



BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: August 8, 2023

* = Mandatory, information must be provided

or Procurement Director Award: ☐

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

Exact Sciences Corporation

***Project Title/Description:**

First Amendment to Unrestricted Grant Agreement.

***Purpose:**

This grant will provide funding to the Pima County Health Department (PCHD) to expand health promotion, screening and service coordination activities to improve Colorectal Cancer (CRC) health outcomes in the County.

Amendment #1 extends the term by six months, to December 31, 2023.

***Procurement Method:**

This grant agreement is a non-Procurement agreement and not subject to Procurement rules.

***Program Goals/Predicted Outcomes:**

Goal: Increase colorectal cancer awareness, prevention, and screening referral and follow up in at least three higher risk communities and census tracts/zip codes with low screening rates in Pima County.

Objective 1: Increase community awareness in Pima County via community outreach, engagement and education by developing and implementing health promotion activities and health communication strategies.

Objective 2: Implement CRC initial patient screening questions, provide information, and referral services at PCHD clinics for target population.

Objective 3: Improve access to services and care for people in higher risk groups and low screening uptake areas to reduce disparities to CRC screening and follow-up services through enhanced service coordination between PCHD and other cancer care provider networks and coalitions.

Objective 4: Evaluate effectiveness of strategies and disseminate findings.

***Public Benefit:**

PCHD clinical staff will assess patients eligible for CRC screening, and PCHD Community Health Workers will provide information, education and referrals as appropriate. This grant will enable PCHD to adopt evidenced based practices around CRC assessment and referrals and provide follow-up services as needed. In addition, PCHD will build on their existing capacity and infrastructure to focus on prevention education, awareness of the need for screening and services for high risk, under-served and under-represented populations.

***Metrics Available to Measure Performance:**

The metrics for this grant are primarily activity based. Please refer to Exhibit A in the original grant, GTAW22*115, for details.

***Retroactive:**

Yes. The original grant ended June 30, 2023, but the grant amendment was not received until June 15, 2023. If not approved, the Pima County Health Department will not be able to use remaining funding on colorectal cancer prevention.

6/21/23
GMI
Approves
7/20/23

THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (*) fields

Contract / Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____
 Commencement 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 22-10.

Amendment / Revised Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____
 Amendment No.: _____ AMS Version No.: _____
 Commencement Date: _____ New Termination Date: _____
 Prior Contract No. (Synergen/CMS): _____
☐ Expense ☐ Revenue ☐ Increase ☐ Decrease Amount This Amendment: \$ _____

Is there revenue included? ☐ Yes ☐ No If Yes \$ _____

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

Funding from General Fund? ☐ Yes ☐ No If Yes \$ _____ % _____

Grant/Amendment Information (for grants acceptance and awards)

☐ Award ☒ Amendment

Document Type: GTAM Department Code: HD Grant Number (i.e., 15-123): 24*005
 Commencement Date: 07/01/2023 Termination Date: 12/31/2023 Amendment Number: 01
☐ Match Amount: \$ _____ ☐ Revenue Amount: \$ _____

***All Funding Source(s) required:** Exact Sciences Corporation

*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)?**

N/A – not federal funding

Contact: Sharon Grant

Department: Health

Telephone: 724-7842

Department Director Signature: _____ Date: 7/17/2023

Deputy County Administrator Signature: _____ Date: 21 July 2023

County Administrator Signature: _____ Date: 7/21/23

FIRST AMENDMENT TO UNRESTRICTED GRANT AGREEMENT

This FIRST AMENDMENT TO UNRESTRICTED GRANT AGREEMENT (this "Amendment"), is made and entered into as of the date of the last signature of a party below (the "Effective Date") by and between Exact Sciences Corporation ("Exact") and Pima County Health Department ("Recipient"). Capitalized terms not otherwise defined herein shall have the same meanings as defined in the Agreement.

WHEREAS, Exact and Recipient are parties to an Unrestricted Grant Agreement made and entered into as of April 1, 2022 (the "Agreement") pursuant to which Exact has provided a grant in the amount of \$124,850 (the "Grant") for support of the program titled "Colorectal Cancer (CRC) Prevention, Screening, and Care Coordination" (the "Program"); and

WHEREAS, the Parties wish to amend the Agreement to extend the term.

NOW, THEREFORE, the parties agree as follows:

1. Capitalized terms used herein shall have the meanings set forth in the Agreement.
2. Section 1. of the Agreement shall be deleted in its entirety and replaced with the following:
 1. Term and Termination. This Agreement shall be effective as of the Effective Date and shall continue in effect until December 31, 2023, unless otherwise terminated in accordance with the terms of the Agreement. Either party may terminate this Agreement upon thirty (30) days written notice to the other party. The respective rights and obligations of the parties hereunder shall indefinitely survive the termination of this Agreement; provided, however, Exact's payment obligations will not survive termination.
3. Except as expressly amended hereby, the Agreement shall remain in full force and effect in accordance with the provisions thereof.

IN WITNESS WHEREOF, the Parties hereto have caused this Amendment to be executed by their duly authorized representatives to be effective as of the Effective Date.

EXACT SCIENCES CORPORATION

RECIPIENT

By: _____

By: _____

Name: _____

Name: _____

Title: _____

Title: _____

Date: _____

Date: _____

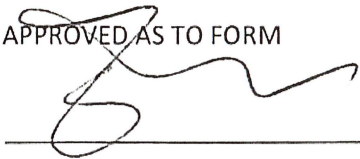
(signatures continue on the next page)

ATTEST

Clerk of the Board

Date

APPROVED AS TO FORM



Deputy County Attorney

Jonathan Pinkney

Print DCA Name

7/12/23

Date

APPROVED AS TO CONTENT



Department Representative

7/17/2023

Date