



BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

☐ Award ☒ Contract ☐ Grant

Requested Board Meeting Date: August 2, 2022

or Procurement Director Award: ☐

* = Mandatory, information must be provided

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

Tucson Unified School District

***Project Title/Description:**

Intergovernmental Agreement (IGA) between Pima County and the Tucson 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 new IGA also includes the possibility of working together on other health programs such as tobacco education, oral health, 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 TUSD high schools to provide family planning and Sexually Transmitted Infections 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 (ASIS).
- Number of hours of training 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 7-20-22 (U)
VERS: 2
PGS: 2

JUL19*22PM0403PD

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: CTN Department Code: HD Contract Number (i.e., 15-123): 22-069

Amendment No.: 01 AMS Version No.: 02

Commencement Date: 8-2-2022 New Termination Date: _____

Prior Contract No. (Synergen/CMS): N/A

☐ 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: _____ 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?** ☐ 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: 7-15-22

Deputy County Administrator Signature: _____

Date: 18 July 2022

County Administrator Signature: _____

Date: 7/19/2022

Pima County Department of Health

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

Contractor: Tucson Unified School District (TUSD)
1010 E. Tenth Street
Tucson, AZ 85719

Contract No.: CTN-HD-22-069

Contract Amendment No.: 01

Orig. Contract Term:	01/01/2022-12/31/2026	Orig. Amount:	\$0.00
Termination Date Prior Amendment:	N/A	Prior Amendments Amount:	\$ N/A
Termination Date This Amendment:	12/31/2026	This Amendment Amount:	\$0.00
		Revised Total Amount:	\$0.00

INTERGOVERNMENTAL AGREEMENT AMENDMENT

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

1. Background and Purpose.

1.1. Background. On January 1, 2022, County and Contractor entered into the above referenced agreement to cooperate on the administration of childhood immunizations and other health services.

1.2. Purpose. The Parties agree to modify the County Responsibilities listed in the IGA.

2. County Responsibilities. The parties have revised Article V. County Responsibilities, 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

President Date

ATTEST

ATTEST

Clerk of the Board Date

Superintendent Date

APPROVED AS TO FORM

Pursuant to A.R.S. § 11-952(D), the attorney for each party has determined that the foregoing Intergovernmental Agreement is in proper form and is within the powers and authority of the entity as granted under the laws of the State.

Deputy County Attorney

Date

Legal Counsel

Date

APPROVED AS TO CONTENT

Department Representative

Date