

RESOLUTION NO. 2019-301

A RESOLUTION BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, APPROVING THE TERMS, PROVISIONS, CONDITIONS, AND REQUIREMENTS OF AN AGREEMENT BETWEEN THE BOARD OF COUNTY COMMISSIONER OF ST. JOHNS COUNTY, AND THE STATE OF FLORIDA DEPARTMENT OF HEALTH FOR OPERATION OF THE ST. JOHNS COUNTY HEALTH DEPARTMENT; AND AUTHORIZING THE CHAIR TO EXECUTE THE AGREEMENT ON BEHALF OF THE COUNTY.

RECITALS

WHEREAS, pursuant to Section 154.001, Florida Statutes, it is the intent of the State Legislature to promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated county health department services; and

WHEREAS, County Health Departments, including the St. Johns County Health Department, were established throughout the State to satisfy this legislative intent through promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations; and

WHEREAS, the St. Johns County Health Department provides environmental health services, communicable disease control services, and primary care services to eligible County residents; and

WHEREAS, the proposed contract (attached hereto, and incorporated herein) is necessary to ensure coordination between the Florida Department of Health and St. Johns County in operating the St. Johns County Health Department to provide such services from October 1, 2019, through and until September 30, 2020.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA:

Section 1. The above Recitals are incorporated by reference into the body of this Resolution and such Recitals are adopted as findings of fact.

Section 2. The Board of County Commissioners of St. Johns County (Board) hereby approves the terms, provisions, conditions, and requirements of the attached contract between the Board and the State of Florida Department of Health for operation of the St. Johns County Health Department in providing the services

described above from October 1, 2019, through and until September 30, 2020.
The County's contribution of funding under the contract shall not exceed \$486,396.

Section 3. The Board authorizes the Chair to execute the contract, substantially in the form and format as attached, on behalf of the County.

Section 4. To the extent that there are any administrative or typographical errors that do not change the tone, tenor, or concept of this Resolution, then this Resolution may be revised with no further action by the Board.

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County, State of Florida, this 17 day of September, 2019.

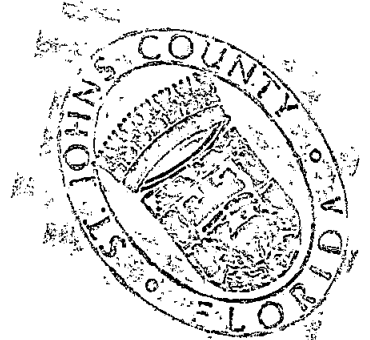
**BOARD OF COUNTY COMMISSIONERS
OF ST. JOHNS COUNTY, FLORIDA**

By: Paul M. Waldron
Paul M. Waldron, Chair

ATTEST: Hunter S. Conrad, Clerk

By: Sam Hatterman
Deputy Clerk

RENDITION DATE 9/23/19



**CONTRACT BETWEEN
ST. JOHNS COUNTY BOARD OF COUNTY COMMISSIONERS
AND
STATE OF FLORIDA DEPARTMENT OF HEALTH
FOR OPERATION OF THE
ST. JOHNS COUNTY HEALTH DEPARTMENT
CONTRACT YEAR 2019-2020**

This contract is made and entered into between the State of Florida, Department of Health ("State") and the St. Johns County Board of County Commissioners ("County"), through their undersigned authorities, effective October 1, 2019.

RECITALS

A. Pursuant to Chapter 154, Florida Statutes, the intent of the legislature is to "promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated county health department services."

B. County Health Departments were created throughout Florida to satisfy this legislative intent through "promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations."

C. St. Johns County Health Department ("CHD") is one of the created County Health Departments.

D. It is necessary for the parties hereto to enter into this contract in order to ensure coordination between the State and the County in the operation of the CHD.

NOW THEREFORE, in consideration of the mutual promises set forth herein, the sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

1. RECITALS. The parties mutually agree that the foregoing recitals are true and correct and incorporated herein by reference.

2. TERM. The parties mutually agree that this contract shall be effective from October 1, 2019, through September 30, 2020, or until a written contract replacing this contract is entered into between the parties, whichever is later, unless this contract is otherwise terminated pursuant to the termination provisions set forth in paragraph 8. below.

3. SERVICES MAINTAINED BY THE CHD. The parties mutually agree that the CHD shall provide those services as set forth on Part III of Attachment II hereof, in order to maintain the following three levels of service pursuant to section 154.01(2), Florida Statutes, as defined below:

a. "Environmental health services" are those services which are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment which may contribute to the occurrence or transmission of disease. Environmental health services shall be supported by available federal, state and local funds

and shall include those services mandated on a state or federal level. Examples of environmental health services include, but are not limited to, food hygiene, safe drinking water supply, sewage and solid waste disposal, swimming pools, group care facilities, migrant labor camps, toxic material control, radiological health, and occupational health.

b. "Communicable disease control services" are those services which protect the health of the general public through the detection, control, and eradication of diseases which are transmitted primarily by human beings. Communicable disease services shall be supported by available federal, state, and local funds and shall include those services mandated on a state or federal level. Such services include, but are not limited to, epidemiology, sexually transmissible disease detection and control, HIV/AIDS, immunization, tuberculosis control and maintenance of vital statistics.

c. "Primary care services" are acute care and preventive services that are made available to well and sick persons who are unable to obtain such services due to lack of income or other barriers beyond their control. These services are provided to benefit individuals, improve the collective health of the public, and prevent and control the spread of disease. Primary health care services are provided at home, in group settings, or in clinics. These services shall be supported by available federal, state, and local funds and shall include services mandated on a state or federal level. Examples of primary health care services include, but are not limited to: first contact acute care services; chronic disease detection and treatment; maternal and child health services; family planning; nutrition; school health; supplemental food assistance for women, infants, and children; home health; and dental services.

4. FUNDING. The parties further agree that funding for the CHD will be handled as follows:

a. The funding to be provided by the parties and any other sources is set forth in Part II of Attachment II hereof. This funding will be used as shown in Part I of Attachment II.

- i. The State's appropriated responsibility (*direct contribution excluding any state fees, Medicaid contributions or any other funds not listed on the Schedule C*) as provided in Attachment II, Part II is an amount not to exceed \$ 2,637,297 (*State General Revenue, State Funds, Other State Funds and Federal Funds listed on the Schedule C*). The State's obligation to pay under this contract is contingent upon an annual appropriation by the Legislature.
- ii. The County's appropriated responsibility (*direct contribution excluding any fees, other cash or local contributions*) as provided in Attachment II, Part II is an amount not to exceed \$486,396 (*amount listed under the "Board of County Commissioners Annual Appropriations section of the revenue attachment*). The County's obligation to pay under this contract is contingent upon an annual appropriation by the Board of County Commissioners.

b. Overall expenditures will not exceed available funding or budget authority, whichever is less, (either current year or from surplus trust funds) in any service category. Unless requested otherwise; any surplus at the end of the term of this contract in the County Health

Department Trust Fund that is attributed to the CHD shall be carried forward to the next contract period.

c. Either party may establish service fees as allowed by law to fund activities of the CHD. Where applicable, such fees shall be automatically adjusted to at least the Medicaid fee schedule.

d. Either party may increase or decrease funding of this contract during the term hereof by notifying the other party in writing of the amount and purpose for the change in funding. If the State initiates the increase/decrease, the CHD will revise the Attachment II and send a copy of the revised pages to the County and the Department of Health, Office of Budget and Revenue Management. If the County initiates the increase/decrease, the County shall notify the CHD. The CHD will then revise the Attachment II and send a copy of the revised pages to the Department of Health, Office of Budget and Revenue Management.

e. The name and address of the official payee to whom payments shall be made is:

County Health Department Trust Fund
St. Johns County
200 San Sebastian View
St. Augustine, FL 32084

f. The County may, at the request of the CHD, make payments on its behalf for organizational assessments by an independent organization which utilizes a nationally recognized standard of excellence. These payments shall count toward the county's contribution in 4.a.ii. above. The purpose of these assessments will be to continuously improve the quality of services for the residents and visitors of St. Johns County. The process itself will identify and evaluate areas of improvement and benchmarks facilitating improved organizational performance and increased efficiencies that will lead to long term sustainability efforts for the CHD.

5. CHD DIRECTOR/ADMINISTRATOR. Both parties agree the director/administrator of the CHD shall be a State employee or under contract with the State and will be under the day-to-day direction of the Deputy Secretary for County Health Systems. The director/administrator shall be selected by the State with the concurrence of the County. The director/administrator of the CHD shall ensure that non-categorical sources of funding are used to fulfill public health priorities in the community and the Long Range Program Plan.

6. ADMINISTRATIVE POLICIES AND PROCEDURES. The parties hereto agree that the following standards should apply in the operation of the CHD:

a. The CHD and its personnel shall follow all State policies and procedures, except to the extent permitted for the use of County purchasing procedures as set forth in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel rules and procedures. Employees will report time in the Health Management System compatible format by program component as specified by the State.

b. The CHD shall comply with all applicable provisions of federal and state laws and regulations relating to its operation with the exception that the use of County purchasing

procedures shall be allowed when it will result in a better price or service and no statewide Department of Health purchasing contract has been implemented for those goods or services. In such cases, the CHD director/administrator must sign a justification therefore, and all County purchasing procedures must be followed in their entirety, and such compliance shall be documented. Such justification and compliance documentation shall be maintained by the CHD in accordance with the terms of this contract. State procedures must be followed for all leases on facilities not enumerated in Attachment IV.

c. The CHD shall maintain books, records and documents in accordance with the Generally Accepted Accounting Principles (GAAP), as promulgated by the Governmental Accounting Standards Board (GASB), and the requirements of federal or state law. These records shall be maintained as required by the Department of Health Policies and Procedures for Records Management and shall be open for inspection at any time by the parties and the public, except for those records that are not otherwise subject to disclosure as provided by law which are subject to the confidentiality provisions of paragraphs 6.i. and 6.k., below. Books, records and documents must be adequate to allow the CHD to comply with the following reporting requirements:

- i.* The revenue and expenditure requirements in the Florida Accounting Information Resource (FLAIR) System;
- ii.* The client registration and services reporting requirements of the minimum data set as specified in the most current version of the Client Information System/Health Management Component Pamphlet;
- iii.* Financial procedures specified in the Department of Health's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda;
- iv.* The CHD is responsible for assuring that all contracts with service providers include provisions that all subcontracted services be reported to the CHD in a manner consistent with the client registration and service reporting requirements of the minimum data set as specified in the Client Information System/Health Management Component Pamphlet.

d. All funds for the CHD shall be deposited in the County Health Department Trust Fund maintained by the state treasurer. These funds shall be accounted for separately from funds deposited for other CHDs and shall be used only for public health purposes in St. Johns County.

e. That any surplus/deficit funds, including fees or accrued interest, remaining in the County Health Department Trust Fund account at the end of the contract year shall be credited/debited to the State or County, as appropriate, based on the funds contributed by each and the expenditures incurred by each. Expenditures will be charged to the program accounts by State and County based on the ratio of planned expenditures in this contract and funding from all sources is credited to the program accounts by State and County. The equity share of any surplus/deficit funds accruing to the State and County is determined each month and at contract year-end. Surplus funds may be applied toward the funding requirements of each participating governmental entity in the following year. However, in

each such case, all surplus funds, including fees and accrued interest, shall remain in the trust fund until accounted for in a manner which clearly illustrates the amount which has been credited to each participating governmental entity. The planned use of surplus funds shall be reflected in Attachment II, Part I of this contract, with special capital projects explained in Attachment V.

f. There shall be no transfer of funds between the three levels of services without a contract amendment unless the CHD director/administrator determines that an emergency exists wherein a time delay would endanger the public's health and the Deputy Secretary for County Health Systems has approved the transfer. The Deputy Secretary for County Health Systems shall forward written evidence of this approval to the CHD within 30 days after an emergency transfer.

g. The CHD may execute subcontracts for services necessary to enable the CHD to carry out the programs specified in this contract. Any such subcontract shall include all aforementioned audit and record keeping requirements.

h. At the request of either party, an audit may be conducted by an independent CPA on the financial records of the CHD and the results made available to the parties within 180 days after the close of the CHD fiscal year. This audit will follow requirements contained in OMB Circular A-133 and may be in conjunction with audits performed by County government. If audit exceptions are found, then the director/administrator of the CHD will prepare a corrective action plan and a copy of that plan and monthly status reports will be furnished to the contract managers for the parties.

i. The CHD shall not use or disclose any information concerning a recipient of services except as allowed by federal or state law or policy.

j. The CHD shall retain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this contract for a period of five (5) years after termination of this contract. If an audit has been initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings.

k. The CHD shall maintain confidentiality of all data, files, and records that are confidential under the law or are otherwise exempted from disclosure as a public record under Florida law. The CHD shall implement procedures to ensure the protection and confidentiality of all such records and shall comply with sections 384.29, 381.004, 392.65 and 456.057, Florida Statutes, and all other state and federal laws regarding confidentiality. All confidentiality procedures implemented by the CHD shall be consistent with the Department of Health Information Security Policies, Protocols, and Procedures. The CHD shall further adhere to any amendments to the State's security requirements and shall comply with any applicable professional standards of practice with respect to client confidentiality.

l. The CHD shall abide by all State policies and procedures, which by this reference are incorporated herein as standards to be followed by the CHD, except as otherwise permitted for some purchases using County procedures pursuant to paragraph 6.b.

m. The CHD shall establish a system through which applicants for services and current clients may present grievances over denial, modification or termination of services. The CHD will advise applicants of the right to appeal a denial or exclusion from services, of failure to take account of a client's choice of service, and of his/her right to a fair hearing to the final governing authority of the agency. Specific references to existing laws, rules or program manuals are included in Attachment I of this contract.

n. The CHD shall comply with the provisions contained in the Civil Rights Certificate, hereby incorporated into this contract as Attachment III.

o. The CHD shall submit quarterly reports to the County that shall include at least the following:

- i. The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report;
- ii. A written explanation to the County of service variances reflected in the year end DE385L1 report if the variance exceeds or falls below 25 percent of the planned expenditure amount for the contract year. However, if the amount of the service specific variance between actual and planned expenditures does not exceed three percent of the total planned expenditures for the level of service in which the type of service is included, a variance explanation is not required. A copy of the written explanation shall be sent to the Department of Health, Office of Budget and Revenue Management.

p. The dates for the submission of quarterly reports to the County shall be as follows unless the generation and distribution of reports is delayed due to circumstances beyond the CHD's control:

- i. March 1, 2020 for the report period October 1, 2019 through December 31, 2019;
- ii. June 1, 2020 for the report period October 1, 2019 through March 31, 2020;
- iii. September 1, 2020 for the report period October 1, 2019 through June 30, 2020; and
- iv. December 1, 2020 for the report period October 1, 2019 through September 30, 2020.

7. FACILITIES AND EQUIPMENT. The parties mutually agree that:

a. CHD facilities shall be provided as specified in Attachment IV to this contract and the County shall own the facilities used by the CHD unless otherwise provided in Attachment IV.

b. The County shall ensure adequate fire and casualty insurance coverage for County-owned CHD offices and buildings and for all furnishings and equipment in CHD offices through either a self-insurance program or insurance purchased by the County.

c. All vehicles will be transferred to the ownership of the County and registered as County vehicles. The County shall ensure insurance coverage for these vehicles is available through either a self-insurance program or insurance purchased by the County. All vehicles will be used solely for CHD operations. Vehicles purchased through the County Health Department Trust Fund shall be sold at fair market value when they are no longer needed by the CHD and the proceeds returned to the County Health Department Trust Fund.

8. TERMINATION.

a. Termination at Will. This contract may be terminated by either party without cause upon no less than one-hundred eighty (180) calendar days notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.

b. Termination Because of Lack of Funds. In the event funds to finance this contract become unavailable, either party may terminate this contract upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.

c. Termination for Breach. This contract may be terminated by one party, upon no less than thirty (30) days notice, because of the other party's failure to perform an obligation hereunder. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery. Waiver of breach of any provisions of this contract shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the terms of this contract.

9. MISCELLANEOUS. The parties further agree:

a. Availability of Funds. If this contract, any renewal hereof, or any term, performance or payment hereunder, extends beyond the State fiscal year beginning July 1, 2020, it is agreed that the performance and payment under this contract are contingent upon an annual appropriation by the Legislature, in accordance with section 287.0582, Florida Statutes. If this contract, or any renewal hereof, or any term, performance or payment hereunder, extends beyond the County fiscal year beginning October 1, 2019, it is agreed that the performance and payment under this contract are contingent upon an annual appropriation by the Board of County Commissioners, in accordance with section 129.07, Florida Statutes.

b. Contract Managers. The name and address of the contract managers for the parties under this contract are as follows:

For the State:

Suzette Bommersbach

For the County:

Michael D. Wanchick

Name
Contract Manager
Title
200 San Sebastian View

St. Augustine, FL. 32084
Address
(904) 209-3250 Ext 1039
Telephone

Name
County Administrator
Title
500 San Sebastian View

St. Augustine, FL. 32084
Address
(904) 209-0530
Telephone

If different contract managers are designated after execution of this contract, the name, address and telephone number of the new representative shall be furnished in writing to the other parties and attached to originals of this contract.

c. Captions. The captions and headings contained in this contract are for the convenience of the parties only and do not in any way modify, amplify, or give additional notice of the provisions hereof.

In WITNESS THEREOF, the parties hereto have caused this eight page contract, with its attachments as referenced, including Attachment I (two pages), Attachment II (six pages), Attachment III (one page), Attachment IV (one page), and Attachment V (one page), to be executed by their undersigned officials as duly authorized effective the 1st day of October, 2019.

**BOARD OF COUNTY COMMISSIONERS
FOR ST. JOHNS COUNTY**

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

SIGNED BY: _____
NAME: Paul M. Waldron
TITLE: Chair
DATE: _____

SIGNED BY: _____
NAME: Scott A. Rivkees, MD
TITLE: State Surgeon General
DATE: _____

ATTESTED TO:

SIGNED BY: _____
NAME: _____
TITLE: _____
DATE: _____

SIGNED BY: _____
NAME: Dawn C. Allicock, MD, MPH
TITLE: CHD Director / Health Officer
DATE: _____

**ADDENDUM I
TO CONTRACT BETWEEN
ST. JOHNS COUNTY BOARD OF COUNTY COMMISSIONERS
AND
STATE OF FLORIDA DEPARTMENT OF HEALTH
FOR OPERATION OF
THE ST. JOHNS COUNTY HEALTH DEPARTMENT
CONTRACT YEAR 2019 – 2020**

This is an Addendum to the Contract between the St. Johns County Board of County Commissioners ("County") and the State of Florida Department of Health ("State") for the operation of the St. Johns County Health Department ("CHD") for the contract year beginning October 1, 2019 ("Agreement").

RECITALS

WHEREAS, the State and County have executed the above-referenced Contract;
and

WHEREAS, the State and County are entering into this Addendum in order to clarify the use and maintenance responsibilities of the parties for the County facility occupied by the CHD, located at 200 San Sebastian View, St. Augustine, Florida.

NOW, THEREFORE, in consideration of the mutual promises and covenants contained herein and for other good and valuable consideration, the receipt and sufficiency of which are hereby conclusively acknowledged, the parties hereto, intending to be legally bound, have agreed as follows:

TERMS

1. Section 4.a.ii. of the Contract identifies the County's appropriated responsibility from Attachment II, Part II as \$486,396. This is the amount the County will contribute to the CHD Trust fund. The parties agree that this amount includes the County's appropriated responsibility for facility services at the San Sebastian View facility. The parties agree that the facility services costs are \$196,200 per year, and that the County may at its discretion invoice the CHD at \$16,350 per month for payment for the facility services costs during the current Contract year.
2. Section 7.a. of the Contract requires the County to own or otherwise provide the facilities used by the State for the CHD. As to the above-reference facility, the County will provide the following facility services:
 - a. Utilities, to include electricity, water, telephone, security system, sewage, and solid waste removal.
 - b. Maintenance, to include exterior building maintenance, repair and replacement (including exterior walls and wall finishes, roofing, gutter systems, window systems, exterior doors and locks, foundation, stairs,

stairwells and landings, loading docks, sidewalks, roadways, parking lot paving and striping, site lighting, fencing and landscaping), mechanical systems maintenance, repair and replacement (including HVAC systems, ductwork, pumps, chillers, air units, controls, fixtures, and fire protection), electrical systems maintenance, repair and replacement (including transformers, switchgear, panels, distribution system, wiring, emergency generators, transfer switch), and plumbing system maintenance, repair and replacement (including domestic water distribution system, backflow prevention, sanitary sewer and drain system, major blockages, toilets, faucets and drinking fountains, irrigation systems), security systems (including monitors, cameras, alarms, access systems), internal building maintenance, repair and replacement (including interior walls, wall finishes, elevators, blinds and other window treatments, painting, ceiling tiles, carpet cleaning, carpet repairs and replacement), pest control, and janitorial/custodial services.

- c. Building signage (including internal and external signage).
- d. Security personnel/service and systems (including security guards, monitors, cameras, alarms and access systems).

IN WITNESS THEREOF, the parties hereto have caused this two page Addendum I to be executed by their undersigned officials as duly authorized effective the 1st day of October, 2019.

**BOARD OF COUNTY COMMISSIONERS
FOR ST. JOHNS COUNTY**

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

SIGNED BY: _____

SIGNED BY: _____

NAME: Paul M. Waldron

NAME: Scott A Rivkees, MD

TITLE: Chair

TITLE: State Surgeon General

DATE: _____

DATE: _____

ATTESTED TO:

SIGNED BY: _____

SIGNED BY: _____

NAME: _____

NAME: Dawn C. Allicock, MD, MPH

TITLE: _____

TITLE: CHD Director /Health Officer

DATE: _____

DATE: _____

ATTACHMENT I
ST. JOHNS COUNTY HEALTH DEPARTMENT
PROGRAM SPECIFIC REPORTING REQUIREMENTS, AND PROGRAMS REQUIRING
COMPLIANCE WITH THE PROVISIONS OF SPECIFIC MANUALS

Some health services must comply with specific program and reporting requirements in addition to the Personal Health Coding Pamphlet (DHP 50-20), Environmental Health Coding Pamphlet (DHP 50-21) and FLAIR requirements because of federal or state law, regulation or rule. If a county health department is funded to provide one of these services, it must comply with the special reporting requirements for that service. The services and the reporting requirements are listed below:

<u>Service</u>	<u>Requirement</u>
1. Sexually Transmitted Disease Program	Requirements as specified in F.A.C. 64D-3, F.S. 381 and F.S. 384.
2. Dental Health	Periodic financial and programmatic reports as specified by the program office.
3. Special Supplemental Nutrition Program for Women, Infants and Children (including the WIC Breastfeeding Peer Counseling Program)	Service documentation and monthly financial reports as specified in DHM 150-24* and all federal, state and county requirements detailed in program manuals and published procedures.
4. Healthy Start/ Improved Pregnancy Outcome	Requirements as specified in the 2007 Healthy Start Standards and Guidelines and as specified by the Healthy Start Coalitions in contract with each county health department.
5. Family Planning	Requirements as specified in Public Law 91-572, 42 U.S.C. 300, et seq., 42 CFR part 59, subpart A, 45 CFR parts 74 & 92, 2 CFR 215 (OMB Circular A-110) OMB Circular A-102, F.S. 381.0051, F.A.C. 64F-7, F.A.C. 64F-16, and F.A.C. 64F-19. Requirements and Guidance as specified in the Program Requirements for Title X Funded Family Planning Projects (Title X Requirements)(2014) and the Providing Quality Family Planning Services (QFP): Recommendations of CDC and the U.S. Office of Population Affairs published on the Office of Population Affairs website. Programmatic annual reports as specified by the program office as specified in the annual programmatic Scope of Work for Family Planning and Maternal Child Health Services, including the Family Planning Annual Report (FPAR), and other minimum guidelines as specified by the Policy Web Technical Assistance Guidelines.
6. Immunization	Periodic reports as specified by the department pertaining to immunization levels in kindergarten and/or seventh grade pursuant to instructions contained in the Immunization Guidelines-Florida Schools, Childcare Facilities and Family Daycare Homes (DH Form 150-615) and Rule 64D-3.046, F.A.C. In addition, periodic reports as specified by the department pertaining to the surveillance/investigation of reportable vaccine-preventable diseases, adverse events, vaccine accountability, and assessment of immunization

ATTACHMENT I (Continued)

- levels as documented in Florida SHOTS and supported by CHD Guidebook policies and technical assistance guidance.
7. Environmental Health Requirements as specified in Environmental Health Programs Manual 150-4* and DHP 50-21*
 8. HIV/AIDS Program Requirements as specified in F.S. 384.25 and F.A.C. 64D-3.030 and 64D-3.031. Case reporting should be on Adult HIV/AIDS Confidential Case Report CDC Form DH2139 and Pediatric HIV/AIDS Confidential Case Report CDC Form DH2140.

Requirements as specified in F.A.C. 64D-2 and 64D-3, F.S. 381 and F.S. 384. Socio-demographic and risk data on persons tested for HIV in CHD clinics should be reported on Lab Request DH Form 1628 in accordance with the Forms Instruction Guide. Requirements for the HIV/AIDS Patient Care programs are found in the Patient Care Contract Administrative Guidelines.
 9. School Health Services Requirements as specified in the Florida School Health Administrative Guidelines (May 2012). Requirements as specified in F.S. 381.0056, F.S. 381.0057, F.S. 402.3026 and F.A.C. 64F-6.
 10. Tuberculosis Tuberculosis Program Requirements as specified in F.A.C. 64D-3 and F.S. 392.
 11. General Communicable Disease Control Carry out surveillance for reportable communicable and other acute diseases, detect outbreaks, respond to individual cases of reportable diseases, investigate outbreaks, and carry out communication and quality assurance functions, as specified in F.A.C. 64D-3, F.S. 381, F.S. 384 and the CHD Epidemiology Guide to Surveillance and Investigations.
 12. Refugee Health Program Programmatic and financial requirements as specified by the program office.

*or the subsequent replacement if adopted during the contract period.

ATTACHMENT II

ST. JOHNS COUNTY HEALTH DEPARTMENT

PART I. PLANNED USE OF COUNTY HEALTH DEPARTMENT TRUST FUND BALANCES

	Estimated State Share of CHD Trust Fund Balance	Estimated County Share of CHD Trust Fund Balance	Total
1. CHD Trust Fund Ending Balance 09/30/19	112341	358345	470686
2. Drawdown for Contract Year October 1, 2019 to September 30, 2020	0	-131914	-131914
3. Special Capital Project use for Contract Year October 1, 2019 to September 30, 2020	0	0	0
4. Balance Reserved for Contingency Fund October 1, 2019 to September 30, 2020	112341	226431	338772

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects, and mobile health vans.

ATTACHMENT II

ST. JOHNS COUNTY HEALTH DEPARTMENT

Part II: Sources of Contributions to County Health Department

October 1, 2019 to September 30, 2020

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
1. GENERAL REVENUE - STATE					
015040 AIDS PATIENT CARE	100,000	0	100,000	0	100,000
015040 AIDS PREVENTION & SURVEILLANCE - GENERAL REVENUE	24,288	0	24,288	0	24,288
015040 CHD - TB COMMUNITY PROGRAM	22,261	0	22,261	0	22,261
015040 DENTAL SPECIAL INITIATIVE PROJECTS	5,978	0	5,978	0	5,978
015040 HEALTHY BEACHES MONITORING	13,003	0	13,003	0	13,003
015040 EPIDEMIOLOGY SURVEILLANCE GENERAL REVENUE	79,035	0	79,035	0	79,035
015040 FAMILY PLANNING GENERAL REVENUE	32,630	0	32,630	0	32,630
015040 PRIMARY CARE PROGRAM	196,126	0	196,126	0	196,126
015040 SCHOOL HEALTH SERVICES - GENERAL REVENUE	160,078	0	160,078	0	160,078
015050 CHD GENERAL REVENUE NON-CATEGORICAL	1,178,391	0	1,178,391	0	1,178,391
GENERAL REVENUE TOTAL	1,811,790	0	1,811,790	0	1,811,790
2. NON GENERAL REVENUE - STATE					
	0	0	0	0	0
NON GENERAL REVENUE TOTAL	0	0	0	0	0
3. FEDERAL FUNDS - STATE					
007000 AIDS DRUG ASSISTANCE PROGRAM ADMIN HQ	18,989	0	18,989	0	18,989
007000 WIC BREASTFEEDING PEER COUNSELING PROG	50,000	0	50,000	0	50,000
007000 COASTAL BEACH WATER QUALITY MONITORING	5,808	0	5,808	0	5,808
007000 COMPREHENSIVE COMMUNITY CARDIO - PHBG	35,000	0	35,000	0	35,000
007000 FAMILY PLANNING TITLE X - GRANT	22,878	0	22,878	0	22,878
007000 HURRICANE CRISIS COAG FOOD AND WATER	1,000	0	1,000	0	1,000
007000 IMMUNIZATION ACTION PLAN	26,701	0	26,701	0	26,701
007000 MCH SPEC PRJ SOCIAL DETERMINANTS HLTH COMM EDU	12,014	0	12,014	0	12,014
007000 BASE COMMUNITY PREPAREDNESS CAPABILITY	130,529	0	130,529	0	130,529
007000 BASE EMERGENCY OPERATIONS COORDINATON (ESF8)	40,078	0	40,078	0	40,078
007000 WIC PROGRAM ADMINISTRATION	458,097	0	458,097	0	458,097
015075 SUPPLEMENTAL SCHOOL HEALTH	24,413	0	24,413	0	24,413
FEDERAL FUNDS TOTAL	825,507	0	825,507	0	825,507
4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE					
001020 CHD STATEWIDE ENVIRONMENTAL FEES	119,750	0	119,750	0	119,750
001092 CHD STATEWIDE ENVIRONMENTAL FEES	206,500	0	206,500	0	206,500
001206 ON SITE SEWAGE DISPOSAL PERMIT FEES	13,000	0	13,000	0	13,000
001206 SANITATION CERTIFICATES (FOOD INSPECTION)	2,600	0	2,600	0	2,600
001206 SEPTIC TANK RESEARCH SURCHARGE	3,250	0	3,250	0	3,250
001206 SEPTIC TANK VARIANCE FEES 50%	250	0	250	0	250
001206 PUBLIC SWIMMING POOL PERMIT FEES-10% HQ TRANSFER	7,250	0	7,250	0	7,250
001206 DRINKING WATER PROGRAM OPERATIONS	250	0	250	0	250
001206 TANNING FACILITIES	150	0	150	0	150
001206 MOBILE HOME & RV PARK FEES	1,000	0	1,000	0	1,000
FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL	354,000	0	354,000	0	354,000

ATTACHMENT II

ST. JOHNS COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

October 1, 2019 to September 30, 2020

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
5. OTHER CASH CONTRIBUTIONS - STATE:					
	0	0	0	0	0
090001 DRAW DOWN FROM PUBLIC HEALTH UNIT	0	0	0	0	0
OTHER CASH CONTRIBUTION TOTAL	0	0	0	0	0
6. MEDICAID - STATE/COUNTY:					
001057 CHD CLINIC FEES	0	41,500	41,500	0	41,500
001148 CHD CLINIC FEES	0	200,000	200,000	0	200,000
MEDICAID TOTAL	0	241,500	241,500	0	241,500
7. ALLOCABLE REVENUE - STATE:					
018000 CHD CLINIC FEES	1,825	0	1,825	0	1,825
018000 CHD LOCAL ENVIRONMENTAL FEES	75	0	75	0	75
031005 GENERAL CLINIC RABIES SERVICES & DRUG PURCHASES	25,000	0	25,000	0	25,000
ALLOCABLE REVENUE TOTAL	26,900	0	26,900	0	26,900
8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE					
ADAP	0	0	0	416,321	416,321
PHARMACY DRUG PROGRAM	0	0	0	4,398	4,398
WIC PROGRAM	0	0	0	1,807,567	1,807,567
BUREAU OF PUBLIC HEALTH LABORATORIES	0	0	0	23,919	23,919
IMMUNIZATIONS	0	0	0	411,619	411,619
OTHER STATE CONTRIBUTIONS TOTAL	0	0	0	2,663,824	2,663,824
9. DIRECT LOCAL CONTRIBUTIONS - BCC/TAX DISTRICT					
008005 CHD LOCAL REVENUE & EXPENDITURES	0	486,396	486,396	0	486,396
DIRECT COUNTY CONTRIBUTIONS TOTAL	0	486,396	486,396	0	486,396
10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY					
001073 CHD CLINIC FEES	0	11,000	11,000	0	11,000
001073 CURANT 340B REVENUE AND EXPENSE TRACKING	0	365,000	365,000	0	365,000
001077 CHD CLINIC FEES	0	33,255	33,255	0	33,255
001077 GENERAL CLINIC RABIES SERVICES & DRUG PURCHASES	0	1,500	1,500	0	1,500
001094 CHD LOCAL ENVIRONMENTAL FEES	0	234,850	234,850	0	234,850
001110 VITAL STATISTICS CERTIFIED RECORDS	0	155,000	155,000	0	155,000
FEES AUTHORIZED BY COUNTY TOTAL	0	800,605	800,605	0	800,605
11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY					
001029 CHD CLINIC FEES	0	511,000	511,000	0	511,000
001029 GENERAL CLINIC RABIES SERVICES & DRUG PURCHASES	0	250	250	0	250
001090 CHD CLINIC FEES	0	3,275	3,275	0	3,275
007010 RYAN WHITE TITLE III - DIRECT TO CHD	0	365,076	365,076	0	365,076
010300 INSPECTIONS OF SUMMER FEEDING PROGRAM - DOE	0	1,650	1,650	0	1,650
090002 DRAW DOWN FROM PUBLIC HEALTH UNIT	0	131,914	131,914	0	131,914

ATTACHMENT II

ST. JOHNS COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

October 1, 2019 to September 30, 2020

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL	0	1,013,165	1,013,165	0	1,013,165
12. ALLOCABLE REVENUE - COUNTY					
018000 CHD CLINIC FEES	0	1,825	1,825	0	1,825
018000 CHD LOCAL ENVIRONMENTAL FEES	0	75	75	0	75
031005 GENERAL CLINIC RABIES SERVICES & DRUG PURCHASES	0	25,000	25,000	0	25,000
COUNTY ALLOCABLE REVENUE TOTAL	0	26,900	26,900	0	26,900
13. BUILDINGS - COUNTY					
ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	0	0
OTHER (Specify)	0	0	0	0	0
UTILITIES	0	0	0	0	0
BUILDING MAINTENANCE	0	0	0	0	0
GROUNDS MAINTENANCE	0	0	0	0	0
INSURANCE	0	0	0	0	0
OTHER (Specify)	0	0	0	0	0
OTHER (Specify)	0	0	0	0	0
BUILDINGS TOTAL	0	0	0	0	0
14. OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST FUND - COUNTY					
EQUIPMENT / VEHICLE PURCHASES	0	0	0	0	0
VEHICLE INSURANCE	0	0	0	0	0
VEHICLE MAINTENANCE	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTIONS TOTAL	0	0	0	0	0
GRAND TOTAL CHD PROGRAM	3,018,197	2,568,566	5,586,763	2,663,824	8,250,587

ATTACHMENT II

ST. JOHNS COUNTY HEALTH DEPARTMENT

Part III, Planned Staffing, Clients, Services and Expenditures By Program Service Area Within Each Level of Service

October 1, 2019 to September 30, 2020

	Quarterly Expenditure Plan				1st	2nd	3rd	4th	State	County	Grand Total
	FTE's (0.00)	Clients Units	Services/ Visits	(Whole dollars only)							
A. COMMUNICABLE DISEASE CONTROL:											
IMMUNIZATION (101)	2.17	1,797	2,126	45,065	52,562	52,562	45,065	51,701	143,553	195,254	
SEXUALLY TRANS. DIS. (102)	4.49	474	831	74,372	86,745	86,745	74,372	239,969	82,265	322,234	
HIV/AIDS PREVENTION (03A1)	1.57	0	157	32,441	37,839	37,839	32,441	0	140,560	140,560	
HIV/AIDS SURVEILLANCE (03A2)	0.18	0	2,922	2,585	3,015	3,015	2,586	11,201	0	11,201	
HIV/AIDS PATIENT CARE (03A3)	8.86	232	1,215	177,913	207,514	207,514	177,912	170,337	600,516	770,853	
ADAP (03A4)	0.43	2,193	5,031	6,196	7,227	7,227	6,197	26,847	0	26,847	
TUBERCULOSIS (104)	1.68	56	348	31,479	36,716	36,716	31,479	136,390	0	136,390	
COMM. DIS. SURV. (106)	4.69	0	9,416	83,415	97,294	97,294	83,415	120,113	241,305	361,418	
HEPATITIS (109)	0.00	0	0	0	0	0	0	0	0	0	
PREPAREDNESS AND RESPONSE (116)	2.50	0	0	41,991	48,977	48,977	41,991	181,936	0	181,936	
REFUGEE HEALTH (118)	0.00	0	0	0	0	0	0	0	0	0	
VITAL RECORDS (180)	2.62	7,605	21,225	38,239	44,602	44,602	38,239	0	165,682	165,682	
COMMUNICABLE DISEASE SUBTOTAL	29.19	12,357	43,271	533,696	622,491	622,491	533,697	938,494	1,373,881	2,312,375	
B. PRIMARY CARE:											
CHRONIC DISEASE PREVENTION PRO (210)	0.25	0	0	4,654	5,428	5,428	4,654	20,164	0	20,164	
WIC (21W1)	8.62	3,901	26,961	135,178	157,669	157,669	135,179	585,695	0	585,695	
TOBACCO USE INTERVENTION (212)	0.00	0	0	0	0	0	0	0	0	0	
WIC BREASTFEEDING PEER COUNSELING (21W2)	1.19	0	2,256	16,243	18,946	18,946	16,244	70,379	0	70,379	
FAMILY PLANNING (223)	3.97	370	1,025	67,382	78,593	78,593	67,382	258,450	33,500	291,950	
IMPROVED PREGNANCY OUTCOME (225)	0.53	174	197	7,495	8,741	8,741	7,495	0	32,472	32,472	
HEALTHY START PRENATAL (227)	0.00	0	0	0	0	0	0	0	0	0	
COMPREHENSIVE CHILD HEALTH (229)	1.33	33	33	25,079	29,252	29,252	25,079	108,662	0	108,662	
HEALTHY START CHILD (231)	0.00	0	0	0	0	0	0	0	0	0	
SCHOOL HEALTH (234)	0.60	0	3,599,946	42,049	49,045	49,045	42,049	182,188	0	182,188	
COMPREHENSIVE ADULT HEALTH (237)	1.14	342	456	22,625	26,389	26,389	22,624	98,022	5	98,027	
COMMUNITY HEALTH DEVELOPMENT (238)	2.65	0	0	41,027	47,852	47,852	41,027	177,758	0	177,758	
DENTAL HEALTH (240)	12.51	3,798	6,842	228,439	266,446	266,446	228,438	24,942	964,827	989,769	
PRIMARY CARE SUBTOTAL	32.79	8,618	3,637,716	590,171	688,361	688,361	590,171	1,526,260	1,030,804	2,557,064	
C. ENVIRONMENTAL HEALTH:											
Water and Onsite Sewage Programs											
COSTAL BEACH MONITORING (347)	0.06	100	102	1,214	1,416	1,416	1,214	5,260	0	5,260	
LIMITED USE PUBLIC WATER SYSTEMS (357)	1.31	135	909	19,236	22,437	22,437	19,237	83,138	209	83,347	
PUBLIC WATER SYSTEM (358)	0.00	0	0	0	0	0	0	0	0	0	
PRIVATE WATER SYSTEM (359)	0.06	24	30	1,333	1,554	1,554	1,333	0	5,774	5,774	
ONSITE SEWAGE TREATMENT & DISPOSAL (361)	3.76	1,173	2,068	51,460	60,022	60,022	51,459	136,436	86,527	222,963	
Group Total	5.19	1,432	3,109	73,243	85,429	85,429	73,243	224,834	92,510	317,344	
Facility Programs											
TATTOO FACILITY SERVICES (344)	0.00	0	0	0	0	0	0	0	0	0	

ATTACHMENT II

ST. JOHNS COUNTY HEALTH DEPARTMENT

**Part III: Planned Staffing, Clients, Services and Expenditures By Program Service Area Within Each Level of Service
October 1, 2019 to September 30, 2020**

	FTE's (0.00)	Clients Units	Services/ Visits	Quarterly Expenditure Plan				State	County	Grand Total
				1st	2nd (Whole dollars only)	3rd	4th			
FOOD HYGIENE (348)	1.29	212	673	22,450	26,186	26,186	22,450	94,963	2,309	97,272
BODY PIERCING FACILITIES SERVICES (349)	0.00	0	0	0	0	0	0	0	0	0
GROUP CARE FACILITY (351)	0.45	206	363	6,837	7,975	7,975	6,836	10,589	19,034	29,623
MIGRANT LABOR CAMP (352)	0.17	20	122	2,795	3,261	3,261	2,795	12,111	1	12,112
HOUSING & PUB. BLDG. (353)	0.00	0	0	0	0	0	0	0	0	0
MOBILE HOME AND PARK (354)	0.17	134	223	2,340	2,729	2,729	2,340	10,137	1	10,138
POOLS/BATHING PLACES (360)	2.79	726	4,409	38,566	44,983	44,983	38,567	117,080	50,019	167,099
BIOMEDICAL WASTE SERVICES (364)	0.00	0	0	0	0	0	0	0	0	0
TANNING FACILITY SERVICES (369)	0.34	153	272	5,151	6,007	6,007	5,151	22,314	2	22,316
Group Total	5.21	1,451	6,062	78,139	91,141	91,141	78,139	267,194	71,366	338,560
Groundwater Contamination										
STORAGE TANK COMPLIANCE SERVICES (355)	0.00	0	0	0	0	0	0	0	0	0
SUPER ACT SERVICES (356)	0.00	0	0	0	0	0	0	0	0	0
Group Total	0.00	0	0	0	0	0	0	0	0	0
Community Hygiene										
COMMUNITY ENVIR. HEALTH (345)	0.00	0	0	0	0	0	0	0	0	0
INJURY PREVENTION (346)	0.00	0	0	0	0	0	0	0	0	0
LEAD MONITORING SERVICES (350)	0.00	0	0	0	0	0	0	0	0	0
PUBLIC SEWAGE (362)	0.00	0	0	0	0	0	0	0	0	0
SOLID WASTE DISPOSAL SERVICE (363)	0.00	0	0	0	0	0	0	0	0	0
SANITARY NUISANCE (365)	0.51	260	333	7,523	8,780	8,780	7,523	32,612	4	32,616
RABIES SURVEILLANCE (366)	0.00	0	0	0	0	0	0	0	0	0
ARBORVIRUS SURVEIL. (367)	0.00	0	0	0	0	0	0	0	0	0
RODENT/ARTHROPOD CONTROL (368)	0.00	0	0	0	0	0	0	0	0	0
WATER POLLUTION (370)	0.00	0	0	0	0	0	0	0	0	0
INDOOR AIR (371)	0.00	0	0	0	0	0	0	0	0	0
RADIOLOGICAL HEALTH (372)	0.00	0	0	0	0	0	0	0	0	0
TOXIC SUBSTANCES (373)	0.00	0	0	0	0	0	0	0	0	0
Group Total	0.51	260	333	7,523	8,780	8,780	7,523	32,612	4	32,616
ENVIRONMENTAL HEALTH SUBTOTAL	10.91	3,143	9,504	158,910	185,350	185,350	158,910	524,640	163,880	688,520
D. NON-OPERATIONAL COSTS:										
NON-OPERATIONAL COSTS (599)	0.00	0	0	0	0	0	0	0	0	0
ENVIRONMENTAL HEALTH SURCHARGE (399)	0.00	0	0	6,417	7,484	7,484	6,417	27,802	0	27,802
MEDICAID BUYBACK (611)	0.00	0	0	231	269	269	231	1,000	0	1,000
NON-OPERATIONAL COSTS SUBTOTAL	0.00	0	0	6,648	7,753	7,753	6,648	28,802	0	28,802
TOTAL CONTRACT	72.89	24,118	3,690,491	1,289,425	1,503,955	1,503,955	1,289,426	3,018,196	2,568,565	5,586,761

ATTACHMENT III
ST. JOHNS COUNTY HEALTH DEPARTMENT
CIVIL RIGHTS CERTIFICATE

The applicant provides this assurance in consideration of and for the purpose of obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance to programs or activities receiving or benefiting from federal financial assistance. The provider agrees to complete the Civil Rights Compliance Questionnaire, DH Forms 946 A and B (or the subsequent replacement if adopted during the contract period), if so requested by the department.

The applicant assures that it will comply with:

1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C., 2000 Et seq., which prohibits discrimination on the basis of race, color or national origin in programs and activities receiving or benefiting from federal financial assistance.
2. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of handicap in programs and activities receiving or benefiting from federal financial assistance.
3. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits discrimination on the basis of sex in education programs and activities receiving or benefiting from federal financial assistance.
4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
5. The Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.
6. All regulations, guidelines and standards lawfully adopted under the above statutes. The applicant agrees that compliance with this assurance constitutes a condition of continued receipt of or benefit from federal financial assistance, and that it is binding upon the applicant, its successors, transferees, and assignees for the period during which such assistance is provided. The applicant further assures that all contracts, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the applicant understands that the grantor may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

Attachment IV

Fiscal Year - 2019 - 2020

St. Johns County Health Department

Facilities Utilized by the County Health Department

Complete Location <small>(Street Address, City, Zip)</small>	Facility Description And Official Building Name (if applicable) <small>(Admin, Clinic, Env'n Hlth, etc.)</small>	Lease/ Agreement Number	Type of Agreement <small>(Private Lease thru State or County, other - please define)</small>	Complete Legal Name of Owner	SQ Feet	Employee Count <small>(FTE/OPS/ Contract)</small>
200 San Sebastian View, St. Augustine, FL. 32084	Main CHD Facility		Private Lease thru County	St. Johns County BOCC	46,000	51
4040 Lewis Speedway, St. Augustine, FL. 32084	Env Health		Private Lease thru County	St. Johns County BOCC	~1000	1

**ATTACHMENT V
ST. JOHNS COUNTY HEALTH DEPARTMENT
SPECIAL PROJECTS SAVINGS PLAN**

CASH RESERVED OR ANTICIPATED TO BE RESERVED FOR PROJECTS

<u>CONTRACT YEAR</u>	<u>STATE</u>	<u>COUNTY</u>	<u>TOTAL</u>
2018-2019*	\$ _____ 0	\$ _____ 0	\$ _____ 0
2019-2020**	\$ _____ 0	\$ _____ 0	\$ _____ 0
2020-2021***	\$ _____ 0	\$ _____ 0	\$ _____ 0
2021-2022***	\$ _____ 0	\$ _____ 0	\$ _____ 0
PROJECT TOTAL	\$ _____ 0	\$ _____ 0	\$ _____ 0

SPECIAL PROJECTS CONSTRUCTION/RENOVATION PLAN

PROJECT NUMBER: _____

PROJECT NAME: _____

LOCATION/ADDRESS: _____

PROJECT TYPE: NEW BUILDING _____ ROOFING _____
 RENOVATION _____ PLANNING STUDY _____
 NEW ADDITION _____ OTHER _____

SQUARE FOOTAGE: _____ 0

PROJECT SUMMARY: *Describe scope of work in reasonable detail.*

START DATE (initial expenditure of funds) : _____

COMPLETION DATE: _____

DESIGN FEES: \$ _____ 0

CONSTRUCTION COSTS: \$ _____ 0

FURNITURE/EQUIPMENT: \$ _____ 0

TOTAL PROJECT COST: \$ _____ 0

COST PER SQ FOOT: \$ _____ 0

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects and mobile health vans.

* Cash balance as of 9/30/19

** Cash to be transferred to FCO account.

*** Cash anticipated for future contract years.