

**CONTRACT BETWEEN
BROWARD COUNTY
AND
STATE OF FLORIDA DEPARTMENT OF HEALTH
FOR OPERATION OF
THE BROWARD COUNTY HEALTH DEPARTMENT
CONTRACT YEAR 2020-2021**

This Contract ("Contract") is made and entered into between the State of Florida, Department of Health ("State") and Broward County, a political subdivision of the State of Florida ("County"), through their undersigned authorities, effective October 1, 2020.

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. Broward 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, 2020, through September 30, 2021, 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. See Attachment VI.

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 \$ 64,629,529 (*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. In the event that the Legislature fails to make an appropriation for the full amount of its obligation for the period July 1, 2021 through September 30, 2021, then the County reserves the right to cease funding for the period July 1, 2021 through September 30, 2021.

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 \$ 1,827,864 (*amount listed under the "Direct Local Contributions-BCC/Tax District" of Attachment II, Part II section of the revenue attachment*).

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
Broward County
780 SW 24th Street
Ft. Lauderdale, FL 33315

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 Broward 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. A report detailing the status of public health as measured by outcome measures and similar indicators will be sent by the CHD director/administrator to the parties no later than October 1 of each year (*This is the standard quality assurance "County Health Profile" report located on the Division of Public Health Statistics and Performance Management Intranet site*).

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 paragraph 6.i., 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 Broward 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.

The CHD shall also comply with all applicable federal laws, rules and regulations regarding confidentiality of information held by the CHD, including but not limited to HIPAA and rules promulgated thereunder. 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 an annual Outcome Evaluation for the 2019-2020 Contract Period (Attachment VII) and an annual Outcomes for Contract Year 2020-2021 (Attachment VIII) in addition to 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 DE385L1 report if the variance exceeds or falls below 25 percent of the planned expenditure amount. 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, 2021 for the report period October 1, 2020 through December 31, 2020;

ii. June 1, 2021 for the report period October 1, 2020 through March 31, 2021;

iii. September 1, 2021 for the report period October 1, 2020 through June 30, 2021; and

- iv. December 1, 2021 for the report period October 1, 2020 through September 30, 2021.

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 purchased in accordance with this contract using state or local funding 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 of these 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. Notice of Changes in Services or Service Locations. CHD agrees to provide notification to the County pursuant to paragraph 10.b, of any changes to services provided pursuant to this contract or service locations of the CHD for activities done in locations or facilities pursuant to this contract no less than 30 days prior to making such changes.

10. 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 fiscal year beginning October 1, 2020, it is agreed that the performance and payment under this contract shall be subject to the availability of funds from the County, in accordance with Chapter 129, Florida Statutes. If this contract, any renewal hereof, or any term, performance or payment hereunder, extends beyond the fiscal year beginning July 1, 2021, 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.

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

For the State:

For the County:

Paula M. Thaqi, MD, M.P.H.
Name

Darrell Cunningham
Name

Director
Title

Director
Title

780 SW 24th Street

115 S. Andrews Ave., Room A360

Ft. Lauderdale, FL 33315
Address

Ft. Lauderdale, FL 33301
Address

(954) 847-8011
Telephone

(954) 357-6202
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. Except as provided in Paragraph 4(d) herein, no modification, amendment or alteration in the terms or conditions contained herein shall be effective unless contained in a written document executed with the same formality and of equal dignity herewith by the CHD and the County authorized representatives.

d. 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 9 page contract, with its attachments as referenced, including Attachment I (two pages), Attachment II (six pages), Attachment III (one page), Attachment IV (one page), Attachment V (two pages), Attachment VI (one page), Attachment VII (one page) and Attachment VIII (one page), to be executed by their undersigned officials as duly authorized effective the 1st day of October, 2020.

BOARD OF COUNTY COMMISSIONERS
OF BROWARD COUNTY, FLORIDA

STATE OF FLORIDA
DEPARTMENT OF HEALTH

SIGNED BY: _____

SIGNED BY: _____

NAME: _____

NAME: Scott A. Rivkees, M.D.

TITLE: Mayor

TITLE: State Surgeon General

DATE: _____

DATE: _____

ATTESTED TO:

SIGNED BY: _____

SIGNED BY: _____

NAME: Bertha Henry

NAME: Paula M. Thaqi, MD, MPH

TITLE: County Administrator

TITLE: CHD Director (Broward)

DATE: _____

DATE: _____

Reviewed and approved as to form:
Andrew J. Meyers, County Attorney

By K. Gordon 11/5/2020
Karen S. Gordon, Senior Assistant County Attorney

ATTACHMENT I
BROWARD 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
BROWARD 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 09/30/20	0	1326249	1326249
2. Drawdown for Contract Year October 1, 2020 to September 30, 2021	0	-1506965	-1506965
3. Special Capital Project use for Contract Year October 1, 2020 to September 30, 2021	0	0	0
4. Balance Reserved for Contingency Fund October 1, 2020 to September 30, 2021	0	-180716	-180716

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

ATTACHMENT II

BROWARD COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

October 1, 2020 to September 30, 2021

	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	2,319,200	0	2,319,200	0	2,319,200
015040 AIDS PREVENTION & SURVEILLANCE - GENERAL REVENUE	219,239	0	219,239	0	219,239
015040 CHD - TB COMMUNITY PROGRAM	632,865	0	632,865	0	632,865
015040 SEXUALLY TRANSMITTED DISEASE CONTROL PROGRAM GR	215,205	0	215,205	0	215,205
015040 CORONAVIRUS GENERAL REVENUE	30,555,998	0	30,555,998	0	30,555,998
015040 DENTAL SPECIAL INITIATIVE PROJECTS	6,191	0	6,191	0	6,191
015040 HEALTHY BEACHES MONITORING	22,912	0	22,912	0	22,912
015040 FAMILY PLANNING GENERAL REVENUE	165,730	0	165,730	0	165,730
015040 HEPATITIS AND LIVER FAILURE PREVENTION & CONTROL	147,116	0	147,116	0	147,116
015040 PRIMARY CARE PROGRAM	817,686	0	817,686	0	817,686
015040 SCHOOL HEALTH SERVICES - GENERAL REVENUE	1,440,834	0	1,440,834	0	1,440,834
015050 CHD GENERAL REVENUE NON-CATEGORICAL	9,227,252	0	9,227,252	0	9,227,252
GENERAL REVENUE TOTAL	45,770,228	0	45,770,228	0	45,770,228
2. NON GENERAL REVENUE - STATE					
015010 ENVIRONMENTAL BIOMEDICAL WASTE PROGRAM	29,398	0	29,398	0	29,398
015010 TOBACCO STATE AND COMMUNITY INTERVENTIONS	376,100	0	376,100	0	376,100
015010 TOBACCO STATE & COMMUNITY HEALTHY BABY	10,000	0	10,000	0	10,000
NON GENERAL REVENUE TOTAL	415,498	0	415,498	0	415,498
3. FEDERAL FUNDS - STATE					
007000 AIDS SURVEILLANCE - CORE	353,708	0	353,708	0	353,708
007000 BREAST & CERVICAL CANCER - ADMIN/CASE MANAGEMENT	236,000	0	236,000	0	236,000
007000 WIC BREASTFEEDING PEER COUNSELING PROG	243,246	0	243,246	0	243,246
007000 COASTAL BEACH WATER QUALITY MONITORING	14,709	0	14,709	0	14,709
007000 COMPREHENSIVE COMMUNITY CARDIO - PHBG	35,000	0	35,000	0	35,000
007000 EPI FOR INFECTIOUS DISEASE INFANTS CONGENITAL	57,600	0	57,600	0	57,600
007000 EPID & LAB FOR INFECTIOUS DISEASE COVID-19	181,905	0	181,905	0	181,905
007000 FAMILY PLANNING TITLE X - GRANT	271,201	0	271,201	0	271,201
007000 IMMUNIZATION ACTION PLAN	265,667	0	265,667	0	265,667
007000 IMMUNIZATION VACCINE FOR CHILDREN PANFLU	63,900	0	63,900	0	63,900
007000 MCH SPECIAL PROJECT DENTAL	155,246	0	155,246	0	155,246
007000 MCH BLOCK GRANT FLORIDA'S HEALTHY BABIES	44,191	0	44,191	0	44,191
007000 MCH SPECIAL PROJECTS DENTAL	49,999	0	49,999	0	49,999
007000 BASE COMMUNITY PREPAREDNESS CAPABILITY	136,158	0	136,158	0	136,158
007000 BASE PUB HLTH SURVEILLANCE & EPI INVESTIGATION	322,276	0	322,276	0	322,276
007000 CRI MEDICAL COUNTERMEASURES DISPENSING	271,037	0	271,037	0	271,037
007000 AIDS PREVENTION	3,385,061	0	3,385,061	0	3,385,061
007000 IMPROVING STD PROGRAMS	190,764	0	190,764	0	190,764
007000 FLORIDA STD SURVEILLANCE NETWORK PART A	9,400	0	9,400	0	9,400
007000 TB CONTROL PROJECT	193,751	0	193,751	0	193,751
007000 WIC PROGRAM ADMINISTRATION	8,131,299	0	8,131,299	0	8,131,299
015075 SUPPLEMENTAL SCHOOL HEALTH	346,120	0	346,120	0	346,120
015075 SNAP ED - OBESITY	30,000	0	30,000	0	30,000

ATTACHMENT II

BROWARD COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

October 1, 2020 to September 30, 2021

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
015075 REFUGEE HEALTH SCREENING REIMBURSEMENT ADMIN	33,064	0	33,064	0	33,064
015075 REFUGEE HEALTH SCREENING REIMBURSEMENT SERVICES	198,030	0	198,030	0	198,030
018005 RYAN WHITE TITLE II ADAP DRUG REBATES	816,460	0	816,460	0	816,460
018005 AIDS DRUG ASSISTANCE PROGRAM ADMIN HQ	1,167,742	0	1,167,742	0	1,167,742
018005 RYAN WHITE TITLE II CARE GRANT	78,340	0	78,340	0	78,340
018005 RYAN WHITE TITLE II GRANT/CHD CONSORTIUM	1,161,929	0	1,161,929	0	1,161,929
FEDERAL FUNDS TOTAL	18,443,803	0	18,443,803	0	18,443,803
4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE					
001020 CHD STATEWIDE ENVIRONMENTAL FEES	1,565,796	0	1,565,796	0	1,565,796
001092 CHD STATEWIDE ENVIRONMENTAL FEES	120,296	0	120,296	0	120,296
FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL	1,686,092	0	1,686,092	0	1,686,092
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	15,200	15,200	0	15,200
001148 CHD CLINIC FEES	0	714,000	714,000	0	714,000
MEDICAID TOTAL	0	729,200	729,200	0	729,200
7. ALLOCABLE REVENUE - STATE:					
018000 CHD SALE OF SERVICES IN OR OUTSIDE OF STATE GOVT	50,000	0	50,000	0	50,000
ALLOCABLE REVENUE TOTAL	50,000	0	50,000	0	50,000
8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE					
ADAP	0	0	0	25,226,299	25,226,299
PHARMACY DRUG PROGRAM	0	0	0	67,460	67,460
WIC PROGRAM	0	0	0	38,578,170	38,578,170
BUREAU OF PUBLIC HEALTH LABORATORIES	0	0	0	214,571	214,571
IMMUNIZATIONS	0	0	0	2,755,408	2,755,408
OTHER STATE CONTRIBUTIONS TOTAL	0	0	0	66,841,908	66,841,908
9. DIRECT LOCAL CONTRIBUTIONS - BCC/TAX DISTRICT					
008005 CHD LOCAL REVENUE & EXPENDITURES	0	1,827,864	1,827,864	0	1,827,864
008040 LOCAL COVID-19 RESPONSE	0	11,225,945	11,225,945	0	11,225,945
DIRECT COUNTY CONTRIBUTIONS TOTAL	0	13,053,809	13,053,809	0	13,053,809
10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY					
001077 CHD CLINIC FEES	0	192,000	192,000	0	192,000
001094 CHD LOCAL ENVIRONMENTAL FEES	0	1,140,378	1,140,378	0	1,140,378
001110 VITAL STATISTICS CERTIFIED RECORDS	0	1,952,768	1,952,768	0	1,952,768
FEES AUTHORIZED BY COUNTY TOTAL	0	3,285,146	3,285,146	0	3,285,146

ATTACHMENT II

BROWARD COUNTY HEALTH DEPARTMENT

Part II. Sources of Contributions to County Health Department

October 1, 2020 to September 30, 2021

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY					
005000 CHD LOCAL REVENUE & EXPENDITURES	0	1,000	1,000	0	1,000
007010 OVERDOSE DATA TO ACTION (OD2A) CHD DIRECT FED	0	3,126,845	3,126,845	0	3,126,845
010300 STATE UNDERGROUND PETROLEUM RESPONSE ACT	0	7,000	7,000	0	7,000
010400 CHD SALE OF SERVICES IN OR OUTSIDE OF STATE GOVT	0	120,000	120,000	0	120,000
011000 CHILDRENS SERVICES COUN INFANT DROWNING PRVNTN	0	272,608	272,608	0	272,608
011000 FLORIDA BREAST CANCER FOUNDATION GRANT	0	17,500	17,500	0	17,500
011000 SOCIAL SERVICES - KIDCARE	0	595,241	595,241	0	595,241
011000 MEMORIAL HOSPITAL ADULT DENTAL PROGRAM	0	156,000	156,000	0	156,000
011000 RYAN WHITE TITLE I TB/HIV COINFECTION GRANT	0	70,500	70,500	0	70,500
011001 HEALTHY START RISK SCREENINGS	0	311,802	311,802	0	311,802
012020 CHD LOCAL ENVIRONMENTAL FEES	0	26,500	26,500	0	26,500
090002 DRAW DOWN FROM PUBLIC HEALTH UNIT	0	1,506,965	1,506,965	0	1,506,965
OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL	0	6,211,961	6,211,961	0	6,211,961
12. ALLOCABLE REVENUE - COUNTY					
018000 CHD SALE OF SERVICES IN OR OUTSIDE OF STATE GOVT	0	50,000	50,000	0	50,000
COUNTY ALLOCABLE REVENUE TOTAL	0	50,000	50,000	0	50,000
13. BUILDINGS - COUNTY					
ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	2,994,752	2,994,752
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	2,994,752	2,994,752
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	66,365,621	23,330,116	89,695,737	69,836,660	159,532,397

ATTACHMENT II

BROWARD COUNTY HEALTH DEPARTMENT

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

October 1, 2020 to September 30, 2021

	FTE's (0.00)	Clients Units	Services/ Visits	Quarterly Expenditure Plan				State	County	Grand Total
				1st	2nd (Whole dollars only)	3rd	4th			
A. COMMUNICABLE DISEASE CONTROL:										
IMMUNIZATION (101)	14.39	9,639	11,960	343,057	294,122	343,057	294,121	329,567	944,790	1,274,357
SEXUALLY TRANS. DIS. (102)	19.61	21	46	544,486	466,817	544,486	466,817	2,022,606	0	2,022,606
HIV/AIDS PREVENTION (03A1)	29.27	0	3,431	1,062,125	910,618	1,062,125	910,619	3,945,487	0	3,945,487
HIV/AIDS SURVEILLANCE (03A2)	7.47	0	22	151,738	130,093	151,738	130,093	563,662	0	563,662
HIV/AIDS PATIENT CARE (03A3)	52.16	2	267	1,434,505	1,229,880	1,434,505	1,229,879	5,258,269	70,500	5,328,769
ADAP (03A4)	19.66	1	203	426,609	365,756	426,609	365,756	1,584,730	0	1,584,730
TUBERCULOSIS (104)	20.78	761	2,612	452,537	387,984	452,537	387,984	1,656,042	25,000	1,681,042
COMM. DIS. SURV. (106)	13.11	0	20,202	11,563,106	9,913,688	11,563,106	9,913,688	31,589,072	11,364,516	42,953,588
HEPATITIS (109)	1.34	826	1,149	42,434	36,381	42,434	36,380	157,629	0	157,629
PREPAREDNESS AND RESPONSE (116)	6.95	0	2,427	172,374	147,786	172,374	147,786	640,320	0	640,320
REFUGEE HEALTH (118)	3.48	387	976	79,026	67,753	79,026	67,752	293,557	0	293,557
VITAL RECORDS (180)	15.98	68,713	145,904	309,700	265,523	309,700	265,524	0	1,150,447	1,150,447
COMMUNICABLE DISEASE SUBTOTAL	204.20	80,350	189,199	16,581,697	14,216,401	16,581,697	14,216,399	48,040,941	13,555,253	61,596,194
B. PRIMARY CARE:										
CHRONIC DISEASE PREVENTION PRO (210)	0.79	4,040	327	17,602	15,092	17,602	15,092	65,388	0	65,388
WIC (21W1)	133.19	69,171	448,865	2,720,014	2,332,018	2,720,014	2,332,017	10,104,063	0	10,104,063
TOBACCO USE INTERVENTION (212)	4.86	0	216	129,206	110,775	129,206	110,775	479,962	0	479,962
WIC BREASTFEEDING PEER COUNSELING (21W2)	12.26	0	20,576	212,180	181,914	212,180	181,913	788,187	0	788,187
FAMILY PLANNING (223)	26.45	3,161	6,704	635,597	544,932	635,597	544,931	2,069,646	291,411	2,361,057
IMPROVED PREGNANCY OUTCOME (225)	0.00	0	0	0	0	0	0	0	0	0
HEALTHY START PRENATAL (227)	1.66	2	3	34,257	29,370	34,257	29,371	0	127,255	127,255
COMPREHENSIVE CHILD HEALTH (229)	13.34	11	128	322,844	276,792	322,844	276,792	408,843	790,429	1,199,272
HEALTHY START CHILD (231)	4.23	5	15	72,868	62,474	72,868	62,473	0	270,683	270,683
SCHOOL HEALTH (234)	12.20	0	1,859,529	546,421	468,477	546,421	468,476	2,029,795	0	2,029,795
COMPREHENSIVE ADULT HEALTH (237)	4.85	222	657	197,495	169,323	197,495	169,323	699,369	34,267	733,636
COMMUNITY HEALTH DEVELOPMENT (238)	18.29	0	229	1,044,300	895,336	1,044,300	895,335	44,193	3,835,078	3,879,271
DENTAL HEALTH (240)	26.36	26,146	32,657	719,178	616,591	719,178	616,591	211,436	2,460,102	2,671,538
PRIMARY CARE SUBTOTAL	258.48	102,758	2,369,906	6,651,962	5,703,094	6,651,962	5,703,089	16,900,882	7,809,225	24,710,107
C. ENVIRONMENTAL HEALTH:										
Water and Onsite Sewage Programs										
COSTAL BEACH MONITORING (347)	1.00	1,695	1,695	22,786	19,536	22,786	19,537	84,645	0	84,645
LIMITED USE PUBLIC WATER SYSTEMS (357)	0.71	42	135	13,487	11,563	13,487	11,562	50,099	0	50,099
PUBLIC WATER SYSTEM (358)	0.56	0	0	11,954	10,248	11,954	10,248	0	44,404	44,404
PRIVATE WATER SYSTEM (359)	0.55	17	502	12,469	10,690	12,469	10,690	0	46,318	46,318
ONSITE SEWAGE TREATMENT & DISPOSAL (361)	6.00	482	1,237	132,866	113,914	132,866	113,914	101,545	392,015	493,560
Group Total	8.82	2,236	3,569	193,562	165,951	193,562	165,951	236,289	482,737	719,026
Facility Programs										
TATTOO FACILITY SERVICES (344)	1.73	3,366	989	37,190	31,885	37,190	31,885	138,150	0	138,150
FOOD HYGIENE (348)	4.53	1,180	3,177	96,015	82,319	96,015	82,319	199,845	156,823	356,668

**ATTACHMENT II
BROWARD COUNTY HEALTH DEPARTMENT**

**Part III, Planned Staffing, Clients, Services and Expenditures By Program Service Area Within Each Level of Service
October 1, 2020 to September 30, 2021**

	FTE's (0.00)	Clients Units	Services/ Visits	Quarterly Expenditure Plan				State	County	Grand Total
				1st	2nd (Whole dollars only)	3rd	4th			
BODY PIERCING FACILITIES SERVICES (349)	0.26	57	76	5,699	4,886	5,699	4,887	5,775	15,396	21,171
GROUP CARE FACILITY (351)	1.41	489	804	30,149	25,848	30,149	25,847	0	111,993	111,993
MIGRANT LABOR CAMP (352)	0.00	0	0	0	0	0	0	0	0	0
HOUSING & PUB. BLDG. (353)	0.00	0	0	0	0	0	0	0	0	0
MOBILE HOME AND PARK (354)	0.31	55	186	6,235	5,346	6,235	5,346	12,747	10,415	23,162
POOLS/BATHING PLACES (360)	14.09	4,651	10,269	297,285	254,879	297,285	254,879	625,331	478,997	1,104,328
BIOMEDICAL WASTE SERVICES (364)	3.03	2,696	2,183	65,058	55,778	65,058	55,777	196,104	45,567	241,671
TANNING FACILITY SERVICES (369)	0.23	63	125	5,028	4,310	5,028	4,310	9,557	9,119	18,676
Group Total	25.59	12,557	17,809	542,659	465,251	542,659	465,250	1,187,509	828,310	2,015,819
Groundwater Contamination										
STORAGE TANK COMPLIANCE SERVICES (355)	0.00	0	0	0	0	0	0	0	0	0
SUPER ACT SERVICES (356)	0.57	57	257	12,105	10,378	12,105	10,379	0	44,967	44,967
Group Total	0.57	57	257	12,105	10,378	12,105	10,379	0	44,967	44,967
Community Hygiene										
COMMUNITY ENVIR. HEALTH (345)	0.00	0	0	0	0	0	0	0	0	0
INJURY PREVENTION (346)	5.41	0	594	106,301	91,138	106,301	91,137	0	394,877	394,877
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)	0.94	619	496	19,735	16,920	19,735	16,921	0	73,311	73,311
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)	0.55	0	0	9,782	8,386	9,782	8,386	0	36,336	36,336
TOXIC SUBSTANCES (373)	0.00	0	0	0	0	0	0	0	0	0
Group Total	6.90	619	1,090	135,818	116,444	135,818	116,444	0	504,524	504,524
ENVIRONMENTAL HEALTH SUBTOTAL	41.88	15,469	22,725	884,144	758,024	884,144	758,024	1,423,798	1,860,538	3,284,336
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	27,401	23,493	27,401	23,493	0	101,788	101,788
MEDICAID BUYBACK (611)	0.00	0	0	892	764	892	764	0	3,312	3,312
NON-OPERATIONAL COSTS SUBTOTAL	0.00	0	0	28,293	24,257	28,293	24,257	0	105,100	105,100
TOTAL CONTRACT	504.56	198,577	2,581,830	24,146,096	20,701,776	24,146,096	20,701,769	66,365,621	23,330,116	89,695,737

ATTACHMENT III
BROWARD 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 - 2020 - 2021

Broward County Health Department

Facilities Utilized by the County Health Department

Complete Location (Street Address, City, Zip)	Facility Description And Official Building Name (if applicable) (Admin, Clinic, Envrn Hlth, etc.)	Lease/ Agreement Number	Type of Agreement (Private Lease thru State or County, other - please define)	Complete Legal Name of Owner	SQ Feet	Employee Count (FTE/OPS/ Contract)
205 NW 6 Ave, Pompano Beach, FL 33060	North Regional Health Center		County owned	Broward County	23490	0
205 NW 6 Ave, Pompano Beach, FL 33060	Paul W. Hughes Building		County owned	Broward County	20675	39
2421 SW 6 Ave, Fort Lauderdale, FL 33315	Fort Lauderdale Health Center		County owned	Broward County	33916	142
900 NW 31st Ave., Fort Lauderdale, FL 33311	Edgar Mills Center		County owned	Broward County	12181	55
4105 Pembroke Rd., Hollywood, FL 33021	South Regional Health Center		County owned	Broward County	36026	18
10077 NW 29th Street, Coral Springs, FL 33065	WIC Satellite Office, NW Family Success Center		County owned	Broward County	2500	15
1600 S. Andrews Avenue, West Wing, 3rd Floor, Fort Lauderdale, FL 33316	WIC Satellite Office, Broward Health Medical Center		Hospital Taxing District	North Broward Hospital District	1000	1
8276 Pines Boulevard, Pembroke Pines, FL 33024	WIC Satellite Office, University Marketplace	640:0393	Private Lease	Bellino University Drive, LLC	3260	18
4481B N. State Road 7, Lauderdale Lakes, FL 33319	WIC Satellite Office, Lakes Medical Center	640:0396	Private Lease	Lakes Medical Center, LLC	4999	24
780 SW 24th Street, Fort Lauderdale, FL 33315	Administrative Center		State owned	State of Florida	47080	171
2421-A SW 6 Avenue, Fort Lauderdale, FL 33315	Operations Center		County owned	Broward County	20750	122
2240 SW 70th Avenue, Units I, C, Davie, FL 33317	Warehouse	640:0297 & 640:0343	Private Lease	Samjaz Nova Davie, LLC	9250	0
2230 SW 70th Avenue, Suite 8, Davie, FL 33317	Warehouse	640:0343	Private Lease	Samjaz Nova Davie, LLC	4950	6
2240 SW 70th Avenue, Suite B, Davie, FL 33317	Warehouse	0069991	Private Lease	Samjaz Nova Davie, LLC	2000	5

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 V
BROWARD 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>
2019-2020*	\$ _____ 0	\$ _____ 464,642	\$ _____ 464,642
2020-2021**	\$ _____ 0	\$ _____ -	\$ _____ -
2021-2022***	\$ _____ 0	\$ _____ -	\$ _____ -
2022-2023***	\$ _____ 0	\$ _____ -	\$ _____ -
PROJECT TOTAL	\$ _____ 0	\$ _____ 464,642	\$ _____ 464,642

SPECIAL PROJECTS CONSTRUCTION/RENOVATION PLAN

PROJECT NUMBER: 71806100

PROJECT NAME: Parking Modifications

LOCATION/ADDRESS: 780 SW 24 Street, Fort Lauderdale, FL 33315

PROJECT TYPE:

NEW BUILDING	_____	ROOFING	_____
RENOVATION	_____	PLANNING STUDY	_____
NEW ADDITION	_____	<u>X</u> OTHER	_____

SQUARE FOOTAGE: 0

PROJECT SUMMARY: *Describe scope of work in reasonable detail.*
 Labor, equipment, materials and supervision required to (1) extend parking lot along the north west area of lot, (2) modify and regrade the existing retention area, (3) construct retaining wall along modified retention area, (4) redesign other parking spaces as indicated on drawings, (5) remodel landscaping as required, (6) construct new employee entrance with card access, (7) seal coating and re-marking entire parking area.

START DATE *(Initial expenditure of funds)* : 04/29/19

COMPLETION DATE: _____

DESIGN FEES: \$ _____ 0

CONSTRUCTION COSTS: \$ _____ 0

FURNITURE/EQUIPMENT: \$ _____ 0

TOTAL PROJECT COST: \$ _____ 464,642

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 9/30/20

** Cash to be transferred to FCO account.

*** Cash anticipated for future contract years.

**ATTACHMENT V
BROWARD 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>
2019-2020*	\$ <u>0</u>	\$ <u>156,672</u>	\$ <u>156,672</u>
2020-2021**	\$ <u>0</u>	\$ <u>-</u>	\$ <u>-</u>
2021-2022***	\$ <u>0</u>	\$ <u>-</u>	\$ <u>-</u>
2022-2023***	\$ <u>0</u>	\$ <u>-</u>	\$ <u>-</u>
PROJECT TOTAL	\$ <u>0</u>	\$ <u>156,672</u>	\$ <u>156,672</u>

SPECIAL PROJECTS CONSTRUCTION/RENOVATION PLAN

PROJECT NUMBER: 71706100

PROJECT NAME: Administration Building Security Alterations

LOCATION/ADDRESS: 780 SW 24 Street, Fort Lauderdale, FL 33315

PROJECT TYPE:

NEW BUILDING	_____	ROOFING	_____
RENOVATION	_____ X _____	PLANNING STUDY	_____
NEW ADDITION	_____	OTHER	_____

SQUARE FOOTAGE: 0

PROJECT SUMMARY: *Describe scope of work in reasonable detail.*
 Labor, equipment, materials and supervision required for (1) Installation of a new reception area at the first floor lobby, (2) Installation of a glass door and reception window in the first floor lobby, (3) Installation of a new door and sidelight in the corridor of the second floor, (4) Cutting in a new opening to the cafeteria on the second floor, (5) Filling in the existing opening going in to the cafeteria on the second floor, (6) Installation of all new electrical device as shown on the drawings, (7) Rerouting and adding fire protection devices as shown on the drawings, (8) Patching of all existing finishes. Labor, equipment, materials and supervision required to install security doors in the Administration and Operations buildings, complete cafeteria paneling and construct access door from Administration lobby to proposed parking area at the main campus of DOH-Broward.

START DATE *(Initial expenditure of funds)* : 05/05/17

COMPLETION DATE: _____

DESIGN FEES: \$ 0

CONSTRUCTION COSTS: \$ 0

FURNITURE/EQUIPMENT: \$ 0

TOTAL PROJECT COST: \$ 156,672

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 9/30/20
 ** Cash to be transferred to FCO account.
 *** Cash anticipated for future contract years.

ATTACHMENT VI
BROWARD COUNTY HEALTH DEPARTMENT
PRIMARY CARE

“Primary Care” as conceptualized for the county health departments and for the use of categorical Primary Care funds (revenue object code 015040) is defined as:

“Health care services for the prevention or treatment of acute or chronic medical conditions or minor injuries of individuals which is provided in a clinic setting and may include family planning and maternity care.”

Indicate below the county health department programs that will be supported at least in part with categorical Primary Care funds this Contract year:

- Comprehensive Child Health (229/29)
- Comprehensive Adult Health (237/37)
- Family Planning (223/23)
- Maternal Health/IPO (225/25)
- Laboratory (242/42)
- Pharmacy (241/93)
- Other Medical Treatment Program (please identify) _____

Describe the target population to be served with categorical Primary Care funds.

Children and adults who meet income eligibility requirements. Eligibility is limited to clients with net income less than 100% of the most current non-farm poverty levels established by the U.S. Office of management and Budget (OMB).

Does the health department intend to contract with other providers for the delivery of primary health care services using categorical (015040) Primary Care funds? If so, please identify the provider(s), describe the services to be delivered, and list the anticipated contractual amount by provider. In addition, contract providers are required to provide data on patients served and the services provided so that the patients may be registered and the service data entered into HMS.

Providers:

	FY 2020-21
	<u>Contract</u>
North Broward Hospital District	\$244,620
South Broward Hospital District d/b/a Memorial Healthcare System	149,568
Broward Community & Family Health Center	75,000

Services:

Comprehensive primary care services including medical examination, evaluation, diagnosis and treatment, as provided through face to face contact between a client and a physician, a physician assistant, or an advanced registered nurse practitioner. All services provided to registered primary care clients must be recorded and reported to CHD within 7 days of provision of the service. Service information must include date of service, service location, program component and type of services.

ATTACHMENT VII

**BROWARD COUNTY HEALTH DEPARTMENT
Contract Year 2020-2021**

**Outcome Evaluation for
2019-2020 Contract Period**

GOAL: Improvement of Health Status of Broward County Residents.

OUTCOME	OBJECTIVE	RESULTS
To increase breast feeding rates in Broward County.	To maintain the percentage of WIC infants who are initially breast fed to at least 85.0% during the year ending 06/30/2020.	The percentage of WIC infants that were initially breast fed was 89.4%.
To reduce the transmission of TB in Broward County.	To maintain at least 95% of active TB cases completing therapy within 12 months of initiation.	In 2018, the TB therapy completion rate was 100%.
To increase the safety of public swimming pools in Broward County.	To maintain at least 95% of public swimming pools rated "satisfactory" during the year ending 06/30/2020.	The percentage of public swimming pools rated "satisfactory" was 77%.

**ATTACHMENT VIII
OUTCOMES FOR CONTRACT YEAR 2020-21**

Agency Name: Florida Department of Health in Broward County Program Name: Public Health

Program Type	Activities	Outcomes	Type	Indicators	Data Source	Data Collection Method
Public Health	Education Health Promotion Outreach	To increase breast feeding rates in Broward County.	Long-term	To maintain the percentage of WIC infants who are initially breast fed to at least 85.0% during the year ending 06/30/21.	Department of Health Bureau of WIC	WIC System
Public Health	Disease Surveillance Investigation Treatment Education	To reduce the transmission of TB in Broward County.	Long-term	To maintain at least 95% of active TB cases completing therapy within 12 months of initiation.	Florida CHARTS (Community Health Assessment Resource Tool Set)	DOH HMS (Health Management System)
Public Health	Education Inspection Enforcement	To increase the safety of public swimming pools in Broward County.	Long-term	To maintain at least 95% of public swimming pools rated "satisfactory" during the year ending 06/30/21.	DOH Division of Environmental Health EHDB	CHD Environmental Health Database Program