

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 COMMISSIONERS 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.

WHEREAS, pursuant to Chapter 154, Florida Statutes, the intent of the State 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; and

WHEREAS, County Health Departments were created 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 (CHD) is one of the created County Health Departments that 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, 2023, through and until September 30, 2024.

NOW THEREFORE, BE IT RESOLVED by the Board of County Commissioners of St. Johns County, Florida:

- 1. The above recitals are hereby adopted as legislative findings of fact and incorporated herein.
- 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, 2023, through and until September 30, 2024. The County's contribution of funding under the contract shall not exceed \$714,471.
- 3. The Board authorizes the Chair to execute the contract, substantially in the form and format as attached, on behalf of the County.
- 4. To the extent, there are typographical and/or administrative errors and/or omissions that do not change the tone, tenor, or concept of this resolution, this resolution may be revised without subsequent approval by the Board of County Commissioners.

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County, Florida, this 10 Hz day of 2023.

Rendition Date SEP 2 1 2023

BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA

By:

Christian Whitehurst, Chair

ATTEST: Brandon J. Patty, Clerk of the Circuit Court and Comptroller

MADI al By: Deputy Clerk

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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 2023-2024

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, 2023. State and County are jointly referred to as the "parties".

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 the "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 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 is hereby acknowledged, the parties hereto agree as follows:

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

2. <u>TERM</u>. The parties mutually agree that this contract shall be effective from October 1, 2023, through September 30, 2024, or until a written contract replacing this contract is entered into between the parties, whichever is later, unless this contract is otherwise terminated according to the termination provisions outlined in paragraph 8. below.

3. <u>SERVICES MAINTAINED BY THE CHD</u>. The parties mutually agree that the CHD shall provide mose services as outlined in Part III of Attachment II hereof, 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 that are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment that 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 that protect the health of the general public through the detection, control, and eradication of diseases that 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 outlined 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 \$3,354,973 (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 \$<u>714,471</u> (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 the 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 or decrease, the CHD will revise Attachment II and send a copy of the revised pages to the County and the State's Office of Budget and Revenue Management. If the County initiates the increase or decrease, the County shall notify the CHD in writing. The CHD will then revise Attachment II and send a copy of the revised pages to the State's 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, Ste 1322 St. Augustine, FL 32084

5. <u>CHD DIRECTOR or ADMINISTRATOR</u>. Both parties agree the director or 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 State's Deputy Secretary for County Health Systems. The director or administrator shall be selected by the State with the concurrence of the County. The director or 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. <u>ADMINISTRATIVE POLICIES AND PROCEDURES</u>. 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 outlined in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel laws, 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 purchasing contract has been implemented for those goods or services. In such cases, the CHD director or 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 following 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 following the Generally Accepted Accounting Principles, as promulgated by the Governmental Accounting Standards

Board, and the requirements of federal or state law. These records shall be maintained as required by the State's 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 is 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 System; and
- *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; and
- *iii.* Financial procedures specified in the State's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda; and
- *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 or 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 or 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 or deficit funds accruing to the State and County is determined each month and at the contract year-end. Surplus funds may be applied toward the funding requirements of each party 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 that clearly illustrates the amount which has been credited to each party. 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 or administrator determines that an emergency exists wherein a time delay would endanger the public's health and the State's Deputy Secretary for County Health Systems have approved the transfer. The State's 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 certified public accountant 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, as revised, and may be in conjunction with audits performed by the County government. If audit exceptions are found, then the director or 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 five years after termination of this contract. If an audit has been initiated and audit findings have not been resolved at the end of five years, the records shall be retained until the resolution of the audit findings.

k. The CHD shall maintain the 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 State's 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 concerning client confidentiality.

I. 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.

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 right to a fair hearing to the final governing authority of the CHD. 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 Compliance and Non-Discrimination 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; and
- ii. A written explanation to the County of service variances reflected in the yearend 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 State's 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 are delayed due to circumstances beyond the CHD's control:

- *i.* March 1, 2024, for the reporting period of October 1, 2023, through December 31, 2023; and
- *ii.* June 1, 2024, for the reporting period of October 1, 2023, through March 31, 2024; and
- *iii.* September 1, 2024, for the reporting period of October 1, 2023 through June 30, 2024; and
- *iv.* December 1, 2024, for the reporting period of October 1, 2023 through September 30, 2024.
- 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 Countyowned CHD offices and buildings and 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. <u>Termination at Will</u>. This contract may be terminated by either party without cause upon no less than 180 calendar days' notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties.

b. <u>Termination Because of Lack of Funds</u>. In the event funds to finance this contract become unavailable, either party may terminate this contract upon no less than 24 hours' notice.

c. <u>Termination for Breach</u>. This contract may be terminated by either party for a material breach of an obligation hereunder, upon no less than 30 days' notice. Waiver of a 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. <u>Availability of Funds</u>. If this contract, any renewal hereof, or any term, performance, or payment hereunder, extends beyond the State fiscal year beginning July 1, 2024, it is agreed that the performance and payment under this contract are contingent upon an annual appropriation by the Legislature, under 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, 2024, 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. <u>Contract Managers</u>. The name and addresses of the contract managers for the parties under this contract are as follows:

For the State:

For the County:

| Jacob B. Quigley | Joy Andrews |
|-------------------------------------|--------------------------------------------|
| Name | Name |
| Business Manager | Interim County Administrator |
| Title | Title |
| 200 San Sebastian View | 500 San Sebastian View |
| St. Augustine, FL. 32084 Address | <u>St. Augustine, FL. 32084</u> Address |
| Jacob.Quigley@FLHealth.gov | jqandrews@sjcfl.us |
| Email Address | Email Address |
| (904) 506-6111 | (904) 209-0530 |
| Telephone | Telephone |

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

c. <u>Captions</u>. 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.

d. <u>Notices</u>. Any notices provided under this contract must be delivered by certified mail, return receipt requested, in person with proof of delivery, or by email to the email address of the respective party identified in Section 9.b., above.

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 2023.

BOARD OF COUNTY COMMISSIONERS FOR ST. JOHNS COUNTY

STATE OF FLORIDA DEPARTMENT OF HEALTH

| SIGNED BY: | SIGNED BY: |
|--------------|---------------------------------------|
| NAME: | NAME: Joseph A. Ladapo, M.D., Ph.D. |
| TITLE: | TITLE: State Surgeon General |
| DATE: | DATE: |
| ATTESTED TO: | |
| SIGNED BY: | SIGNED BY: |
| NAME: | NAME: Shane Lockwood |
| TITLE: | TITLE: Administrator / Health Officer |
| DATE: | DATE: |

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:

| | Service | Requirement |
|----|----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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 Nomes (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 th | e subsequent replacement if adopted during the | e contract period. |

*or equent replacement if adopted during the contract pe

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 09/30/23 | | 616494 | 532452 | 1148926 |
| 2. | Drawdown for Contract Year October 1, 2023 to September 30, 2024 | - | 616494 | -394537 | -1011031 |
| 3. | Special Capital Project use for Contract Year October 1, 2023 to September 30, 2024 | | 0 | 0 | 0 |
| 4. | Balance Reserved for Contingency Fund October 1, 2023 to September 30, 2024 | | 0 | 137895 | 137895 |

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

Attachment_II_Part_I - Page 1 of 1

ST. JOHNS COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

| | 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 | 33,379 | 0 | 33,379 | 0 | 33,379 |
| 015040 EPIDEMIOLOGY SURVEILLANCE GENERAL REVENUE | 79,035 | 0 | 79,035 | 0 | 79,035 |
| 015040 FAMILY PLANNING GENERAL REVENUE | 54,061 | 0 | 54,061 | 0 | 54,061 |
| 015040 PRIMARY CARE PROGRAM | 196,072 | 0 | 196,072 | 0 | 196,072 |
| 015040 RACIAL & ETHNIC DISPARITIES · CHD EXPENSES | 40,000 | 0 | 40,000 | 0 | 40,000 |
| 015040 SCHOOL HEALTH SERVICES | 160,078 | 0 | 160,078 | 0 | 160,078 |
| 015050 CHD GENERAL REVENUE NON-CATEGORICAL | 1,459,718 | 0 | 1,459,718 | 0 | 1,459,718 |
| GENERAL REVENUE TOTAL | 2,146,631 | 0 | 2,146,631 | 0 | 2,146,631 |
| 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 | 38,485 | 0 | 38,485 | 0 | 38,485 |
| 007000 COASTAL BEACH WATER QUALITY MONITORING | 8,652 | 0 | 8,652 | 0 | 8,652 |
| 007000 COMPREHENSIVE COMMUNITY CARDIO · PHBG | 35,000 | 0 | 35,000 | 0 | 35,000 |
| 007000 STRENGTHENING STD PREVENTION AND CONTROL | 47,880 | 0 | 47,880 | 0 | 47,880 |
| 007000 FAMILY PLANNING TITLE X · GRANT | 24,777 | 0 | 24,777 | 0 | 24,777 |
| 007000 HEALTH DISPARITIES GRANT COVID-19 | 150,100 | 0 | 150,100 | 0 | 150,100 |
| 007000 PUBLIC HLTH INFRASTRUCTURE & WORKFORCE/CENTRAL 1 | 19,343 | 0 | 19,343 | 0 | 19,343 |
| 007000 IMMUNIZATION ACTION PLAN | 36,685 | 0 | 36,685 | 0 | 36,685 |
| 007000 MCH SPECIAL PRJCT UNPLANNED PREGNANCY | 4,000 | 0 | 4,000 | 0 | 4,000 |
| 007000 MCH SPECIAL PROJECT PRAMS | 3,039 | 0 | 3,039 | 0 | 3,039 |
| 007000 BASE COMMUNITY PREPAREDNESS CAPABILITY | 127,217 | 0 | 127,217 | 0 | 127,217 |
| 007000 BASE PUB HLTH SURVEILLANCE & EPI INVESTIGATION | 46,096 | 0 | 46,096 | 0 | 46,096 |
| 007000 POOL SAFELY GRANT PROGRAM | 5,000 | 0 | 5,000 | 0 | 5,000 |
| 007000 WIC PROGRAM ADMINISTRATION | 412,306 | 0 | 412,306 | 0 | 412,306 |
| 015075 SCHOOL HEALTH SERVICES | 24,413 | 0 | 24,413 | 0 | 24,413 |
| EDERAL FUNDS TOTAL | 1,001,982 | 0 | 1,001,982 | 0 | 1,001,982 |
| FEES ASSESSED BY STATE OR FEDERAL RULES - STATE | | | | | |
| 001020 CHD STATEWIDE ENVIRONMENTAL FEES | 90,300 | 0 | 90,300 | 0 | 90,300 |
| 001092 ON SITE SEWAGE DISPOSAL PERMIT FEES | 192,450 | 0 | 192,450 | 0 | 192,450 |
| 001092 CHD STATEWIDE ENVIRONMENTAL FEES | 3,550 | 0 | 3,550 | 0 | 3,550 |
| 001206 ON SITE SEWAGE DISPOSAL PERMIT FEES | 17,890 | 0 | 17,890 | 0 | 17,890 |
| 001206 SANITATION CERTIFICATES (FOOD INSPECTION) | 2,800 | 0 | 2,800 | 0 | 2,800 |
| 001206 SEPTIC TANK RESEARCH SURCHARGE | 3,500 | 0 | 3,500 | 0 | 3,500 |
| 001206 SEPTIC TANK VARIANCE FEES 50% | 125 | 0 | 125 | 0 | 125 |
| 001206 PUBLIC SWIMMING POOL PERMIT FEES-10% HQ TRANSFER | 5,500 | 0 | 5,500 | 0 | 5,500 |

ST. JOHNS COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

| | State CHD Trust Fund (cash) | County CHD Trust Fund | Total CHD Trust Fund (cash) | Other Contribution | Total |
|----------------------------------------------------------------|-----------------------------------|-----------------------------|-----------------------------------|-----------------------|---------------------|
| 001206 DRINKING WATER PROGRAM OPERATIONS | 625 | 0 | 625 | 0 | 625 |
| 001206 TANNING FACILITIES | 105 | 0 | 105 | 0 | 105 |
| 001206 MOBILE HOME & RV PARK FEES | 850 | 0 | 850 | 0 | 850 |
| FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL | 317,695 | 0 | 317,695 | 0 | 317,695 |
| 5. OTHER CASH CONTRIBUTIONS - STATE: | | | | | |
| 031005 GENERAL CLINIC RABIES SERVICES & DRUG PURCHASES | 42,500 | 0 | 42,500 | 0 | 42,500 |
| 090001 DRAW DOWN FROM PUBLIC HEALTH UNIT | 616,494 | 0 | 616,494 | 0 | 616,494 |
| OTHER CASH CONTRIBUTION TOTAL | 658,994 | 0 | 658,994 | 0 | 658,994 |
| 6. MEDICAID - STATE/COUNTY: | | | | | |
| 001057 CHD CLINIC FEES | 0 | 31,500 | 31,500 | 0 | 31,500 |
| 001148 CHD CLINIC FEES | 0 | 1,000 | 1,000 | 0 | 1,000 |
| MEDICAID TOTAL | 0 | 32,500 | 32,500 | 0 | 32,500 |
| 7. ALLOCABLE REVENUE - STATE: | | | | | |
| 018000 CHD CLINIC FEES | 2,225 | 0 | 2,225 | 0 | 2,225 |
| ALLOCABLE REVENUE TOTAL | 2,225 | 0 | 2,225 | 0 | 2,225 |
| 8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE | | | | | |
| ADAP | 0 | 0 | 0 | 625,311 | 625,311 |
| PHARMACY DRUG PROGRAM | 0 | 0 | 0 | 2,125 | 2,125 |
| WIC PROGRAM | 0 | 0 | 0 | 2,496,125 | 2,496,125 |
| BUREAU OF PUBLIC HEALTH LABORATORIES | 0 | 0 | 0 | 31,402 | 31,402 |
| IMMUNIZATIONS | 0 | 0 | 0 | 294,219 | 294,219 |
| OTHER STATE CONTRIBUTIONS TOTAL | 0 | 0 | 0 | 3,449,182 | 3,449,182 |
| 9. DIRECT LOCAL CONTRIBUTIONS - BCC/TAX DISTRICT | | | | | |
| 008005 CHD LOCAL REVENUE & EXPENDITURES | 0 | 632,714 | 632,714 | 0 | 632,714 |
| DIRECT COUNTY CONTRIBUTIONS TOTAL | 0 | 632,714 | 632,714 | 0 | 632,714 |
| 10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY | | 29 500 | 22 500 | 0 | 29 500 |
| 001073 CHD CLINIC FEES | 0 | 32,500 | 32,500 | | 32,500 1,935,000 |
| 001073 CURANT 340B REVENUE AND EXPENSE TRACKING | 0 | 1,935,000 | 1,935,000 | 0 | |
| 001077 CHD CLINIC FEES | 0 | 3,600 | 3,600 | 0 | 3,600 |
| 001077 GENERAL CLINIC RABIES SERVICES & DRUG PURCHASES | 0 | 15,000 | 15,000 | 0 | 15,000 |
| 001094 CHD LOCAL ENVIRONMENTAL FEES | 0 | 175,625 | 175,625 | | 175,625 |
| 001110 VITAL STATISTICS CERTIFIED RECORDS | 0 | 208,000 | 208,000 | 0 | 208,000 |
| FEES AUTHORIZED BY COUNTY TOTAL | 0 | 2,369,725 | 2,369,725 | 0 | 2,369,725 |
| 11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY | | | | | |
| 001029 CHD CLINIC FEES | 0 | 36,500 | 36,500 | 0 | 36,500 |
| 001029 GENERAL CLINIC RABIES SERVICES & DRUG PURCHASES | 0 | 7,000 | 7,000 | 0 | 7,000 |
| 001090 CHD CLINIC FEES | 0 | 1,550 | 1,550 | 0 | 1,550 |
| 007010 RYAN WHITE TITLE III - DIRECT TO CHD | 0 | 329,788 | 329,788 | 0 | 329,788 |

ST. JOHNS COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

| | State CHD Trust Fund (cash) | County CHD Trust Fund | Total CHD Trust Fund (cash) | Other Contribution | Total |
|----------------------------------------------------------------|-----------------------------------|-----------------------------|-----------------------------------|-----------------------|------------|
| 090002 DRAW DOWN FROM PUBLIC HEALTH UNIT | 0 | 394,537 | 394,537 | 0 | 394,537 |
| OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL | 0 | 769,375 | 769,375 | 0 | 769,375 |
| 12. ALLOCABLE REVENUE - COUNTY | | | | | |
| 018000 CHD CLINIC FEES | 0 | 2,225 | 2,225 | 0 | 2,225 |
| COUNTY ALLOCABLE REVENUE TOTAL | 0 | 2,225 | 2,225 | 0 | 2,225 |
| 18. 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 CHID TRUST FUND - COUNTY | <i>t</i> | | | | |
| 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 | 4,127,527 | 3,806,539 | 7,934,066 | 3,449,182 | 11,383,248 |

ST. JOHNS COUNTY HEALTH DEPARTMENT

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

| | Quarterly Expenditure Plan | | | | | | | | | |
|------------------------------------------|----------------------------|-----------|-----------|-----------|-------------|-----------|-----------|-----------|-----------|-----------|
| | FTE's | Clients S | Services/ | 'lst | 2nd | 3rd | 4th | | | Grand |
| | (0.00) | Units | Visits | | (Whole doll | ars only) | | State | County | Total |
| A. COMMUNICABLE DISEASE CONTROL: | | | | | | | | | | |
| IMMUNIZATION (101) | 4.45 | 1,475 | 1,998 | 118,777 | 101,815 | 118,777 | 103,498 | 352,874 | 89,993 | 442,867 |
| SEXUALLY TRANS. DIS. (102) | 5,13 | 321 | 657 | 111,492 | 95,571 | 111,492 | 97,150 | 348,030 | 67,675 | 415,705 |
| HIV/AIDS PREVENTION (03A1) | 0.71 | 0 | 74 | 41,117 | 35,246 | 41,117 | 35,829 | 3,323 | 149,986 | 153,309 |
| HIV/AIDS SURVEILLANCE (03A2) | 0.22 | 0 | 292 | 5,623 | 4,820 | 5,623 | 4,899 | 20,965 | 0 | 20,965 |
| HIV/AIDS PATIENT CARE (03A3) | 15.78 | 314 | 746 | 729,524 | 625,345 | 729,524 | 635,683 | 116,378 | 2,603,698 | 2,720,076 |
| ADAP (03A4) | 0.31 | 55 | 76 | 6,379 | 5,468 | 6,379 | 5,557 | 23,783 | 0 | 23,783 |
| TUBERCULOSIS (104) | 0.66 | 68 | 139 | 18,490 | 15,850 | 18,490 | 16,112 | 68,942 | 0 | 68,942 |
| COMM. DIS. SURV. (106) | 7.65 | 0 | 10,020 | 158,607 | 135,957 | 158,607 | 138,204 | 591,375 | 0 | 591,375 |
| HEPATITIS (109) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| PREPAREDNESS AND RESPONSE (116) | 2.23 | 0 | 0 | 49,795 | 42,684 | 49,795 | 43,388 | 185,662 | 0 | 185,662 |
| REFUGEE HEALTH (118) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| VITAL RECORDS (180) | 5.75 | 12,681 | 39,465 | 106,722 | 91,481 | 106,722 | 92,993 | 0 | 397,918 | 397,918 |
| COMMUNICABLE DISEASE SUBTOTAL | 42.89 | 14,914 | 53,467 | 1,346,526 | 1,154,237 | 1,346,526 | 1,173,313 | 1,711,332 | 3,309,270 | 5,020,602 |
| B. PRIMARY CARE: | | | | | | | | | | |
| CHRONIC DISEASE PREVENTION PRO (210) | 2.23 | 0 | 0 | 39,632 | 33,972 | 39,632 | 34,533 | 147,769 | 0 | 147,769 |
| WIC (21W1) | 7.80 | 2,705 | 14,135 | 177,509 | 152,160 | 177,509 | 154,674 | 661,852 | 0 | 661,852 |
| TOBACCO USE INTERVENTION (212) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| WIC BREASTFEEDING PEER COUNSELING (21W2) | 1.11 | 0 | 875 | 15,747 | 13,498 | 15,747 | 13,720 | 58,712 | 0 | 58,712 |
| FAMILY PLANNING (223) | 3.66 | 343 | 603 | 99,024 | 84,883 | 99,024 | 86,286 | 316,704 | 52,513 | 369,217 |
| IMPROVED PREGNANCY OUTCOME (225) | 0.11 | 0 | 0 | 2,054 | 1,760 | 2,054 | 1,789 | 7,657 | 0 | 7,657 |
| HEALTHY START PRENATAL (227) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| COMPREHENSIVE CHILD HEALTH (229) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| HEALTHY START CHILD (231) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| SCHOOL HEALTH (234) | 0.36 | 0 | 5,571,917 | 49,690 | 42,594 | 49,690 | 43,298 | 185,272 | 0 | 185,272 |
| COMPREHENSIVE ADULT HEALTH (237) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| COMMUNITY HEALTH DEVELOPMENT (238) | 0.87 | 0 | 0 | 57,956 | 49,680 | 57,956 | 50,502 | 216,094 | 0 | 216,094 |
| DENTAL HEALTH (240) | 1.11 | 0 | 0 | 26,199 | 22,458 | 26,199 | 22,828 | 41,115 | 56,569 | 97,684 |
| PRIMARY CARE SUBTOTAL | 17.25 | 3,048 | 5,587,530 | 467,811 | 401,005 | 467,811 | 407,630 | 1,635,175 | 109,082 | 1,744,257 |
| C. ENVIRONMENTAL HEALTH: | | | | | | | | | | |
| Water and Onsite Sewage Programs | | | | | | | | | | |
| COSTAL BEACH MONITORING (347) | 0.13 | 224 | 224 | 3,513 | 3,011 | 3,513 | 3,061 | 13,098 | 0 | 13,098 |
| LIMITED USE PUBLIC WATER SYSTEMS (357) | 1.16 | 754 | 812 | 23,369 | 20,032 | 23,369 | 20,363 | 87,133 | 0 | 87,133 |
| PUBLIC WATER SYSTEM (358) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| PRIVATE WATER SYSTEM (359) | 0.06 | 0 | 0 | 1,770 | 1,517 | 1,770 | 1,542 | 2,778 | 3,821 | 6,599 |
| ONSITE SEWAGE TREATMENT & DISPOSAL (361) | 9.53 | 1,956 | 3,419 | 167,615 | 143,679 | 167,615 | 146,054 | 361,798 | 263,165 | 624,963 |
| Group Total | 10.88 | 2,934 | 4,455 | 196,267 | 168,239 | 196,267 | 171,020 | 464,807 | 266,986 | 731,793 |
| Facility Programs | | | | | | | | | | |
| TATTOO FACILITY SERVICES (344) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | | | 2 | 2 | 2 | 0 | | • |

ST. JOHNS COUNTY HEALTH DEPARTMENT

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

| | | | | Qu | arterly Expe | nditure Plan | | | | |
|-----------------------------------------|--------|---------------------------|-----------|-----------|--------------|--------------|-----------|-----------|-----------|----------|
| | FTE's | Clients Services/ 1st 2nd | | 2nd | 3rd 4th | | | | Grand | |
| | (0.00) | Units | Visite | | (Whole doll | ars only) | | State | County | Total |
| FOOD HYGIENE (348) | 0.88 | 380 | 981 | 16,886 | 14,475 | 16,886 | 14,713 | 62,835 | 125 | 62,96 |
| BODY PIERCING FACILITIES SERVICES (349) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| GROUP CARE FACILITY (351) | 0.36 | 203 | 273 | 7,206 | 6,177 | 7,206 | 6,278 | 0 | 26,867 | 26,86 |
| MIGRANT LABOR CAMP (352) | 0.33 | 46 | 99 | 7,917 | 6,787 | 7,917 | 6,899 | 29,520 | 0 | 29,52 |
| HOUSING & PUB. BLDG. (353) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| MOBILE HOME AND PARK (354) | 0.22 | 134 | 205 | 4,989 | 4,276 | 4,989 | 4,346 | 18,600 | 0 | 18,60 |
| POOLS/BATHING PLACES (360) | 3.27 | 729 | 1,741 | 59,234 | 50,775 | 59,234 | 51,613 | 142,557 | 78,299 | 220,8 |
| BIOMEDICAL WASTE SERVICES (364) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| TANNING FACILITY SERVICES (369) | 0.27 | 135 | 27 | 5,306 | 4,548 | 5,306 | 4,622 | 19,782 | 0 | 19,78 |
| Sroup Total | 5.33 | 1,627 | 3,326 | 101,538 | 87,038 | 101,538 | 88,471 | 273,294 | 105,291 | 378,58 |
| Groundwater Contamination | | | | | | | | | | |
| STORAGE TANK COMPLIANCE SERVICES (355) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| SUPER ACT SERVICES (356) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Broup Total | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Community Hygiene | | | | | | | | | | |
| COMMUNITY ENVIR. HEALTH (345) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| NJURY PREVENTION (346) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| LEAD MONITORING SERVICES (350) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| PUBLIC SEWAGE (362) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| SOLID WASTE DISPOSAL SERVICE (363) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| SANITARY NUISANCE (365) | 0.35 | 441 | 504 | 7,368 | 6,316 | 7,368 | 6,421 | 11,563 | 15,910 | 27,4 |
| RABIES SURVEILLANCE (366) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| ARBORVIRUS SURVEIL. (367) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| RODENT/ARTHROPOD CONTROL (368) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| WATER POLLUTION (370) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| NDOOR AIR (371) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| RADIOLOGICAL HEALTH (372) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| TOXIC SUBSTANCES (373) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Broup Total | 0.35 | 441 | 504 | 7,368 | 6,316 | 7,368 | 6,421 | 11,563 | 15,910 | 27,4 |
| ENVIRONMENTAL HEALTH SUBTOTAL | 16.56 | 5,002 | 8,285 | 305,173 | 261,593 | 305,173 | 265,912 | 749,664 | 388,187 | 1,137,8 |
| NON-OPERATIONAL COSTS: | | | | | | | | | | |
| NON-OPERATIONAL COSTS (599) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| ENVIRONMENTAL HEALTH SURCHARGE (399) | 0.00 | 0 | 0 | 8,410 | 7,209 | 8,410 | 7,327 | 31,356 | 0 | 31,3 |
| MEDICAID BUYBACK (611) | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| NON-OPERATIONAL COSTS SUBTOTAL | 0.00 | 0 | 0 | 8,410 | 7,209 | 8,410 | 7,327 | 31,356 | 0 | 31,3 |
| TOTAL CONTRACT | 76.70 | 22,964 | 5,649,282 | 2,127,920 | 1,824,044 | 2,127,920 | 1,854,182 | 4,127,527 | 3,806,539 | 7,934,06 |

ST. JOHNS COUNTY HEALTH DEPARTMENT

CIVIL RIGHTS COMPLIANCE AND NON-DISCRIMINATION CERTIFICATE

- 1. The CHD 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 CHD assures that it will comply with 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.
- 3. Assurance of Civil Rights Compliance: The CHD hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.); Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.); Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794); the Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.); Title II and Title III of the Americans with Disabilities Act (ADA) of 1990, as amended by the ADA Amendment Act of 2008 (42 U.S.C. 12131-12189) and as implemented by Department of Justice regulations at 28 CFR Parts 35 and 36; Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency" (August 11, 2000); all provisions required by the implementing regulations of the U.S. Department of Agriculture (7 CFR Part 15 et seq.); and FNS directives and guidelines to the effect that no person shall, on the ground of race, color, national origin, age, sex, or disability, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity for which the agency receives Federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.

By providing this assurance, the CHD agrees to compile data, maintain records and submit records and reports as required to permit effective enforcement of the nondiscrimination laws, and to permit Department personnel during normal working hours to review and copy such records, books and accounts, access such facilities, and interview such personnel as needed to ascertain compliance with the non-discrimination laws. If there are any violations of this assurance, the Department of Agriculture shall have the right to seek judicial enforcement of this assurance.

This assurance is given in consideration of and for the purpose of obtaining any and all Federal financial assistance, grants, and loans of Federal funds, reimbursable expenditures, grant or donation of Federal property and interest in property, the detail of Federal personnel, the sale and lease of, and the permission to use Federal property or interest in such property or the furnishing of services without consideration or at a nominal consideration, or at a consideration that is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be served by such sale, lease, or furniching of Data, Files, and Records: The CHD agrees to restrict the use and disclosure of confidential USDA, Women, Infant, and Children (WIC) applicant and participant information as specified in 7 CFR § 246.26(d)(1)(i) in accordance with 7 CFR § 246.26(d)(1)(ii), as applicable.

4.

Attachment IV

Fiscal Year - 2023 - 2024

St. Johns County Health Department

Facilities Utilized by the County Health Department

| Complete Location (Street Address, City, Zip) | Facility Description And Offical Building Name (If applicable) (Admin, Clinic, Envn Hith, etc.) | Lease/ Agreement Number | Type of Agreement (Private Lease thru State or County, other - please define) | Complete Legal Name of Owner | SQ Feet | Employed Count (FTE/OPS/ Contract) |
|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------|------------------------------------|------------|---------------------------------------------|
| 200 San Sebastian View, St. Augustine, FL 32084 | Main CHD Facility | | In-Kind from Board of County Commissioners | St. Johns County BOCC | ~23,000 | 74 |
| | | | | | | |
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Facility - a fixed site managed by DOH/CHD personnel for the purpose of providing or supporting public health services. Includes county-owned, state-owned, and leased facilities. Includes DOH/CHD warehouse and administrative sites. Includes facilities managed by DOH/CHD that may be shared with other organizations. Does not include schools, jails or other facilities where DOH/CHD staff are out-posted or sites where services are provided on an episodic basis.

Attachment_IV - Page 1 of 1

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

CASH RESERVED OR ANTICIPATED TO BE RESERVED FOR PROJECTS

| CONTRACT YEAR | STATE | | COUNTY | | TOTAL |
|-------------------------------------------------------|--------------------------------|--------------|----------------|---|----------|
| 2022-2023* | \$ | 0 | \$ | 0 | \$ 0 |
| 2023-2024** | \$ | 0 | \$ | 0 | \$ 0 |
| 2024-2025*** | \$ | 0 | \$ | 0 | \$ 00 |
| 2025-2026*** | \$ | 0 | \$ | 0 | \$ 0 |
| PROJECT TOTAL | \$ | 0 | \$ | 0 | \$ 0 |
| 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 reas | sonable deta | ail. | | |

| 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 9/30/23

** Cash to be transferred to FCO account.

*** Cash anticipated for future contract years.