binding upon the parties.

PIMA COUNTY

Chair, Board of Supervisors

Date

ATTEST

Clerk of the Board

Date

APPROVED AS TO CONTENT

Sub 2 Park
Department Representative

20 July 2018
Date

APPROVED AS TO FORM pursuant to A.R.S. § 11-952(D), the attorneys for the parties hereto have determined that the foregoing Agreement is in proper form and is within the powers and authority granted to each respective body under the laws of the State of Arizona.

Paul J. Herrera
Deputy County Attorney

Paula J. Herrera
Print DCA Name

7.17.18
Date

CONTRACTOR

Arizona Board of Regents
University of Arizona

[Signature]
Authorized Officer Signature
Mark A. Drury
Contracts Manager

Printed Name and Title

7/12/2018
Date

[Signature]
University Associate General Counsel

7/12/18
Date