



## **BOARD OF SUPERVISORS AGENDA ITEM REPORT** **CONTRACTS / AWARDS / GRANTS**

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: March 15, 2022

*\* = Mandatory, information must be provided*

or Procurement Director Award ☐

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

The National Environmental Health Association (NEHA) and US Food & Drug Administration (FDA)

**\*Project Title/Description:**

Maintain Standards 1 and 7, Continuously Improve Standards 6 and 8, Achieve Conformance with Standards 2 - 5, and Complete a Risk Factor Study, in the Consumer Health and Food Safety Division at Pima County Health Department.

**\*Purpose:**

This grant will fund maintenance of Standard 1, Regulatory Foundation, and Standard 7, Industry and Community Relations; continuous improvement of Standard 6, Compliance and Enforcement, and Standard 8, Program Support and Resources; achieve conformance with Standard 2, Trained Regulatory Staff, Standard 3, Inspection Program Based on HACCP (Hazard Analysis and Critical Control Points) Principles, Standard 4, Uniform Inspection Program, and Standard 5, Foodborne Illness and Food Defense Preparedness and Response; and complete a risk factor study.

**\*Procurement Method:**

This Revenue Contract is a non-Procurement contract and not subject to Procurement rules.

**\*Program Goals/Predicted Outcomes:**

- Conduct quarterly analysis of risk factor (RF) violations based on routine inspection data to measure effectiveness of policies and procedures including corrective action for RF violations, long term compliance, and variance requests.
- Continue to execute quality assurance program by assessing EHS staff 3 times per year
- Conduct monthly data review and analysis based on Standard 5 requirements to identify trends and increase inspection frequency at facilities when required.
- Initiate a baseline survey of the five CDC risk factors for two of the four facility categories.
- Update existing and create new enforcement and compliance policies and procedures and then assess their effectiveness by conducting establishment file reviews.
- Re-initiate and complete the food code adoption process and initiate implementation.
- Just Evaluation Services (JESS) will coordinate quarterly community forums to provide operators regularly scheduled opportunities to share concerns about the inspection process.

**\*Public Benefit:**

This funding will help us achieve a safer food supply in our regulated facilities for the residents of Pima County and the multitudes of visitors we host each year, with an ultimate goal of reducing foodborne illness. Less foodborne illness results in a healthier population, and fewer days of work and school missed due to experiencing symptoms.

**\*Metrics Available to Measure Performance:**

The FDA provides a Self Assessment tool for the Voluntary National Retail Food Regulatory Program Standards. This tool will be used to continually track the Division's progress towards meeting and maintaining the Program Standards. Additionally, the program will be held responsible to the timeline that was outlined in the Comprehensive Strategic Improvement Plan that was submitted with the grant application.

**\*Retroactive:**

Yes. PCHD was notified of this award on February 15, 2022. It takes effect on February 1, 2022.

Revised 5/2020

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GMI Approved 2/28/22  
gom

**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 or ☐ 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: GTAW Department Code: HD Grant Number (i.e., 15-123): 22-088

Commencement Date: 02/01/2022 Termination Date: 12/31/2024 Amendment Number: 00

☐ Match Amount: \$ \_\_\_\_\_ ☒ Revenue Amount: \$ 165,173.00**\*All Funding Source(s) required:** The National Environmental Health Association (NEHA) and US Food & Drug Administration (FDA) / Department of Health and Human Services**\*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)?**

FDA funds received via NEHA

Contact: Sharon Grant

Department: Health

Telephone: 724-7842

Department Director Signature/Date:

22 Feb 2022

Deputy County Administrator Signature/Date:

23 Feb 2022

County Administrator Signature/Date:

(Required for Board Agenda/Addendum Items)

2/23/2022



## **NEHA-FDA Retail Flexible Funding Model Grant Program Official Notice of Award for Three-Year Grants**

February 15, 2022

**Grant Number:** G-BM&A-202109-00789

**Application Type:** Maintenance & Advancement Base

**Project Title:** Maintain Standards 1 and 7, Continuously Improve Standards 6 and 8, Achieve Conformance with Standards 2-5, and Complete a Risk Factory Study, in the Consumer Health and Food Safety Division at Pima County Health Department

**Project Summary:** The Pima County Health Department Consumer Health and Food Safety (CHFS) Division completed a 3- year comprehensive strategic plan (CSIP) for all nine standards. Consumer Health and Food Safety's CSIP outlines the Division's goals to achieve conformance with Standards 2-5, maintain conformance with Standards 1 and 7, advance conformance with Standard 9, and continuous improvement with Standards 6 and 8.

**Three-Year Award Amount:** \$165,173.00

**Project Period:** 2/1/2022 to 12/31/2024

**Unique Federal Award Identification Number (FAIN):** U2FFD007358

**CFDA Number:** 93.103

Amanda Anderson  
Pima County Health Department  
3950 S. Country Club Rd, 2301  
Tucson, AZ 85714

Dear Amanda :

Your application has been approved for Maintain Standards 1 and 7, Continuously Improve Standards 6 and 8, Achieve Conformance with Standards 2-5, and Complete a Risk Factory Study, in the Consumer Health and Food Safety Division at Pima County Health Department as part of the National Environmental Health Association (NEHA)-U.S. Food and Drug Administration (FDA) Retail Flexible Funding Model (RFFM) Grant Program, with funding provided by the FDA. Approval is based on review of the project plan and budget details in your submitted application.

As part of your application, your agency has made an assurance that it will comply with all applicable federal statutes and regulations in effect during the grant period, including applicable parts of 45 CFR Parts 75. Acceptance of this award and/or any funds provided by the NEHA-FDA Retail Flexible Funding Model Grant Program acknowledges agreement with all the terms and conditions in this award letter.

The amount of \$165,173.00 represents the full amount of funds to which you are entitled. Grant awards are made with the understanding that NEHA-FDA Retail Flexible Funding Model Grant Program staff may require clarification of information within your application, as necessary, during the application, project, or reporting periods. These inquiries may be necessary to allow us to appropriately carry out our administrative responsibilities.

### **Specific Conditions of Your Award**

In addition to the general Terms and Conditions of your award as listed below, following are additional conditions specific to your award:

**Budget Updates:** Please update your budget to include a more detailed explanation of the costs associated

with this project, specifically, travel and training needs. \$5,000 was deducted each year for Years 2 and 3, for conference travel that should have been requested in a Training, Staff Development, and Program Standards Engagement grant. We will be reaching out to you from [retailgrants@neha.org](mailto:retailgrants@neha.org) with more details regarding the requested updates. We look forward to working with you.

### **Budget**

Your approved three-year award budget is broken down below. To review specific details of the approved budget in your grant award please log into the NEHA-FDA RFFM Grant Portal, where you can view and print your grant (including your budget justifications) and your budget worksheets.

Year 1 (CY 2022): \$54,500.00

Year 2 (CY 2023): \$55,334.00

Year 3 (CY 2024): \$55,339.00

**Total Award Amount:** \$165,173.00

Future year cost support is subject to the availability of funds, including approval of funds by Congress and continued funding of the NEHA Cooperative Agreement by FDA, and satisfactory progress of the project. Budget changes are allowable but must be justified and approved in advance and in writing by the NEHA-FDA RFFM Grant Program Support Team. None of the funds in this award shall be used to pay the salary of an individual at a rate in excess of the current Executive Level II of the Federal Executive Pay Scale for any specific funding year.

### **Terms and Conditions**

Your award is based on the project application referenced in this Notice of Award, submitted to and approved by NEHA, and is subject to the following terms and conditions:

The grantee must complete the full scope of work and all tasks outlined in the approved grant application by the Project End Date, unless NEHA grants a written exception. The recipient agrees to comply with the current FDA general terms and conditions (HHS Grant Policy Statement).

Restrictions on the expenditure of funds in federal appropriations acts apply to this award, to the extent those restrictions are applicable to subawards made under federal grants. Please refer to 2 CFR 200.400 for guidance on relevant cost principles.

For the complete Terms and Conditions of this award, including links to all relevant federal guidance, please see the **Reporting and Payments** link on the NEHA-FDA RFFM Grant Program webpage (<https://www.neha.org/retailgrants>).

### **Reporting**

Reports with due dates will be accessible by logging into the Grant Portal, found on the NEHA-FDA RFFM webpage. Reminders will be sent to the email address of your organization's Point of Contact regarding upcoming and past due reports.

Interim Progress Reports will be required each year for awards made through this program to assure that each funded project remains on track for timely completion. For three-year awards, Annual Progress Reports will be required at the end of Year 1 and Year 2.

When all project objectives have been completed, a Final Project Report must be submitted through the online grant portal no later than 45 days after your Project End Date. As part of the final report, the grantee must provide a full accounting of all expenditures made with funds from this grant award, accompanied by the required documentation.

For complete information on required reporting, please see the **Reporting and Payments** link on the NEHA-FDA RFFM webpage.

### **Advance Payment and Reimbursement Requests**

For three-year awards made through this grant program, the default reimbursement process will begin with an Advance Payment Request for the first full year of funding. If an alternative payment plan is required by your agency, please contact the NEHA-FDA RFFM Grant Program Support Team.

For project Years 2 and 3, additional funding will be provided either as advance or reimbursement payments contingent on project performance and the needs of your jurisdiction.

To initiate your first year Advance Payment Request, you can access, complete, and submit the request through the **Reports** section of your grantee portal. For additional details, please see the **Reporting and Payments** link on the NEHA-FDA RFFM webpage.

### **Recipient FDA Notice**

As a reminder, recipients of funding through this program are required to assure that project activities achieve greater conformance with the FDA Voluntary National Retail Food Regulatory Program Standards (Retail Program Standards). For additional information regarding the Retail Program Standards, please visit the FDA's official webpage at: <https://www.fda.gov/food/retail-food-protection/voluntary-national-retail-food-regulatory-program-standards>.

### **Allowable and Non-allowable Costs**

For information on allowable and non-allowable costs, please refer to the **NEHA-FDA RFFM Grant Guidance** link on the NEHA-FDA RFFM webpage.

### **Base Grant Requirement**

Once awards under the NEHA-FDA RFFM Grant Program have been made, all grantees must have an active Base Grant in place (either a Development Base Grant or a Maintenance and Advancement Base Grant) to remain eligible for open Optional Add-On Grants. During the performance period of open awards, if a Base Grant is cancelled for any reason (at the request of the Grantee or due to non-performance), all open Additional Add-On Grants may also be in jeopardy of cancellation.

For grantees that have been awarded both a Track 2 Development Base Grant (a one-year award) and a Capacity Building Grant (a three-year award), it is the awarded jurisdiction's responsibility to apply for Development Base Grants in years 2 and 3 of this grant program to assure that their Capacity Building Grant remains eligible for continuation.

### **Travel Costs**

Travel costs should adhere to the general guidelines found in the **NEHA-FDA RFFM Grant Guidance**. Contact the NEHA-FDA RFFM Grant Program Support Team with specific travel-related questions not covered in the guidance.

### **Financial Conflict of Interest**

This award is subject to the Financial Conflict of Interest (FCOI) regulation at 42 CFR Part 50 Subpart F.

### **Contact us for Support**

If you have questions about this award, please contact the NEHA-FDA RFFM Grant Program Support Team. Additionally, the FDA Retail Food Safety Specialist assigned to your geographic area is an integral part of your jurisdiction's successful completion of Retail Program Standards activities and is available to assist with your funded project.

### **NEHA-FDA RFFM Grant Program Support Team**

[retailgrants@neha.org](mailto:retailgrants@neha.org)

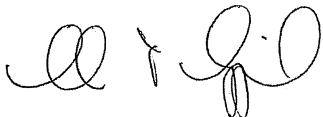
1-833-575-2404

### **FDA Retail Food Safety Specialist Contact Information**

<https://www.fda.gov/food/voluntary-national-retail-food-regulatory-program-standards/directory-fda-retail-food-specialists>

We appreciate your ongoing commitment to achieving greater conformance with the Voluntary National Retail Food Regulatory Program Standards.

Sincerely,



David T. Dyjack, DrPH, CIH  
NEHA Executive Director