

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

| Award Contract C Grant                      | Requested Board Meeting Date: June 21, 2022 |  |  |
|---|---|--|--|
| * = Mandatory, information must be provided | or Procurement Director Award:              |  |  |
| *Contractor/Vendor Name/Grantor (DBA):      |   |  |  |
| Sunnyside Unified School District           |   |  |  |

### \*Project Title/Description:

Intergovernmental Agreement (IGA) between Pima County and the Sunnyside Unified School District for the Provision and Administration of Childhood Immunizations and other Health Services

#### \*Purpose:

The Pima County Health Department (PCHD) has long had agreements with many of the school districts to cooperate in the administration of school immunizations. This IGA also includes the possibility of working together on other health programs such as tobacco education, oral health, family planning and other types of educational programs.

Amendment #1 revises Article V., County Responsibilities, to provide more detail about the reproductive health services being provided to the students.

#### \*Procurement Method:

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

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

Under this IGA, PCHD can provide training and authorization to school nurses to provide school immunizations. Immunizations may also be provided to adults should the need arise. Depending on need and resources, the District and PCHD may also cooperate on other educational programs and/or the provision of oral health services. The Pima County Health Department has a mobile clinic that visits several Sunnyside high schools to provide family planning and STI prevention services.

#### \*Public Benefit:

School-age children are mandated to receive certain immunizations and the County is mandated to provide them. Offering the required immunizations at school is a convenient and free way for children to receive their required immunizations. Providing reproductive health services through the mobile clinic provides a convenient and accessible way to maximize the adolescent's health and academic potential.

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

- School nurses will enter all vaccines administered into the Arizona State Immunization Information System (ASIIS).
- Number of hours of traininig provided to District nurses and support staff.
- Vaccines and supplies are ordered in a timely manner and stored according to manufacturer's instructions.
- Number of youth provided with education and clinical services related to sexually transmitted infections and reproductive health topics.

## \*Retroactive:

No.

TO: COB 6-8-2022 ()
vers: 2

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# 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 \$                  | <u> </u>  |
| Contract is fully or partially funded with Fed<br>If Yes, is the Contract to a vendor or sub   | recipient?                    |   |
| Were insurance or indemnity clauses modifing of the street | fied? C Yes (                 | • No  |
| Vendor is using a Social Security Number?  If Yes, attach the required form per Administra   | C Yes tative Procedure 22-10. | € No  |
| Amendment / Revised Award Information  | <u>on</u>                     |   |
| Document Type: <u>CTN</u>  | Department Code: <u>HD</u>    | Contract Number (i.e., 15-123): <u>22-070</u>               |
| Amendment No.: <u>01</u>   |                               | AMS Version No.: <u>02</u>                                  |
| Commencement Date: 6/21/2022 A   |                               | New Termination Date:                                       |
| ex.  |                               | Prior Contract No. (Synergen/CMS): N/A                      |
| C Expense C Revenue C Increase   |                               | Amount This Amendment: \$ 0.00                              |
| Is there revenue included?   | No If Yes \$                  | _   |
| *Funding Source(s) required: <u>N/A</u>  |                               |   |
| Funding from General Fund? Tyes 🕫  | No If Yes \$                  |   |
| <b>Grant/Amendment Information</b> (for grad   | nts acceptance and awards)    | ) Award C Amendment   |
| Document Type:   | Department Code:              | Grant Number (i.e., 15-123):                                |
| Commencement Date:   | Termination Date: _           | Amendment Number:   |
| Match Amount: \$   |                               | Revenue Amount: \$  |
| *All Funding Source(s) required:   |                               |   |
| *Match funding from General Fund?  |                               | %   |
| *Match funding from other sources? *Funding Source:  | Yes ( No If Yes \$            |   |
| *If Federal funds are received, is funding   | g coming directly from the    | Federal government or passed through other organization(s)? |
| Contact: Sharon Grant  | 165 d 254                     | · · · · · · · · · · · · · · · · · · ·                       |
| Department: <u>Health</u>  |                               | Telephone: <u>724-7842</u>                                  |
| Department Director Signature:   | J. But                        | 42/22 / Date:   |
| Deputy County Administrator Signature:   | Page 1                        | Date: 3 1 2022  |
| County Administrator Signature:  | orce                          | Date: Col 3 Zerz  |

## **Pima County Department of Health**

Project: Provision and Administration of Childhood Immunizations and Other Health Services

Contractor: Sunnyside Unified School District

Contract No.: CTN-HD-22-070

**Contract Amendment No.: 01** 

| Orig. Contract Term:          | 01/01/2022 - 12/31/2026 |
|-------------------------------|-------------------------|
| <b>Termination Date Prior</b> | Amendment: N/A          |
| <b>Termination Date This</b>  | Amendment: 12/31/2026   |

\$0.00 Orig. Amount: \$ N/A **Prior Amendments Amount:** This Amendment Amount: **Revised Total Amount:** 

\$0.00 \$0.00

## INTERGOVERNMENTAL AGREEMENT AMENDMENT

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

- Background and Purpose. 1.
  - 1.1. Background. On January 1, 2022, County and District entered into the above referenced agreement to cooperate on providing and administering immunizations and other health services.
  - 1.2. Purpose. The Parties agree to modify the County Responsibilities listed in the IGA.
- County Responsibilities. The parties have revised Article V. County Responsibilities, 2. subsection I.6 to read as follows:

Reproductive Health Education and Services. Services that may be provided with or without parental consents and as per the requirement of Title X. Services may include testing and treatment of HIV and Sexually Transmitted Infections, provision of contraceptive care to include condoms, combined oral contraceptive pills, long-acting reversible contraception, health guidance and counseling.

## 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   |  | DISTRICT   |  |
|---|--|--|--|
| Chair, Board of Supervisors   | Date   | Consuelo Hernandez, Presider   | 5/28/22<br>It Date                                 |
| ATTEST  |  | ATTEST   |  |
| Clerk of the Board  | Date   | Steve Holmes, Superintendent   | 5/23/22<br>Date                                    |
| Pursuant to A.R.S. § 11-952(D) Intergovernmental Agreement is entity as granted under the laws Deputy County Attorney | APPROVED At the attorney for in proper forms of the State.    1   1   2   2     Date | AS TO FORM or each party has determined that and is within the powers and authorized Legal Counsel | the foregoing<br>nority of the<br>5/3/2022<br>Date |
| APPROVED AS TO CONTENT  | •  |  |  |
| Department Representative   | 1t 6/2   | 2/22   |  |