



Local Health Jurisdiction Funding Opportunity Invitation Regional Representative for VFC and AFIX Site Visit Activities

December 1, 2017

The Washington State Department of Health Office of Immunization and Child Profile (department) is offering funding opportunities to Local Health Jurisdictions (LHJs) to serve as the regional representative to implement Vaccines for Children (VFC) and Assessment, Feedback, Incentives, eXchange (AFIX) site visit activities in a cross-jurisdictional sharing (CJS) model for the regional.

This funding opportunity is separate from the Promotion of Immunizations to Increase Vaccination Rates.

Background:

The department currently partners with LHJs to administer VFC and AFIX requirements of the Centers for Disease Control and Prevention Program Grant through the consolidated contract system.

In 2016, the department brought together stakeholders from 13 LHJs and department immunization staff to streamline and improve how state and local public health agencies support VFC and AFIX tasks in the immunization consolidated contract.

The goals of this group were to:

1. Create a consistent statewide standard of immunization practices and vaccine compliance services.
2. Create efficiencies in the immunization services DOH/LHJs provide through consolidated contracts.

The recommendation of this group was to implement a CJS delivery model by adopting the nine Accountable Communities of Health (ACH) boundaries as the VFC/AFIX shared services regions. A representative agency identified for each of the nine regions would be responsible for all VFC and AFIX site visits, unannounced visits, and new provider enrollments in the region. The group recommended that all vaccine ordering and vaccine management work would be centralized at the department.

Qualifications for Funding:

1. Any LHJ within the region may apply to be the regional representative
2. For multi-county regions, the regional representative must be able to conduct work beyond county boundaries within their region (i.e., cross-jurisdictional)
3. The regional representative must meet all [expectations](#) and complete all [relevant work](#) by defined due dates
4. Applicant must provide a line-item (object-based) budget justification for funding requested
5. A commitment to continue as regional representative through December 2020

Project Period: July 1, 2018 – December 31, 2020

Initial Budget and Contract Period: July 2018 – June 2019

Maximum funding available per region for initial budget and contract period: see funding table below

Number of contracts awarded: One (1) per region

The funding available for this project is based on the percentage of providers in each region and is intended to cover all expenses for this work (including staffing, travel, supplies, and indirect costs). The table below provides the number and percentage of providers as of November 20, 2017, the counties in each region, and the maximum funding available per region for the initial contract period (July 1, 2018 – June 30 2019). **Please note: the provider count and percentage will be recalculated prior to the execution of the contract and final funding will be adjusted at that time to account for any increase or decrease in providers.**

| Region | Number of Providers in Region | Percentage of Providers | Maximum Funding Available per Region | Counties in the Region |
|--------|-------------------------------|-------------------------|--------------------------------------|---|
| 1 | 154 | 15% | \$74,468 | Island, San Juan, Skagit, Snohomish, Whatcom |
| 2 | 57 | 6% | \$27,563 | Clallam, Jefferson, Kitsap |
| 3 | 106 | 10% | \$51,257 | Cowlitz, Grays Harbor, Lewis, Mason, Pacific, Thurston, Wahkiakum |
| 4 | 54 | 5% | \$26,112 | Clark, Klickitat, Skamania |
| 5 | 87 | 8% | \$42,070 | Pierce |
| 6 | 293 | 28% | \$141,683 | King |
| 7 | 48 | 5% | \$23,211 | Chelan-Douglas, Grant, Okanogan |
| 8 | 129 | 12% | \$62,379 | Asotin, Benton-Franklin, Columbia, Garfield, Kittitas, Walla Walla, Whitman, Yakima |
| 9 | 106 | 10% | \$51,257 | Adams, Lincoln, NE Tri, Spokane |
| 1034 | | | \$500,000 | |

Expectations of Regional Representative:

1. Work will be completed within proposed budget and timeline
2. Be able and willing to follow standardized VFC and AFIX program processes and procedures as established by DOH
3. Be willing to represent the region and DOH in addition to their LHJ. Must be aware of resources in each LHJ community to make appropriate referrals and connections
4. Be able and willing to participate in a statewide team comprised of the staff from all regions and DOH. The team will help guide and implement continuous communication and quality improvement of the immunization tasks and service delivery model
5. Commit to providing services to the region for the project period (July 1, 2018 – December 31, 2020)
6. Meet performance expectations and quality and customer service standards

7. Have the capacity in the organization for use of technology (e.g., laptops, Wi-Fi cards, etc.) in the field and sufficient support to complete contracted tasks
 - a. All site visits must be performed online using the Provider Education and Assessment Reporting (PEAR) system and be submitted at the time of the visit (real-time data entry). Site visits using a paper process may only be used in the event internet access cannot be established even with equipment intended for access.
8. Agree to implement the work and not subcontract the work to other LHJs or entities
9. Maintain adequate staffing to complete work throughout the project period, including a contingency plan for staff turn-over or leave of absence.
10. Be efficient in planning site visit travel within the region and coordinate visits in the same geographic area to maximize completion of required visits
11. Agree to limit staffing to no more than one person per 100 VFC site visits in order to dedicate staff to this work, develop high levels of expertise, and concentrate training time to a smaller select team of people — enabling ongoing cost efficiencies
12. Agree to limit staffing to no more than one person per 50 AFIX visits in order to dedicate staff to this work, develop high levels of expertise, and concentrate training time to a smaller select team of people — enabling ongoing cost efficiencies

Relevant Work:

1. Participate in DOH led training
 - a. Annual VFC and AFIX trainings
 - b. Quarterly webinar meetings between statewide reviewers
 - c. Observation VFC site visits with DOH VFC QA Coordinator
 - d. Observation AFIX visits with DOH AFIX Coordinator
2. Conduct VFC compliance site visits to enrolled providers in region
 - a. Follow site-selection protocol for identifying and prioritizing sites to visit
 - i. Providers seen within 24 months of last visit
 - ii. New providers receive first site visit within 12 months of enrollment
 - iii. Travel considerations
 - b. Manage provider selection process and scheduling
 - c. Follow CDC Site Visit Reviewer Guide and program processes and procedures as established by DOH
 - d. Perform site visits online using PEAR and submit at the time of the visit
 - e. Conduct all necessary follow-up activities related to identified compliance issues
3. Conduct Unannounced Storage and Handling Visits to 5% of enrolled providers in the region
 - a. Follow site-selection protocol for identifying sites to visit
 - b. Follow CDC Site Visit Reviewer Guide and program processes and procedures as established by DOH
 - c. Perform site visits online using PEAR and submit at the time of the visit
 - d. Conduct all necessary follow-up activities related to identified compliance issues

4. Conduct AFIX visits to 25% of enrolled providers in the region
 - a. Follow site-selection protocol for identifying sites to visit
 - b. Follow program processes and procedures as established by CDC and DOH.
 - a. Assist providers with implementation of selected quality improvement strategies (e.g.: IIS training)
 - b. Complete follow-up visits and regular check-ins with provider
 - c. Complete visit entry into AFIX on-line tool within 5 days of completed activity

5. New Provider Enrollment
 - a. Conduct new enrollment training visits to providers enrolling or re-enrolling in the Childhood Vaccine Program
 - b. Assure provider site meets enrollment guidelines and can meet the criteria for program participation.
 - c. Provide education to interested new provider sites
 - d. Provider recruitment
 - e. Follow program processes and procedures as established by DOH for new provider enrollment

Application Deadline: February 15, 2018

Below is a timeline with due dates for submission for this funding opportunity. DOH reserves the right to adjust this schedule as it deems necessary, at its sole discretion.

| Timeline | Date |
|--|----------------------|
| Application Release Date | 12/4/2017 |
| Written Questions Due from LHJs (submit questions to OICPContracts@doh.wa.gov) | 12/15/2017 |
| DOH Written Response to Questions | 12/21/2017 |
| Conference Call with LHJs (Thursday January 4, 2018, 10:00 a.m. – 11:00 a.m.) | 1/4/2018 |
| Applications Due | 2/15/2018 |
| Projected Announcement of Regional Representatives Selected | 3/1/2018 |
| Negotiate contract terms, if applicable | 3/6/2018 – 3/12/2018 |
| Projected Contract Start Date | 7/1/2018 |

Please complete project application by February 15, 2018 and send to OICPContracts@doh.wa.gov. Applications received after this date will not be considered.

For project questions please contact [Janel Jorgenson \(janel.jorgenson@doh.wa.gov\)](mailto:janel.jorgenson@doh.wa.gov). For budget or contract questions please contact [Tawney Harper \(tawney.harper@doh.wa.gov\)](mailto:tawney.harper@doh.wa.gov).