**Exhibit A**

**Statement of Work**

**Contract Term: 2018-2020**

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| --- | --- | --- | --- | --- | --- |
| **DOH Program Name or Title:** Office of Immunization and Child Profile - Promotion of Immunizations to Increase Vaccination Rates | | **Local Health Jurisdiction Name:** <Select One> | | | |
| **Contract Number:** <Select One> | | | | | |
| **SOW Type**: | **Revision # (for this SOW)** | | **Funding Source**  Federal  State  Other | **Federal Compliance**  **(check if applicable)**  FFATA (Transparency Act)  Research & Development | **Type of Payment**  Reimbursement  Fixed Price |
| **Period of Performance:** July 1, 2018 through June 30, 2019 | | |
| **Statement of Work Purpose:** The purpose of this statement of work is to contract with local health to conduct activities to increase immunization coverage rates. | | | | | |
| **Revision Purpose:** The purpose of this revision is to | | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Chart of Accounts Program Name or Title** | **CFDA #** | **BARS Revenue Code** | **Master Index Code** | **Funding**  **(LHJ Use**  **Start Date** | **Period**  **Only)**  **End Date** | **Current Consideration** | **Change** | **Total Consideration** |
|  |  |  |  |  |  | 0 | 0 | 0 |
|  |  |  |  |  |  | 0 | 0 | 0 |
|  |  |  |  |  |  | 0 | 0 | 0 |
|  |  |  |  |  |  | 0 | 0 | 0 |
|  |  |  |  |  |  | 0 | 0 | 0 |
|  |  |  |  |  |  | 0 | 0 | 0 |
| **TOTALS** | | | | | | **0** | **0** | **0** |

| **Task Number** | **Task/Activity/Description** | **\*May Support PHAB Standards/Measures** | **Deliverables/Outcomes** | **Due Date/Time Frame** | **Payment Information and/or Amount** |
| --- | --- | --- | --- | --- | --- |
| 1 | Develop a proposal to work with partners within the local health jurisdiction on activities to increase immunization coverage rates, increase immunization and promotion activities, and improve collaboration with community partners. The proposal must include a line-item, object-based budget and must meet the goals and objectives outlined in the *Local Health Jurisdiction Funding Opportunity, Promotion of Immunizations to Increase Vaccination Rates* Guidelines. |  | Written proposal, to include a line-item, object-based budget (template will be provided) and a report that shows starting immunization rates for the target population | August 1, 2018 |  |
| 2 | Upon approval of proposal, implement the plan with the target population identified. |  | Written report describing the progress made on reaching milestones for activities identified in the plan (template will be provided) | November 30, 2018  March 31, 2019 |  |
| 3 | Conduct an evaluation of the interventions implemented |  | Final written report, including a report showing ending immunization rates for the target population (template will be provided) | June 30, 2019 |  |

**\*For Information Only:**

Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at:

<http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf>

**Program Specific Requirements/Narrative**

This section is for program specific information not included elsewhere.

**Special Requirements (if applicable)**

**Federal Funding Accountability and Transparency Act (FFATA)**

This statement of work is supported by federal funds that require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how the federal funds are spent.

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Data Universal Numbering System (DUNS®) number.

Information about the LHJ and this statement of work will be made available on [USASpending.gov](https://www.usaspending.gov/Pages/default.aspx) by DOH as required by P.L. 109-282.

**Program Manual, Handbook, Policy References**

**Staffing Requirements**

**Restrictions on Funds (what funds can be used for which activities, not direct payments, etc)**

**Special References (RCWs, WACs, etc.)**

**Monitoring Visits (frequency, type)**

**Definitions**

**Assurances/Certifications**

**Special Billing Requirements**

**Special Instructions**

**Other**

**DOH Program Contact (Name, Program Title, Mailing Address, Email Address, Phone & Fax Number)**

**DOH Fiscal Contact (if different from Program Contact)**