



BOARD OF SUPERVISORS AGENDA ITEM REPORT
CONTRACTS / AWARDS / GRANTS

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: September 17, 2019

* = Mandatory, information must be provided

or Procurement Director Award ☐

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

Arizona Department of Health Services (ADHS)

***Project Title/Description:**

WIC and BFPC Services. This IGA grant is for the Women, Infants, and Children (WIC) and the Breastfeeding Peer Counseling (BFPC) programs.

***Purpose:**

The Arizona Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides nutrition education and breastfeeding support services, supplemental nutritious foods, and referrals to health and social services. WIC serves pregnant, breastfeeding, and postpartum women, infants, and children under the age of five who are determined to be at nutritional risk.

Pregnant and breastfeeding WIC participants may also participate in the Breastfeeding Peer Counseling program. This program offers additional peer-to-peer breastfeeding support aimed at increasing initiation and duration of breastfeeding.

Amendment #2 adds funding for FFY 2020 in the amount of \$1,552,948 for the ongoing WIC services program and \$105,998 for the breastfeeding peer counseling program. \$1,552,948 represents an increase from the previous year, which was \$1,478,059, due to an increase in caseload. In addition, the Farmer's Market program is being discontinued with this Amendment.

***Procurement Method:**

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

***Program Goals/Predicted Outcomes:**

The goal of this program is to improve the health of pregnant, postpartum and breastfeeding mothers, as well as their infants and children up to age five, by: 1) providing nutritious foods to supplement the diet of low-income participants; 2) providing breastfeeding education and support to increase the number of babies that are breastfed and to increase the duration of breastfeeding; 3) providing nutrition education; and 4) reducing malnutrition.

The Pima County WIC program's contractual goal is to serve an average of 9,550 clients per month during Fiscal Year 2020.

***Public Benefit:**

These programs benefit qualifying low income pregnant, postpartum and breastfeeding mothers and their infants and children up to age five in Pima County. During the last fiscal year an average of 9,100 participants were served each month through the Pima County WIC program. For the current fiscal year we anticipate serving approximately 9,550 participants each month.

***Metrics Available to Measure Performance:**

ADHS conducts annual Financial Audits to review cost allowance, financial control improvement and improved Local Agency service. In addition, ADHS conducts biennial Management Evaluations to review management processes, client certification, food package determination, and nutrition education. ADHS also measures monthly and yearly caseload, indicated by the number of clients issued monthly supplemental food benefits.

***Retroactive:**

No.

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: _____ Department Code: _____ Contract Number (i.e., 15-123): _____

Amendment No.: _____ AMS Version No.: _____

Effective 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 ☒ AmendmentDocument Type: GTAM Department Code: HD Grant Number (i.e., 15-123): 20-05Effective Date: 10/01/2019 Termination Date: _____ Amendment Number: 02☐ Match Amount: \$ _____ ☒ Revenue Amount: \$ 1,658,946***All Funding Source(s) required:** U.S. Dept. of Agriculture (USDA)***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)?** Federal funds received through the Arizona Department of Health ServicesContact: Sharon GrantDepartment: Health Telephone: 724-7842Department Director Signature/Date: [Signature] 9/3/2019Deputy County Administrator Signature/Date: [Signature] 9/4/2019County Administrator Signature/Date: C. R. [Signature] 9/4/19
(Required for Board Agenda/Addendum Items)

GRANT APPLICATION APPROVAL REQUEST

Instructions: Fill out the top section of this form completely. Contact the program Grants Management & Innovation (GMI) Lead if you require assistance (724-2240). Email your completed request to: GMI@palma.gov. Your request will be forwarded to County Administration for review. Notification of approval requests should be submitted at least 15 business days prior to the application's submission deadline (AP 5-1 Procedure).

Form: 2989-0002 Grant Application Approval Request (05132019)

GRANT COST/BENEFIT ANALYSIS

To be completed by GMI staff

CFDA No. 10.557

Competitive Criteria:

This is an amendment to an award, outlining changes to pricing and SOW. Funding originates with the USDA and is awarded to ADHS based on a formula. PCHD was awarded on BLANK, and the award was accepted by the BOS September 2018 for a term starting October 1, 2018. This is a cost-reimbursement contract.

Other Factors:

Original agreement (GTAW 19*16) awarded funding for October 2018 through September 2019; this amendment is indicating award for October 2019 through September 2020. The award amount was increased from \$1,478,059 to \$1,552,948, with an additional award of \$105,998 for breastfeeding peer counseling services;

Number of Awards:

n/a

Total amount to be awarded: \$ 1,552,948.00

Match Required:

☐ Yes

☒ No

If required what is the amount/percent: _____

Terms Notes (e.g. unusual restrictions, reporting burdens, etc.):

Monthly Participation Reports, Contractor Expenditure Reports, and quarterly electronic and cost summary reports required. Original IGA with ADHS term dates from October 1, 2018 to September 30, 2023; IGA amended annually to accommodate changes in pricing and scope of work. Differences in scope include: ADHS not continuing the Farmer's Market Nutrition Program; requirement to conduct retention activities; the assigned caseload increasing from 9,300 to 9,550; change from referral to us as Local Agency to Contractor;

Will this project require additional office/project space?

☐ Yes

☒ No

Will this project require staff time that cannot be paid for by the grant?

☐ Yes

☒ No

Will your project require any equipment items over \$5,000 per item?

☐ Yes

☒ No

Does the proposal use a fixed price contract?

☐ Yes

☒ No

Is this project subject to Human Subjects compliance?

☐ Yes

☒ No

Does this project involve subrecipients?

☐ Yes

☒ No

Is there a Statutory Funding Preference from the funding agency?

☐ Yes

☒ No

Allowable Indirect Rate: full

If Indirect is not allowed, attach documentation.

List any other proposal or funder specific requirements:

Indirect costs allowed per 2CFR200 (applicable per USDA), but not applied for-waiver attached. Original IGA was accepted September 2018, before AP 5-1 was approved. An amendment is required for transfers to non-funded line-item or transfers exceeding 10% between line items. A minimum of 4% of annual WIC expenditures must be used to support breastfeeding support and education.

GMI notes & recommendations:

Completed by: MH

The indirect waiver request, attached, does not accurately reflect GMI Director's recollection of guidance.

By:

[Signature]

GMI Director

Date:

8/28/19

[Signature]

County Administrator Approval Request

Approved: ☒

Not Approved: ☐

Subject to Further Review: ☐ Yes ☐ No

If your project is subject to further review, please contact your GMI Lead to discuss necessary revisions prior to resubmission of the Grant Approval Application Request.

By:

[Signature]

County Administrator or Designee

Date:

8/31/2019

REQUEST FOR WAIVER OF INDIRECT COSTS

Requestor (Department Lead)	Sharon Grant
Project Title	WIC and BFPC Services
Sponsor Due Date:	
GMI Lead	

Pima County's Indirect Cost Waiver Policy:

Refer to County Administrator's March 5, 2019 directive regarding recovery of indirect costs:
"No grant acceptance on behalf of the County is to be processed unless there is a clear indication that indirect costs can and are being reimbursed" (Insert link to memo).

Instructions for Requesting Indirect Cost Waiver

Please be aware the request for waiver must be submitted with the Grant Application Approval Request. All requests for waiver of indirect costs must present a compelling reason. Reasons that do not meet the "compelling reason" justification include:

- ✓ An application will be more competitive without indirect costs requested
- ✓ A budget cut is anticipated in future years

We are seeking a waiver of indirect costs for this project based on the following:

This Amendment is for a current grant rather than a new grant. Pima County has offered the WIC program for many years, always with the County funding part of the cost. When it was time to submit the budget for the next fiscal year, two budgets were prepared, one with indirect costs and one without. GMI instructed PCHD to use the budget without indirect costs because we are paid based on caseload and including indirect costs would not increase the amount received or decrease the amount the County needs to pay to continue the program.

Reviewed and Approved by:


County Administrator or his Designee

Date: 8/31/2019



INTERGOVERNMENTAL AGREEMENT (IGA)

Amendment

ARIZONA DEPARTMENT OF
HEALTH SERVICES
150 18th Ave Suite 260
Phoenix, Arizona 85007

Contract No.:
CTR040838

IGA Amendment No: 2
Arizona Procurement Portal Amendment No.: 3

Procurement Officer
**Whitni Markotic/Felicia
Marquez**

WIC AND BFPC SERVICES

It is mutually agreed that the Intergovernmental Agreement referenced is amended as follows:

1. Pursuant to Terms and Conditions, Page Seven (7), Provision Six (6), Contract Changes; the Intergovernmental Agreement is amended to revise the following:
 - 1.1 The Scope of Work is revised and replaced by the Scope of Work of this Amendment Two (2).
 - 1.2 The Price Sheet is revised and replaced by the Price Sheet of this Amendment Two (2).
 - 1.3 The Title above has changed from WIC, BFPC, FMNP and ONED SERVICES to WIC and BFPC SERVICES of this Amendment Two (2).

All other provisions of this agreement remain unchanged.

Contractor Name: **PIMA COUNTY HEALTH DEPARTMENT**

Authorized Signature

Address: **3950 S. COUNTRY CLUB, SUITE 100**

Print Name

TUCSON **ARIZONA** **85714-2099**
City State Zip

Title

Pursuant to A.R.S. § 11-952, the undersigned public agency attorney has determined that this Intergovernmental Agreement is in proper form and is within the powers and authority granted under the laws of Arizona

This Intergovernmental Agreement Amendment shall be effective the date indicated. The Public Agency is hereby cautioned not to commence any billable work or provide any material, service or construction under this IGA until the IGA has been executed by an authorized ADHS signatory.

State of Arizona

Signature

Date

Signed this _____ day of _____ 20__

Jonathan Pinkney

Print Name

Procurement Officer

Contract No.: **CTR040838**, which is an Agreement between public agencies, has been reviewed pursuant to A.R.S. § 11-952 by the undersigned Assistant Attorney, who has determined that it is in proper form and is within the powers and authority granted under the laws of the State of Arizona.

Signature

Date

REVIEWED BY

Appointing Authority or Designee
Pima County Health Department

Print Name

Assistant Attorney General

	<p style="text-align: center;">INTERGOVERNMENTAL AGREEMENT (IGA)</p> <p style="text-align: center;">Amendment</p>		<p>ARIZONA DEPARTMENT OF HEALTH SERVICES 150 18th Ave Suite 260 Phoenix, Arizona 85007</p>
	<p>Contract No.: CTR040838</p>	<p>IGA Amendment No: 2 Arizona Procurement Portal Amendment No.: 3</p>	<p>Procurement Officer Whitni Markotic/Felicia Marquez</p>

SCOPE OF WORK

1. BACKGROUND

The Arizona Department of Health Services (ADHS) Bureau of Nutrition and Physical Activity (BNPA) administers funds provided by the United States Department of Agriculture (USDA) for the operation of the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and Breastfeeding Peer Counseling Program (BFPC) for the State of Arizona. The USDA nutrition programs are discretionary, and each provides a specific service to women, infants, and children who are low income and at nutrition risk. The overall goal of all the USDA Nutrition Programs is to improve the health status of eligible participants through adoption of healthy behavioral lifestyle changes and to help prevent the occurrence of health problems.

1.1 WIC Nutrition Services

The WIC Program accomplishes this goal by providing participant-centered services (PCS) including nutrition and breastfeeding information and support, specific supplemental healthy foods through the issuance of food benefits that can be used at ADHS-approved grocery stores and farmers' markets, and referrals to other health and human services as an adjunct to good health care during critical times of growth and development. Service population eligibility for the WIC Program is based upon federal regulations such as participant category (pregnant and breastfeeding woman, infant or child under five years of age), a household income at or below one hundred and eighty-five percent (185%) of federal poverty guidelines, residence within the service area, and nutrition risks.

To be considered as a WIC Local Agency, the organization must be a local public or private non-profit organization, County health department, or tribal entity under contract with ADHS to provide WIC services according to the WIC Program federal regulations and state policies and procedures. The State awards a WIC Contract based on the ability of the organization to provide WIC services, potentially eligible population, need, response to the Scope of Work, information technology capacity, and available funds. The State determines and awards the WIC contract amount based on a funding formula using several factors such as a base level for a program to function, the amount of caseload negotiated with each Local Agency, and quality of performance.

1.1.1 Specific objectives for nutrition services (based on Healthy People 2020 goals) are:

- 1.1.1.1 To increase the incidence of breastfeeding to eighty-two percent (82%) of women initiating breastfeeding;
- 1.1.1.2 To increase the duration of breastfeeding to sixty-one percent (61%) of women breastfeeding for the first six (6) months of their baby's life;
- 1.1.1.3 To increase the duration of breastfeeding to thirty-four percent (34%) of women breastfeeding for the first year of their baby's life;
- 1.1.1.4 To increase the rate infants are exclusively breastfed to forty-four percent (44%) at three (3) months and twenty-four percent (24%) at six (6) months;
- 1.1.1.5 To reduce the proportion of adults who are considered obese to thirty-one percent (31%);
- 1.1.1.6 To reduce the proportion of children ages two to five (2-5) who are considered obese to ten percent (10%);
- 1.1.1.7 To increase the consumption and variety of fruits and vegetables by those two (2) and older;
- 1.1.1.8 To increase the consumption of whole grains by those two (2) and older; and

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1.1.1.9 To increase the proportion of children ages birth to two (0-2) who view no television or videos on an average day to forty-five percent (45%).

1.2 Breastfeeding Peer Counseling (BFPC)

- 1.2.1 In 2003, the USDA Food and Nutrition Service (FNS) entered into a cooperative agreement with Best Start Social Marketing (Best Start) to gather information to obtain a clear understanding of the components that are necessary to sustain effective peer counseling programs and how to structure these programs so they are cost effective and manageable. They developed the program "Using Loving Support to Implement Best Practices in Peer Counseling", which is a training and technical assistance project that will be used as a model to aid WIC in designing, building, maintaining, and sustaining peer counseling programs that will improve breastfeeding initiation and duration rates. Arizona will be using this program to guide and develop the state peer counseling program.
- 1.2.2 The discretionary peer counseling services are considered an adjunct support to WIC breastfeeding services to help achieve the WIC Nutrition Services objectives regarding breastfeeding.
- 1.2.3 Peer counseling has been a significant factor in improving initiation and duration rates of breastfeeding among women in a variety of settings, including disadvantaged and WIC populations representing diverse cultural backgrounds and geographical locations. Peer counselors are especially effective in communities where role models for breastfeeding behaviors, knowledgeable health care providers, and cultural practices that include breastfeeding as the norm, are scarce. Combining peer counseling with the ongoing WIC breastfeeding promotion and support efforts has the potential to significantly impact breastfeeding rates among WIC participants, and most significantly, increase the harder to achieve breastfeeding duration rates. WIC Local Agencies are strongly encouraged to provide peer counseling services in addition to the ongoing breastfeeding support to their WIC participants. Contractors must provide a breastfeeding friendly environment and have policies to accommodate participants and staff who are breastfeeding.

2. OBJECTIVE

At a minimum, to provide WIC services while allowing each County Health Department Local Agency (Contractor) to provide, at their discretion, Breastfeeding Peer Counseling Services.

3. SCOPE OF WORK

3.1. WIC Services

The WIC Program Contractor shall perform all the work required to administer and provide WIC services to eligible participants according to the Arizona WIC Program Policies and Procedures Manual (WIC PPM). These include, but are not limited to the following activities:

- 3.1.1 Perform WIC certification procedures such as categorical and income screening and health and nutrition assessments;
- 3.1.2 Provide participant centered nutrition and breastfeeding support services to WIC participants;
- 3.1.3 Provide the mandatory and appropriate additional referrals reflecting the needs of the individual WIC participants;
- 3.1.4 Issue WIC food benefits tailored to meet the needs of the participants;

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- 3.1.5 Ensure the collection and recording of accurate information;
- 3.1.6 Provide professional training, mentoring and monitoring of WIC staff competencies necessary for delivery of required services;
- 3.1.7 Provide administrative functions for operation of the WIC Program; and
- 3.1.8 Prepare and submit all required plans/reports in accordance with this Agreement and the WIC PPM.

3.2. Breastfeeding Peer Counseling (BFPC)

WIC BFPC Contractors shall perform all the work required to administer and provide additional breastfeeding support services to WIC mothers following the Loving Support best practice guidelines for peer counseling services and according to the original Contractor's proposal in order to increase the breastfeeding rate and duration of breastfeeding.

4. TASKS AND REQUIREMENTS

4.1. WIC Services Outreach, Retention, and Referrals

- 4.1.1 Conduct outreach activities targeting high risk and underserved populations by developing written and verbal presentations or utilizing available materials to inform potentially WIC eligible individuals of the availability of the WIC Program and to explain the benefits of participation according to the outreach plan proposal submitted and accepted with this Agreement.
- 4.1.2 Conduct retention activities to maintain and increase the participation of current WIC enrollees.
- 4.1.3 Establish community partnerships with, at a minimum, the mandatory referral agencies, local hospitals, OB/GYN and pediatricians offices, and provide regular contacts according to the outreach and plan proposal submitted and accepted with this Agreement.
- 4.1.4 Establish community partnerships with community organizations such as food banks, community organizations, human and social services, school districts, etc. according to the outreach and referral plan proposal submitted and accepted with this Agreement.
- 4.1.5 Establish a referral system with breastfeeding/lactation specialists, including but not limited to, International Board Certified Lactation Consultants (IBCLC), Certified Lactation Counselors (CLC), Certified Breastfeeding Counselors (CBC), and Certified Lactation Educators (CLE) according to the outreach and referral plan proposal submitted and accepted with this Agreement.

4.2. Additional BFPC Outreach Tasks:

- 4.2.1 Develop and document an internal referral link between WIC Program and WIC Peer Counseling Program when applicable. Interaction between WIC Program and WIC Peer Counseling Program shall occur at least monthly and may be in the form of site visits from Peer Counselors, participation of Peer Counselors in WIC clinic meetings, and/or additional training for WIC clinic staff and Peer Counselors.

4.3. Participant Records:

- 4.3.1 Follow and maintain documentation of participant centered certification and administrative procedures as described in the WIC PPM, including but not limited to:

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- 4.3.1.1 Eligibility and ineligibility determinations;
- 4.3.1.2 Nutrition assessments;
- 4.3.1.3 Nutrition and breastfeeding education and support;
- 4.3.1.4 Nutrition and breastfeeding counseling;
- 4.3.1.5 Encourage participants in setting behavioral goals;
- 4.3.1.6 Appropriate referrals;
- 4.3.1.7 Program abuse; and
- 4.3.1.8 Food benefit issuances.
- 4.3.2 Maintain inventory and accountability records, as set forth in the WIC PPM for eWIC cards.
- 4.3.3 Assure participant confidentiality by obtaining written permission from affected program participant(s) prior to the release of participant information to any agency. The Contractor shall have a written agreement, completed in accordance with 7 CFR (Code of Federal Regulations) 246.26 (h)(3), and the Arizona WIC Policy and Procedure Manual, with any agency or program that will share participant information. The above federal regulation details the implementation of a written agreement and state plan to regulate use and disclosure of confidential applicant and participant information.
- 4.3.4 Staff shall only access the WIC Computer Data System and client files for business related reason(s).
- 4.3.5 Ensure paper files containing confidential participant information are stored in a secure location in the clinic, archived when appropriate, and destroyed according to the retention schedule. All files should be destroyed in an appropriate manner.
- 4.3.6 The Contractor shall notify the State Agency immediately by telephone call and email upon the discovery of a breach of a participant's confidentiality.
- 4.3.7 The Contractor shall immediately investigate such security incident, breach, or unauthorized use or disclosure of participant information, including:
 - 4.3.7.1 What data elements were involved and the extent of the data involved in the breach;
 - 4.3.7.2 A description of the unauthorized person(s) known or reasonably believed to have improperly used or disclosed the protected information;
 - 4.3.7.3 A description of where the protected information is believed to have been improperly transmitted, sent, or utilized;
 - 4.3.7.4 A description of the probable causes of the improper use or disclosure; and
 - 4.3.7.5 Whether Arizona Revised Statutes (A.R.S) § 18-545 or any other federal or state laws requiring individual notifications of breaches are triggered.
- 4.3.8 The Contractor shall provide a written report of the investigation to the Chief of the Bureau of Nutrition and Physical Activity (BNPA)/WIC Director and Program Integrity Manager within ten (10) working days of the discovery of the breach or unauthorized use or disclosure. The report shall include the information

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specified above, as well as a full, detailed corrective action plan, including information on measures that were taken to halt and/or contain the improper use or disclosure.

- 4.3.9 The Contractor shall notify individuals of the breach or unauthorized use or disclosure when notification is required under state or federal law and shall pay any costs of such notifications, as well as any costs associated with the breach using non WIC funds. The BNPA Chief/WIC Director, Program Integrity Manager, and Assistant Attorney General shall approve the time, manner and content of any such notifications. The Contractor will arrange and pay for any mitigation (e.g. LifeLock) for participants at risk for identity theft because of breach of security of information.

4.4. Service Delivery and Program Rules

The Contractor shall:

- 4.4.1 Determine eligibility of persons requesting WIC services by screening individuals in accordance with procedures set forth in the WIC PPM; Eligible program participants shall include the following categories whose household income does not exceed 185% of the current designated federal poverty guidelines, who have a nutritional risk as defined in the WIC PPM, and reside in Arizona as defined by the WIC PPM;
- 4.4.1.1 Pregnant women, breastfeeding women up to twelve (12) months post-partum, and non-breastfeeding women up to six (6) months following the end of a pregnancy,
- 4.4.1.2 Infants from birth to age one (1), and
- 4.4.1.3 Children from age one (1) year up to five (5) years of age.
- 4.4.2 Provide complete nutrition assessment and document results and follow-up in accordance with Value Enhanced Nutrition Assessment (VENA) initiative as outlined in Chapter 2 and 7 of the Arizona WIC Policy and Procedure Manual.
- 4.4.3 Provide participant-centered nutrition education to participants and appropriately utilize materials provided by the State;
- 4.4.4 Assist participants in setting goals for behavioral change and follow-up on goals set;
- 4.4.5 Promote breastfeeding to WIC participants and provide breastfeeding education and support, and refer to and promote the Breastfeeding Peer Counseling Program, when appropriate;
- 4.4.6 Prescribe and tailor a food package appropriate to the participant's nutritional risk(s), category, and cultural preferences and issue food benefits as set forth in the WIC PPM;
- 4.4.7 Provide program participants with information about available health and social services to which the participant could be referred. The participant shall be provided with written information regarding community services and referrals in accordance with the WIC PPM and Contractor referral procedures;
- 4.4.8 Coordinate WIC Services with other health and social services available within the service area, including but not limited to immunizations, voter registration, and breastfeeding support;
- 4.4.9 Provide information, check for understanding, and document training to participants on program rules, regulations, WIC approved foods, use of eWIC cards, and food benefit use and redemption. The training shall be documented in the participant's record as set forth in the WIC PPM;
- 4.4.10 Consider the impact of scheduling practices, hours of operation, and clinic closures on caseload and WIC applicants' access to services.

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4.4.11 Additional BFPC Service Delivery tasks:

- 4.4.11.1 Accept referrals generated from calls to the ADHS Pregnancy and Breastfeeding Hotline into the Peer Counseling Program;
- 4.4.11.2 Provide peer counseling services, when appropriate. Services shall be made available outside of usual clinic hours and outside of the WIC clinic, but may also be available during usual clinic hours and in the WIC clinic; and
- 4.4.11.3 Provide supervision, mentoring, monitoring, and evaluation of peer counselors, when appropriate.

4.5. Participant-Centered Nutrition Education

The Contractor shall:

- 4.5.1 Prepare and submit a two (2) year Nutrition Services and Training Plan for participants to include, but not be limited to:
 - 4.5.1.1 Adoption and Implementation of ADHS goals for nutrition services. In addition, Local Agencies will identify their own goals for nutrition services in this plan.
 - 4.5.1.2 Adoption and implementation of the State objectives for staff training and client interventions related to the goals for nutrition services. In addition, Local Agencies are required to provide at least one (1) additional objective for each goal.
- 4.5.2 Provide and document participant-centered nutrition education to all WIC adult participants, and to parents or caretakers of participants according to the guidelines of the State Nutrition Services Plans. A minimum of two (2) nutrition education contacts in each six (6) month certification period shall be made and documented in the participant's record. Breastfeeding women, children, infants and migrants from any eligibility category are certified for one (1) year and will receive one (1) nutrition education contact for each three (3) month period. Pregnant women certified through six (6) weeks postpartum will receive one (1) nutrition education contact for each three (3) month period.
- 4.5.3 Provide and document professional supervision, mentoring and monitoring of staff at the clinic level on a regular basis, in accordance with Contractor Self-Assessment requirements and as often as necessary, to ensure competence.
- 4.5.4 Offer, as often as necessary, high- and medium-risk nutrition education/counseling by an RD to all participants deemed high-risk upon assessment. As defined in the WIC PPM Local Agencies may designate a Bachelor's degree nutritionist or Dietetic Technician Registered to provide medium-risk counseling to participants under the supervision of the RD.
- 4.5.5 Expend for nutrition education activities an aggregate amount that is not less than the sum of one-sixth (1/6) of the amount the Contractor receives for provision of WIC services each contract year. If the one-sixth (1/6) amount is not expended for nutrition education activities, ADHS may request the Contractor to return an amount equal to the difference between the one-sixth (1/6) requirement and the actual amount expended IF ADHS must pay a penalty to the Federal Government. Costs that can be applied to meet the one-sixth (1/6) requirement for nutrition education include:
 - 4.5.5.1 Salary and other costs for time spent on nutrition education, whether with an individual or group;
 - 4.5.5.2 The cost of procuring and producing nutrition education materials;

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4.5.5.3 The cost of training nutrition educators, including costs related to conducting training sessions and purchasing and producing training materials;

4.5.5.4 The cost of conducting participant evaluations of nutrition education;

4.5.5.5 The salary and other costs incurred in developing the nutrition education plan; and

4.5.5.6 Other ADHS-approved costs.

4.5.6 Coordinate nutrition education activities and messages. Wherever possible, the Contractor shall utilize USDA and/or AZ Health Zone materials and messages to ensure common nutrition messages.

4.5.7 The Contractor will provide documentation that a minimum of four percent (4%) of their annual WIC expenditures have been used to support breastfeeding promotion and education. If the 4% is not expended for breastfeeding promotion and education activities, ADHS may request the Contractor to return an equal to the difference between the four percent (4%) and the actual amount expended IF ADHS must pay a penalty to the Federal Government.

4.6. Staffing

The Contractor shall:

4.6.1 Designate a WIC Program Director/Manager who is an RD, with previous WIC and/or community health experience to manage and administer the WIC Program and may provide high-risk nutrition counseling and/or formula authorization to WIC participants. If an RD is on *staff* to provide the WIC RD services and with prior approval from ADHS, the Contractor shall designate a Director with a minimum of an undergraduate degree from an accredited institution in nutrition (community nutrition, public health nutrition, nutrition education, human nutrition or nutrition science) or a related field such as home economics or biochemistry with an emphasis in nutritional science or public health administration. With prior approval from ADHS, number of years working in a WIC Program Director/Manager capacity may substitute for some years of education.

4.6.2 All Contractors will identify an RD to serve as the Contractor Nutrition Coordinator as defined in the WIC PPM. The Nutrition Coordinator will oversee all WIC nutrition services for the Contractor. If a Contractor has barriers to this staffing standard, they must be submitted in writing to ADHS with their plan for coordination of nutrition services within the Contractor to be approved by ADHS.

4.6.3 Provide an appropriate number of RDs to perform high-risk and medium-risk counseling, formula authorization, and as necessary, certification of participants. The Contractor shall provide the RD services in a number proportional to the agency's high-risk caseload in accordance with the WIC PPM. The Contractor may hire nutrition degree graduates or Registered Dietetic Technicians, to do medium-risk counseling, formula authorization, and as necessary participant certification under the direction of an RD. If a Contractor has a barrier to having an RD on staff, the agency must submit in writing to ADHS with their plan for providing high risk nutrition counseling to participants.

4.6.4 When applicable and necessary, provide an appropriate number of adequately trained certification specialists to provide categorical and financial eligibility screening, pre-certification and record required documentation, in accordance with the WIC PPM, as well as administrative support services when necessary. Such individuals shall have the minimum of a high school degree or equivalent and must complete the state training requirements and be certified by the Contractor as competent according to the competencies for the position. Previous nutrition or health related job experience is desirable. These individuals shall meet individual ADHS competencies as set forth in the WIC PPM prior to providing each service such as certifying applicants for participation and/or providing health assessments in the Arizona

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WIC Program Staff should be observed and certified by the supervising authority to be competent in an activity before being allowed to perform on their own without supervision.

- 4.6.5 Provide an appropriate number of adequately trained nutrition education specialists to provide certification and nutrition education services to participants in accordance with the WIC PPM. Such individuals will have the minimum of a high school diploma with nutrition experience, education, and training that have been certified by local or state agencies to be competent for the position. An Associate or Bachelor's degree is highly preferred. These individuals shall meet the ADHS competencies for Nutrition Education Specialists as set forth in the WIC PPM prior to certifying applicants for participation and/or providing nutrition education in the Arizona WIC Program. Staff should be observed and certified by the supervising authority to be competent in an activity before being allowed to perform on their own without supervision.
- 4.6.6 All Contractors will identify an International Board Certified Lactation Consultant (IBCLC) to serve as the Contractor Breastfeeding Coordinator as defined in the WIC PPM. The Breastfeeding Coordinator will oversee all WIC breastfeeding services for the Contractor to ensure all participants have access to breastfeeding promotion and support services. If a Contractor has barriers to this staffing standard, they must be submitted in writing to ADHS with their plan for coordination of breastfeeding services within the Contractor to be approved by ADHS.
- 4.6.7 All Contractors will identify a Training Coordinator as defined in the WIC PPM. The Training Coordinator will oversee and facilitate both new employee and ongoing WIC training for the Contractor including certifying that staff has met competencies prior to providing services without supervision. If a Contractor has barriers to this staffing standard, they must submit in writing to ADHS their plan for coordination of training services within the Contractor to be approved by ADHS.
- 4.6.8 All Contractors will identify an Outreach Coordinator who will oversee and facilitate activities and efforts to retain current WIC enrollees and outreach to potentially eligible population not currently enrolled in WIC, and participate in outreach-related workgroups. If a Contractor has barriers to this staffing standard, they must submit in writing to ADHS their plan for coordination of outreach activities within the Contractor to be approved by ADHS.
- 4.6.9 Provide staff to conduct outreach activities targeting high risk and underserved populations, including but not limited to homeless and migrants, by developing written and verbal presentations or utilizing available materials to inform the potentially eligible individuals of the availability of WIC Program and explain the benefits of participation
- 4.6.10 When applicable and necessary, provide WIC Clerks to perform administrative support within WIC clinics at the option of the Contractor. Such individuals shall have the minimum of a high school degree or equivalent. They must meet WIC Program competencies. Previous clerical or work experience is desirable.
- 4.6.11 Maintain a record of training provided, monitoring, and observation results of staff competencies in each staff file and/or the state Learning Management System (LMS)
- 4.7. Additional BFPC Service Staffing
 - 4.7.1 Employ a BFPC Program Manager to plan, direct and coordinate general operation of Peer Counseling Program. Ideal candidate will be an International Board Certified Lactation Consultant (IBCLC), have WIC experience, and be familiar with community resources.
 - 4.7.2 Develop a support referral system for peer counselors with community Lactation Consultants, including IBCLCs, if the BFPC Program Manager is not an IBCLC or is unable to fulfill consultation duties for any reason.

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- 4.7.3 Employ Breastfeeding Peer Counselors to provide services. Qualifications for peer counselors shall be previous personal experience with breastfeeding, enthusiasm for helping others to succeed at breastfeeding, and similarities with the WIC population the program serves (including similar age, ethnic background, and language spoken). Exemptions to the peer counselor qualifications must be approved by ADHS before hire. When possible, peer counselors should be current or previous WIC participants

4.8. Staff Training

The Contractor shall:

- 4.8.1 Train new staff as outlined in the ADHS developed new employee training plan.
- 4.8.2 Register and ensure all WIC staff complete all ADHS required WIC on-line courses according to the time requirements set forth by the State through ADHS Learning Management System (LMS) at az.train.org, or state-assigned LMS System in accordance with the ADHS WIC PPM.
- 4.8.3 In addition to state requirements for competency trainings, Local Agencies must implement and adopt the state training standards as reflected in the Nutrition Education Plan and the ADHS WIC PPM. In addition, Local Agencies must participate in any mandatory training provided by ADHS due to changes in policy, procedures, and / or federal regulations.
- 4.8.4 Provide training for all new staff members regarding Civil Rights, Americans with Disabilities Act (ADA), and Voter Registration during their orientation and, annually, provide all staff with training on Civil Rights, ADA, and Voter Registration issues by completing the ADHS LMS courses on Civil Rights and Voter Registration or other courses or trainings that will be required by ADHS.
- 4.8.5 Provide one (1) representative for a maximum of six (6) mandatory, face-to-face, two (2) day meetings or trainings session in Phoenix, as scheduled by ADHS on a yearly basis. These meetings will be opportunities for the Contractor to discuss issues with regards to WIC policies and procedures, federal rules and regulations, and nutrition standards.
- 4.8.6 Provide one (1) representative for a maximum of twelve (12) GoToMeeting WIC Director teleconference meetings to receive information updates on WIC operations, policies and procedures, and other relevant materials being held in lieu of face to face meetings. This may include urgent meetings to discuss current events (e.g. government shutdown) and plan on managing the continuity of operations plan (COOP).
- 4.8.7 Provide one (1) representative to attend a two (2) day trainer conference in Phoenix during each fiscal year for skill and knowledge building.

4.9. Additional BFPC Staff Training:

- 4.9.1 Send the WIC Director or designee and the Breastfeeding Peer Counselor Program Manager to a two (2) day training at the ADHS office in Phoenix during each Peer Counseling Program contract term
- 4.9.2 Provide training to Breastfeeding Peer Counselors using the *Loving Support through Peer Counseling* curriculum within one (1) month of employment
- 4.9.3 Provide continual education and adequate resources to peer counselors. Continual education shall include basic and continuing breastfeeding training, and may include opportunities to shadow lactation consultants, opportunities to meet with other peer counselors, and related training such as counseling skills, adult learning styles, and others

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- 4.9.4 Provide all WIC clinic staff the PowerPoint presentation "Peer Counseling: Making a Difference for WIC Families" through the *Loving Support* curriculum at least once during each Peer Counseling Program contract term

4.10. Data Collection

The Contractor shall:

- 4.10.1 Utilize the hardware, software, and training provided by the Arizona WIC Program to operate the Contractor's portion of the WIC Computer Data System.
- 4.10.2 Complete all data elements required on the WIC Computer Data System as outlined in the WIC PPM.
- 4.10.3 WIC Computer Data System users are required to maintain integrity by keeping their username and password secure. Users shall not share their login information with others.
- 4.10.4 When applicable and necessary to fulfill WIC business functions, local WIC IT shall coordinate with ADHS WIC IT to ensure immediate restoration of technical equipment (i.e. ADHS owned equipment) to, include but not limited to, providing a temporary administrative account.

4.11. Administrative Services

The Contractor shall:

- 4.11.1 In addition to complying with the Guidance for Federal Grant Award Management (Blue Book) and State of Arizona Accounting Manual (SAAM) for Contractors of ADHS Funded programs, AND Chapter 12 and 13 of the Policy and Procedure Manual (PPM):
- 4.11.1.1 Maintain a formal inventory listing or subsidiary record of all equipment owned by the Contractor in an organized manner as a part of the official accounting system. Ensure the non-capital and capital equipment listing includes the following: Tag or ID number, Description, Purchase cost or fair market value on date of donation, Purchase or donation date, Location, Disposal Date, Funding Source, Serial Number, Manufacturer, Model Number, RAM size (if applicable), Specifications (if applicable), and Receipt/Invoice (proof of purchase).
- 4.11.1.2 Provide maintenance and upkeep for all equipment purchased with WIC funds. Maintenance may be provided through the Contractor's own organization or the Contractor may participate in State maintenance contracts where available.
- 4.11.1.3 Obtain written permission from ADHS prior to expending WIC funds to purchase equipment with a value of \$5,000 or more.
- 4.11.1.4 Obtain written permission from ADHS prior to expending WIC funds for the purchase of any asset resource related item: hardware (e.g. computers, printers) or software, regardless of cost as well as their transfer or disposal; Contractors shall not directly dispose of any asset.
- 4.11.1.4.1.1 Once the asset resource related item is purchased ADHS must be provided the information listed in 8.1.1 within ten (10) business days of the item being received
- 4.11.1.4.1.2 Transfer and disposals must follow the procedures outlined in the PPM.
- 4.11.1.4.1.3 Destroyed/Missing/Stolen asset resources must be reported upon discovery no later than ten (10) business days from the time of incident to the assigned ADHS WIC Nutrition Consultant.

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- 4.11.1.5 Submit to ADHS for approval in writing any policy or procedure that deviates from those set forth in the Arizona WIC PPM.
- 4.11.1.6 Update the Contractor information on a timely basis on the WIC Clinic Search administrative website including but not limited to names of CEO/Health Officer, WIC Director, Clinic Supervisors, Nutrition Coordinator, Breastfeeding Coordinator, Training Coordinator, IT lead(s), clinic names, addresses, phone numbers, days and hours of operations, closure days, and other pertinent information for the public to know.
- 4.11.1.7 Provide at least ten (10) weeks written notice when planning on opening, moving, or suspending WIC services at any location.
- 4.11.1.8 Read, timely, all ADHS provided documents and provide requested response, if applicable.
- 4.11.1.9 The Contractor Director shall ensure the State Agency has their most recent contact information in an effort to maintain current and accurate information in the Arizona Health Alert Network (AzHAN) account.
- 4.11.1.10 Maintain records of WIC services in WIC Computer Data System and electronic files of other WIC-related operations and trainings, if applicable, according to the WIC PPM, including but not limited to:
- 4.11.1.10.1 Signed consent for hemoglobin screening and anthropometrics;
 - 4.11.1.10.2 Signed Rights and Obligations for enrolled participant files (active and inactive);
 - 4.11.1.10.3 Eligible participant files (active and inactive);
 - 4.11.1.10.4 Ineligible applicant signatures;
 - 4.11.1.10.5 Monthly Participation Reports by Category and Ethnicity;
 - 4.11.1.10.6 Outreach files;
 - 4.11.1.10.7 Medical documentation;
 - 4.11.1.10.8 Staff files: Trainings attended, skill observations, and Contractor Self Assessments;
 - 4.11.1.10.9 Documentation of dual participation actions;
 - 4.11.1.10.10 Waiting lists (when applicable);
 - 4.11.1.10.11 Reconciliation of eWIC cards;
 - 4.11.1.10.12 Civil rights file to include documentation and resolution of all civil rights complaints;
 - 4.11.1.10.13 Documentation of annual civil rights and voter registration training of all employees; and
 - 4.11.1.10.14 Documentation of WIC Confidentiality and Conflict of Interest forms.

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- 4.11.1.11 Correct and resolve inappropriate or missing participant information, improbable assessment values, duplicate participation, and other quality assurance WIC Computer Data System issues identified in the report provided to the Contractor by ADHS within the timeframes specified in the WIC PPM.
- 4.11.1.12 Correct any regulatory deficiency or discrepancy noted during any of the three program Management Evaluations, Audits, Contractor Compliance Investigations or Program Financial Reviews within sixty (60) calendar days of the date of the audit report unless an extension date is granted by the auditing/reviewing agency and documented.
- 4.11.1.13 Prepare and submit individual electronic copies of the Contractor's Expenditure Reports (CER) for each contracted program according to the instructions and requirements of the WIC PPM.
- 4.11.1.14 Retain all evidentiary documentation (i.e. meal receipts) and submit to ADHS upon request for all expenses charged towards the WIC grant.
- 4.11.1.15 Prepare and submit Final Closeout CER invoice for each contracted program reflecting the cumulative expenditures for a contract year.
- 4.11.1.16 Prepare and submit WIC Contractor Quarterly Cost Summary Reports that matches the amount of each quarter's expenditures respectively in accordance with the requirements in the WIC PPM.
- 4.11.1.17 Prepare and submit an annual evaluation on the annual Contractor's Outreach Plan and a progress report on activities accomplished during the year.
- 4.11.1.18 Prepare and submit an annual evaluation on the Two (2) Year Nutrition Services and Training Plan and a progress report on activities accomplished during the year.
- 4.11.1.19 Prepare and submit an annual Amendment Application in accordance with the individual program requirements that will include budget breakdown of line items and budget justifications of any budget changes.
- 4.11.1.20 Prepare and submit a Contractor Annual Summary of the Contractor self-assessment(s). Contractor self-assessments must be done annually in the year that the Contractor has a Management Evaluation, and semi-annually in the year that they do not have a Management Evaluation.
- 4.11.1.21 Prepare and submit all required plans, reports, and documents in accordance with the requirements in the WIC PPM.

In the event the Arizona WIC Program funding is depleted (e.g. government shutdown) the Contractor may request permission to continue operating their program utilizing local funds. The Contractor will contact the Arizona WIC Director to discuss the feasibility of sustaining clinic operations and participant food redemption at authorized vendor locations. The Contractor may transfer funds to ADHS to ensure continued operation.

4.12. Additional Peer Counseling Administrative Services;

The Contractor Shall:

- 4.12.1 Prepare and submit a Quarterly Report for the Peer Counseling services in the format provided by ADHS.

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4.12.2 Present program logistics, highlights, and data at a Nutrition Programs meeting at a time and location to be determined by ADHS.

5. REFERENCE DOCUMENTS

- 5.1 Arizona WIC Program Policies and Procedures Manual: Refer to http://azdhs.gov/azwic/local_agencies_policyManual.htm
- 5.2 Guidance for Federal Grant Award Management (Blue Book): <https://www.azdhs.gov/documents/prevention/womens-childrens-health/childrens-health/homevisiting/guidance-for-federal-grant-award-management.pdf>
- 5.3 State of Arizona Accounting Manual (SAAM): <https://gao.az.gov/publications/SAAM/>
- 5.4 Federal Regulations: Refer to <https://www.ecfr.gov/cgi-bin/textidx?SID=a42889f84f99d56ec18d77c9b463c613&node=7.4.1.1.1.10&rqn=div5>
- 5.5 7 CFR 246.14: program costs
- 5.6 7 CFR 246.26 (h)(2): notice to applicants and participants about the use and disclosure of confidential applicant and participant information
- 5.7 7 CFR 246.26 (h)(3): implementation of a written agreement and state plan to regulate use and disclosure of confidential applicant and participant information

6. STATE PROVIDED ITEMS

ADHS shall provide the following:

- 6.1 Paper copies of the Arizona WIC Program Policies and Procedures Manual, upon request.
- 6.2 Hardware and software necessary for operation of the WIC Computer Database System.
- 6.3 Learning Management courses for software training and nutrition education courses for staff to complete and/or pass.
- 6.4 Blank eWIC Cards.
- 6.5 Method for submitting expenditures. The ADHS WIC Program Manager or designee will accept and approve the expenditures prior to payment.
- 6.6 Nutrition Education Materials for participants.
- 6.7 Quarterly Report template (electronic) for Peer Counseling Program.
- 6.8 Technical assistance and support.
- 6.9 Breastfeeding material lending and library for Peer Counselor use.
- 6.10 Assistance with International Board Certified Lactation Consultant (IBCLC) career track or advanced lactation consultant education, when appropriate.

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- 6.11 *Loving Support through Peer Counseling* curriculum, which includes the PowerPoint presentation "Peer Counseling: Making a Difference for WIC Families," when appropriate.
- 6.12 Monitoring of WIC Authorized Vendors for compliance with regulations and coordination with tribal and county officials when doing compliance buys for markets on a reservation.
- 6.13 Periodic redemption reports for issued benefits.
- 6.14 Formats for required reports.


7. DELIVERABLES

If applicable, any work plan or other documentation submitted to and accepted by ADHS regarding participation in WIC or BFPC shall be incorporated into this Agreement. Furthermore, any policy or procedure that deviates from those set forth in the Arizona WIC Program Policies and Procedures Manuals requires approval from ADHS prior to implementation.

The Contractor shall submit to ADHS:

- 7.1 Updated copies of Contractor Policies and Procedures that will include coordination and referral procedures with internal and external programs and agencies, i.e. WIC and Peer Counseling;
- 7.2 Prepare and submit individual electronic CER copies invoice for each program, not later than *thirty* (30) days following the end of each report month of the program year;
- 7.3 WIC Contractor Quarterly Cost Summary matching the WIC Contractor's CER expenses not later than *thirty* (30) days following the end of each quarter report of the program year
- 7.4 Final CER invoice for each program not later than *forty-five* (45) days following the end of each Contract year;
- 7.5 WIC Contractor 4th Quarterly Final Cost Summary matching the WIC Contractor's CER expenses, not later than *forty-five* (45) days following the end of each Contract year;
- 7.6 Each Contracted Program's amendment application by the specified deadline for the following contract year which contains the following information:
 - 7.6.1 Request for Caseload to be served;
 - 7.6.2 Request for budget and budget justification;
 - 7.6.3 Updated Participant Nutrition Services and Training Plan for the following contract year and a evaluation of the previous year's activities;
 - 7.6.4 Updated Outreach Plan of each Agreement year and a progress report of previous year's activities; and
 - 7.6.5 Any additional services and other documents specified.
- 7.7 All required responses to federal and state audits and reviews submitted in a timely manner
- 7.8 Additional Peer Counseling Deliverables
 - 7.8.1 Quarterly reports for the Peer Counseling Program to be submitted fifteen (15) days after each quarter of the Agreement year.

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8. PERFORMANCE STANDARDS AND AWARDS

8.1 Upon Agreement finalization, ADHS shall notify the Contractor by certified mail of the assigned caseload, and throughout the term of the Agreement, of any changes to the assigned caseload. The Contractor shall maintain an average monthly participation level in accordance with the following table:

<u>Caseload Assignment</u>	<u>% Maintained</u>
<10,000 participants/month	97%
10,000 to <49,999 participants/month	98%
>50,000 participants/month	99%

8.2 If, after each quarter of the Federal Fiscal Year (October through September), the Contractor has not attained the required participation level, ADHS will have the option of reducing the assigned caseload and resources to the Contractor's current service level. ADHS may also then move the unused caseload and corresponding resources to other WIC Local Agencies in order to fully utilize the resources.

8.3 Local Agencies shall be eligible for one (1) or more of the following awards:

- 8.3.1 Any Contractor which meets one-hundred percent (100%) or more of its caseload assignment for three (3) consecutive months during the previous twelve (12) month period (April 1st through March 31st) may receive an award of \$10,000 added to that agency's following fiscal year WIC funding formula award if the Agreement is extended and additional expenditures can be identified;
- 8.3.2 Utilizing the "Nutrition Discussion Contact" report ran for the last six (6) months preceding time of application (September through February), any Contractor meeting ninety-five percent (95%) of its nutrition education documentation requirement for each participation time period may receive an award of \$10,000 added to that agency's following fiscal year WIC funding formula award if the Agreement is extended and additional expenditures can be identified;
- 8.3.3 The agency with the highest percentage of IENs in the first quarter (Oct 1st through Dec 31st) of each fiscal year within their Assigned Caseload Cohort may be eligible to receive an award added to the following fiscal year WIC funding formula award if the Contract is extended and additional expenditures can be identified. Assigned Caseload Cohorts and award amounts will be determined as follows:

Assigned Caseload Cohort	Award Amount
Less than 2000	\$5,000
2000 - 8000	\$10,000
More than 8000	\$15,000

- 8.3.4 Pursuant to 7 CFR 246. 14, which allows the WIC program to fund nutrition services and administrative expenses, the Performance Awards may be part of the annual funding formula and awarded to the Contractor in the next contract year; and
- 8.3.5 USDA has the option to award breastfeeding performance awards to State Agencies who exceed the national average. If funds are awarded to Arizona, each Contractor program will receive a proration of the amount based upon the number of exclusively nursing women in their Local Agency. It will be a set amount, and may only be used for purposes outlined in the current federal guidelines.

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9. NOTICES, CORRESPONDENCE AND REPORTS

9.1 Notices, correspondence, reports and invoices from the Contractor to ADHS shall be sent to:

Arizona Department of Health Services
150 N. 18th Avenue, Suite 310
Phoenix, Arizona 85007
Attention: WIC Program Manager

9.2 Notice, correspondence and reports from ADHS to the Contractor shall be sent to:
(Contractor to complete)

Contractor: Pima County Health Department

Attention: Sharon Grant

Address: 3950 S. Country Club Road, Suite 100

Address: _____

City, State, ZIP: Tucson, AZ 85714

Phone: 520-724-7842

Fax: _____

Email: Sharon.Grant@pima.gov



INTERGOVERNMENTAL AGREEMENT (IGA)

Amendment

ARIZONA DEPARTMENT OF
HEALTH SERVICES
150 18th Ave Suite 260
Phoenix, Arizona 85007

Contract No.:
CTR040838

IGA Amendment No: 2
Arizona Procurement Portal Amendment No.: 3

Procurement Officer
**Whitni Markotic/Felicia
Marquez**

PRICE SHEET

WIC, BFPC, FMNP AND ONED SERVICES

October 1, 2019 to September 30, 2020

Agency Name: Pima County Health Department

Federal Award Identification Number (FAIN): 197AZAZ7W1003

Federal Award Date: October 1, 2019

CFDA number and name: 10.557 Special Supplemental Nutrition Program for Women, Infants, and Children

WIC Services

Cost Reimbursement Line Item Budget

Account Classification	Amount
Personnel	\$990,156.00
Employee Related Expenses	\$365,522.00
Professional & Outside Services	\$4,500.00
Travel Expense	\$6,691.00
Occupancy Expenses	\$1.00
Other Operating Expenses	\$35,825.00
Capital Expenditures	\$0.00
Indirect Cost	\$0.00
RD Supplement	\$ 150,253.00
Total	\$1,552,948.00

Federal Award Identification Number (FAIN): 197AZAZ1W5003

Federal Award Date: October 1, 2019

CFDA number and name: 10.557 Special Supplemental Nutrition Program for Women, Infants, and Children

Breastfeeding Peer Counseling Services

Cost Reimbursement Line Item Budget

Account Classification	Amount
Personnel	\$79,727.00
Employee Related Expenses	\$15,250.00
Professional & Outside Services	\$0.00
Travel Expense	\$2,876.00
Occupancy Expenses	\$0.00
Other Operating Expenses	\$8,144.00
Capital Expenditures	\$0.00
Indirect Costs	\$1.00
Total	\$105,998.00

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Additional Terms and Conditions:

With prior written approval from the Program Manager, the Contractor is authorized to transfer up to a maximum of ten percent (10%) of the total budget amount between funded line items except for Registered Dietitian Expenses. Transfers of funds are only allowed between funded line items. Transfers exceeding ten percent (10%) or to a non-funded line item shall require an amendment. The Registered Dietitian line item may only be used to fund additional Registered Dietitian position(s) to meet high risk counseling requirements.

Authorization for purchase of services under this Agreement shall be made only upon ADHS issuance of a Purchase Order that is signed by an authorized agent. The Purchase Order will indicate the Agreement number and the dollar amount of funds authorized. The Contractor shall only be authorized to perform services up to the amount on the Purchase Order. ADHS shall not have any legal obligation to pay for services in excess of the amount indicated on the Purchase Order. No further obligation for payment shall exist on behalf of ADHS unless a.) The Purchase Order is modified with an official ADHS Procurement Change Order, and/or b.) An additional Purchase Order is issued for purchase of services under this Contract.

ADHS reserves the right to adjust awards given to local agencies depending on federal dollars received. Adjustments will be at the discretion of ADHS.

Additional WIC Program:

Should additional administrative monies become available through state or federal grants, ADHS may increase the purchase order to increase the number of participants served and increase the total of this contract.

The assigned caseload for FFY 2020 is: 9,550

Additional Breastfeeding Peer Counseling Program:

Allowable costs for the Peer Counseling Program include compensation for peer counselors and designated peer counselor managers/coordinators, and related costs such as training and training materials; telephone expenses for participant contacts (including pager, cell phones and answering machines); travel for training and home and hospital visits; recruitment of peer counseling staff; and the purchase of demonstration materials (e.g., breast pumps for demonstration purposes, videos). Out of state travel must be pre-approved by ADHS. Items and materials for distribution to WIC participants (e.g. breast pumps, breastfeeding aids) are not allowable costs.