

**CONTRACT BETWEEN
NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS
AND
STATE OF FLORIDA DEPARTMENT OF HEALTH
FOR OPERATION OF
THE NASSAU COUNTY HEALTH DEPARTMENT
CONTRACT YEAR 2012-2013**

This agreement ("Agreement") is made and entered into between the State of Florida, Department of Health ("State") and the Nassau County Board of County Commissioners ("County"), through their undersigned authorities, effective October 1, 2012.

RECITALS

A. Pursuant to Chapter 154, F.S., 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. Nassau County Health Department ("CHD") is one of the County Health Departments created throughout Florida. It is necessary for the parties hereto to enter into this Agreement in order to assure 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 forgoing recitals are true and correct and incorporated herein by reference.

2. TERM. The parties mutually agree that this Agreement shall be effective from October 1, 2012, through September 30, 2013, or until a written agreement replacing this Agreement is entered into between the parties, whichever is later, unless this Agreement is otherwise terminated pursuant to the termination provisions set forth in paragraph 8, below.

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

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

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

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

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

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

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

*i. The State's appropriated responsibility (direct contribution excluding any state fees, Medicaid contributions or any other funds not listed on the Schedule C) as provided in Attachment II, Part II is an amount not to exceed **\$2,256,509** (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 **\$1,004,541** (amount listed under the "Board of County Commissioners Annual Appropriations 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 Agreement 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 Agreement 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, Bureau of Budget 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, Bureau of Budget Management.

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

County Health Department Trust Fund
Nassau County Health Department
PO Box 517
Fernandina Beach, FL 32034-0517

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 Statewide Services. The director/administrator shall be selected by the State with the concurrence of the County. The director/administrator of the CHD shall insure 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 Office of Planning, Evaluation & Data Analysis 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 Agreement. 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 those promulgated by the Generally Accepted Accounting Principles (GAAP) and 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 System Information Resource (FLAIR).
- 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 Nassau 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 the core 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 Statewide Services has approved the transfer. The Deputy Secretary for Statewide Services 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 Agreement. 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 Agreement for a period of five (5) years after termination of this Agreement. If an audit has been initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings.

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

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

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 Agreement.

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

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

i. The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report;

ii. A written explanation to the county of service variances reflected in the 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, Bureau of Budget 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, 2013 for the report period October 1, 2012 through December 31, 2012;
- ii. June 1, 2013 for the report period October 1, 2012 through March 31, 2013;
- iii. September 1, 2013 for the report period October 1, 2012 through June 30, 2013; and
- iv. December 1, 2013 for the report period October 1, 2012 through September 30, 2013.

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

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

8. TERMINATION.

a. Termination at Will. This Agreement 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 Agreement become unavailable, either party may terminate this Agreement 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 Agreement 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 Agreement 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 Agreement.

9. MISCELLANEOUS. The parties further agree:

a. Availability of Funds. If this Agreement, any renewal hereof, or any term, performance or payment hereunder, extends beyond the fiscal year beginning July 1, 2013, it is agreed that the performance and payment under this Agreement 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 Agreement are as follows:

For the State:

For the County:

Michael J. Beard
Name

Ted Selby
Name

Administrative Services Director
Title

County Manager
Title

PO Box 517

96135 Nassau Place

Fernandina Beach, FL 32035
Address

Yulee, FL 32097
Address

(904) 548-1800 X5233
Telephone

(904) 491-7380
Telephone

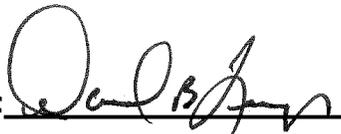
If different contract managers are designated after execution of this Agreement, the name, address and telephone number of the new representative shall be furnished in writing to the other parties and attached to originals of this Agreement.

c. Captions. The captions and headings contained in this Agreement 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 24 page agreement to be executed by their undersigned officials as duly authorized effective the 1st day of October, 2012.

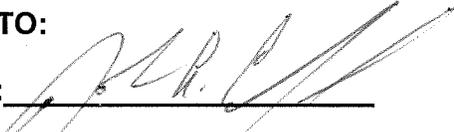
**BOARD OF COUNTY COMMISSIONERS
FOR NASSAU COUNTY**

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

SIGNED BY: 
NAME: Daniel B. Leeper
TITLE: Chairman
DATE: 10-8-12

SIGNED BY:  FOR
NAME: John H. Armstrong, MD
TITLE: Surgeon General/Secretary of Health
DATE: 10/23/12

ATTESTED TO:

SIGNED BY: 
NAME: John A. Crawford
TITLE: Ex-Officio Clerk
DATE: 10-10-12

SIGNED BY: 
NAME: Eugenia J. Ngo-Seidel, MD, MPH
TITLE: CHD Director/Administrator
DATE: 9/24/12

MES 10-10-12

Approved as to form by the
Nassau County Attorney


David A. Hallman

ATTACHMENT I

NASSAU 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	Monthly reporting on DH Form 1008*. Additional reporting requirements, under development, will be required. The additional reporting requirements will be communicated upon finalization.
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	Periodic financial and programmatic reports as specified by the program office.
6.	Immunization	Periodic reports as specified by the department regarding the surveillance/investigation of reportable vaccine preventable diseases, vaccine usage accountability as documented in Florida SHOTS, the assessment of various immunization levels as documented in Florida SHOTS and forms reporting adverse events following immunization.
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.

ATTACHMENT I (Continued)

- Socio-demographic data on persons tested for HIV in CHD clinics should be reported on Lab Request DH Form 1628 or Post-Test Counseling DH Form 1628C. These reports are to be sent to the Headquarters HIV/AIDS office within 5 days of the initial post-test counseling appointment or within 90 days of the missed post-test counseling appointment.
9. School Health Services Requirements as specified in the Florida School Health Administrative Guidelines (May 2012).
 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 the CHD Guide to Surveillance and Investigations.

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

ATTACHMENT II

NASSAU 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 09/30/12	90,322	312,722	403,044
2. Drawdown for Contract Year October 1, 2012 to September 30, 2013	77,521	70,526	148,047
3. Special Capital Project use for Contract Year October 1, 2012 to September 30, 2013			
4. Balance Reserved for Contingency Fund October 1, 2012 to September 30, 2013			

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

ATTACHMENT II.

**NASSAU COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2012 to September 30, 2013

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
1. GENERAL REVENUE - STATE					
015040 AIDS PREVENTION	0	0	0	0	0
015040 AIDS SURVEILLANCE	0	0	0	0	0
015040 ALG/CESSPOOL IDENTIFICATION AND ELIMINATION	0	0	0	0	0
015040 ALG/CONTR TO CHDS-AIDS PATIENT CARE	0	0	0	0	0
015040 ALG/CONTR TO CHDS-AIDS PATIENT CARE NETWORK	0	0	0	0	0
015040 ALG/CONTR TO CHDS-SOVEREIGN IMMUNITY	0	0	0	0	0
015040 MINORITY OUTREACH-PENALVER CLINIC - MIAMI-DADE	0	0	0	0	0
015040 PREPAREDNESS GRANT MATCH	4,725	0	4,725	0	4,725
015040 SCHOOL HEALTH GENERAL REVENUE	45,160	0	45,160	0	45,160
015040 STATEWIDE DENTISTRY NETWORK - ESCAMBIA	0	0	0	0	0
015040 STD GENERAL REVENUE	0	0	0	0	0
015040 TREASURE COAST MIDWIFERY - MARTIN	0	0	0	0	0
015040 HEALTHY START MED-WAIVER - CLIENT SERVICES	0	0	0	0	0
015040 JESSIE TRICE CANCER CTR/HEALTH CHOICE - MIAMI-DADE	0	0	0	0	0
015040 LA LIGA-LEAGUE AGAINST CANCER - MIAMI-DADE	0	0	0	0	0
015040 MANATEE COUNTY RURAL HEALTH SERVICES	0	0	0	0	0
015040 METRO ORLANDO URBAN LEAGUE - ORANGE	0	0	0	0	0
015040 MIGRANT LABOR CAMP SANITATION	0	0	0	0	0
015040 DENTAL SPECIAL INITIATIVES	6,541	0	6,541	0	6,541
015040 DUVAL TEEN PREGANCY PREVENTION - DUVAL	0	0	0	0	0
015040 FAMILY PLANNING GENERAL REVENUE	26,829	0	26,829	0	26,829
015040 FL CLPPP SCREENING & CASE MANAGEMENT	0	0	0	0	0
015040 FL HEPATITIS & LIVER FAILURE PREVENTION/CONTROL	0	0	0	0	0
015040 HEALTHY START MED WAIVER - SOBRA	0	0	0	0	0
015040 ALG/IPO HEALTHY START/IPO	0	0	0	0	0
015040 ALG/PRIMARY CARE	112,960	0	112,960	0	112,960
015040 BREAST & CERVICAL - ADMINISTRATION/CASE MANAGEMENT	0	0	0	0	0
015040 COMMUNITY SMILES - MIAMI-DADE	0	0	0	0	0
015040 COMMUNITY TB PROGRAM	11,079	0	11,079	0	11,079
015040 STATE GENERAL REVENUE	0	0	0	0	0
015050 NON-CATEGORICAL GENERAL REVENUE	641,766	0	641,766	0	641,766
GENERAL REVENUE TOTAL	849,060	0	849,060	0	849,060
2. NON GENERAL REVENUE - STATE					
015010 ALG/CONTR. TO CHDS-BIOMEDICAL WASTE	1,830	0	1,830	0	1,830
015010 ALG/CONTR. TO CHDS-SAFE DRINKING WATER PRG	0	0	0	0	0
015010 WIC PROGRAM FOOD COST SUPPLEMENTAL WIC2S	27,457	0	27,457	0	27,457
015010 SUPERACT SERVICES	7,000	0	7,000	0	7,000
015010 PREPAREDNESS GRANT MATCH	0	0	0	0	0
015010 PUBLIC SWIMMING POOL PROGRAM	0	0	0	0	0
015010 SCHOOL HEALTH TOBACCO TF	71,141	0	71,141	0	71,141
015010 TOBACCO ADMINISTRATION & MANAGEMENT	0	0	0	0	0
015010 TOBACCO COMMUNITY INTERVENTION	109,255	0	109,255	0	109,255
015020 TRANSFER FROM ANOTHER STATE AGENCY	0	0	0	0	0
015020 TRANSFER FROM ANOTHER STATE AGENCY	0	0	0	0	0
015020 TRANSFER FROM ANOTHER STATE AGENCY	0	0	0	0	0
015060 NON-CATEGORICAL TOBACCO REBASING	1,451	0	1,451	0	1,451

ATTACHMENT II.

**NASSAU COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2012 to September 30, 2013

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
NON GENERAL REVENUE TOTAL	218,134	0	218,134	0	218,134
3. FEDERAL FUNDS - State					
007000 PUBLIC HEALTH INFRASTRUCTURE 2011-2012 EXT	14,532	0	14,532	0	14,532
007000 AIDS PREVENTION	0	0	0	0	0
007000 AIDS SURVEILLANCE	0	0	0	0	0
007000 BIOTERRORISM HOSPITAL PREPAREDNESS	0	0	0	0	0
007000 CHRONIC DISEASE PREVENTION & HEALTH PROMOTION	0	0	0	0	0
007000 COASTAL BEACH MONITORING PROGRAM	12,312	0	12,312	0	12,312
007000 TUBERCULOSIS CONTROL - FEDERAL GRANT	0	0	0	0	0
007000 UNINTENDED/UNWANTED PREG-TEEN PREGNANCY PREV	16,500	0	16,500	0	16,500
007000 WIC ADMINISTRATION	516,545	0	516,545	0	516,545
007000 WIC BREASTFEEDING PEER COUNSELING	49,862	0	49,862	0	49,862
007000 STD FEDERAL GRANT - CSPS	0	0	0	0	0
007000 STD PROGRAM INFERTILITY PREVENTION PROJECT (IPP)	0	0	0	0	0
007000 SYPHILIS ELIMINATION	0	0	0	0	0
007000 TEENAGE PREGNANCY PREVENTION REPLICATION	0	0	0	0	0
007000 TITLE X HIV/AIDS PROJECT	0	0	0	0	0
007000 TOBACCO FAITH BASED PROJECT	0	0	0	0	0
007000 RAPE PREVENTION & EDUCATION	0	0	0	0	0
007000 RYAN WHITE	0	0	0	0	0
007000 RYAN WHITE - EMERGING COMMUNITIES	0	0	0	0	0
007000 RYAN WHITE-AIDS DRUG ASSIST PROG-ADMIN	15,000	0	15,000	0	15,000
007000 RYAN WHITE-CONSORTIA	64,917	0	64,917	0	64,917
007000 SAFE SLEEP EDUCATION	4,500	0	4,500	0	4,500
007000 MINORITY INVOLVEMENT IN HIV/AIDS PROGRAM	0	0	0	0	0
007000 PHP - CITIES READINESS INITIATIVE	0	0	0	0	0
007000 PRECONCEPTION HEALTH CARE	4,951	0	4,951	0	4,951
007000 PREGNANCY ASSOCIATED MORTALITY PREVENTION	0	0	0	0	0
007000 PUBLIC HEALTH PREPAREDNESS BASE EXT	47,249	0	47,249	0	47,249
007000 PUBLIC HEALTH PREPAREDNESS BASE	89,821	0	89,821	0	89,821
007000 IMMUNIZATION WIC LINKAGES	0	0	0	0	0
007000 MCH BGTF-GADSDEN SCHOOL CLINIC	0	0	0	0	0
007000 MCH BGTF-HEALTHY START COALITIONS	0	0	0	0	0
007000 MCH QUALITY IMPROVEMENT ACTIVITIES MCHBG	0	0	0	0	0
007000 MINORITY AIDS INITIATIVE	0	0	0	0	0
007000 MINORITY AIDS INITIATIVE TCE COLLABORATIVE	0	0	0	0	0
007000 FGTF/FAMILY PLANNING-TITLE X	54,441	0	54,441	0	54,441
007000 HEALTHY HOMES AND LEAD POISONING GRANT	0	0	0	0	0
007000 HIV HOUSING FOR PEOPLE LIVING WITH AIDS	0	0	0	0	0
007000 HIV INCIDENCE SURVEILLANCE	0	0	0	0	0
007000 IMMUNIZATION FEDERAL GRANT ACTIVITY SUPPORT	4,884	0	4,884	0	4,884
007000 IMMUNIZATION FIELD STAFF EXPENSE	0	0	0	0	0
007000 COLORECTAL CANCER SCREENING 2009-10	0	0	0	0	0
007000 DENTAL SERVICES	0	0	0	0	0
007000 ENHANCE COMPREHENSIVE PREVENTION PLANNING AND IMPL	0	0	0	0	0
007000 EXPANDED TESTING INITIATIVE (ETI)	0	0	0	0	0
007000 FGTF/AIDS MORBIDITY	0	0	0	0	0
007000 FGTF/BREAST & CERVICAL CANCER-ADMIN/CASE MAN	0	0	0	0	0

ATTACHMENT II.

**NASSAU COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2012 to September 30, 2013

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
3. FEDERAL FUNDS - State						
015009	MEDIPASS WAIVER-HLTHY STRT CLIENT SERVICES	0	0	0	0	0
015009	MEDIPASS WAIVER-SOBRA	0	0	0	0	0
007055	ARRA FEDERAL GRANT - SCHEDULE C	0	0	0	0	0
015075	SCHOOL HEALTH TITLE XXI	18,817	0	18,817	0	18,817
015075	SUMMER FOOD PROGRAM INSPECTIONS	250	0	250	0	250
015075	TRANSFER OF FEDERAL GRANT FROM OTHER AGENCY	0	0	0	0	0
FEDERAL FUNDS TOTAL		914,581	0	914,581	0	914,581
4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE						
001020	TANNING FACILITIES	3,000	0	3,000	0	3,000
001020	BODY PIERCING	400	0	400	0	400
001020	TATOO FACILITY	600	0	600	0	600
001020	MOBILE HOME AND PARKS	2,100	0	2,100	0	2,100
001020	FOOD HYGIENE PERMIT	13,000	0	13,000	0	13,000
001020	BIOHAZARD WASTE PERMIT	8,000	0	8,000	0	8,000
001020	PRIVATE WATER CONSTR PERMIT	0	0	0	0	0
001020	LIMITED USE PUBLIC WATER SYSTEMS	23,500	0	23,500	0	23,500
001020	PUBLIC WATER CONSTR PERMIT	0	0	0	0	0
001020	NON-SDWA SYSTEM PERMIT	0	0	0	0	0
001020	SAFE DRINKING WATER	0	0	0	0	0
001020	SWIMMING POOLS	20,000	0	20,000	0	20,000
001092	OSDS PERMIT FEE STATE	0	0	0	0	0
001092	I & M ZONED OPERATING PERMIT	0	0	0	0	0
001092	ENVIRONMENTAL HEALTH FEE STATE	113,598	0	113,598	0	113,598
001092	SEPTIC TANK SITE EVALUATION	0	0	0	0	0
001092	NON SDWA LAB SAMPLE	0	0	0	0	0
001092	OSDS VARIANCE FEE	0	0	0	0	0
001092	PUBLIC WATER CONST PERMIT STATE	0	0	0	0	0
001092	OSDS REPAIR PERMIT	0	0	0	0	0
001170	LAB FEE CHEMICAL ANALYSIS	0	0	0	0	0
001170	WATER ANALYSIS-POTABLE	0	0	0	0	0
001170	NONPOTABLE WATER ANALYSIS	0	0	0	0	0
010304	MQA INSPECTION FEE	250	0	250	0	250
001206	CENTRAL OFFICE SURCHARGE	10,765	0	10,765	0	10,765
FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL		195,213	0	195,213	0	195,213
5. OTHER CASH CONTRIBUTIONS - STATE						
010304	LIMITED PUBLIC USE WATER SYSTEMS	2,000	0	2,000	0	2,000
090001	DRAW DOWN FROM PUBLIC HEALTH UNIT	77,521	0	77,521	0	77,521
OTHER CASH CONTRIBUTIONS TOTAL		79,521	0	79,521	0	79,521
6. MEDICAID - STATE/COUNTY						
001056	MEDICAID PHARMACY	0	0	0	0	0
001076	MEDICAID TB	0	0	0	0	0
001078	MEDICAID ADMINISTRATION OF VACCINE	0	0	0	0	0
001079	MEDICAID CASE MANAGEMENT	0	0	0	0	0
001081	MEDICAID CHILD HEALTH CHECK UP	0	0	0	0	0

ATTACHMENT II.

**NASSAU COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2012 to September 30, 2013

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
6. MEDICAID - STATE/COUNTY						
001082	MEDICAID DENTAL	0	505,549	505,549	0	505,549
001083	MEDICAID FAMILY PLANNING	0	27,000	27,000	0	27,000
001087	MEDICAID STD	0	0	0	0	0
001089	MEDICAID AIDS	0	0	0	0	0
001147	MEDICAID HMO CAPITATION	0	0	0	0	0
001191	MEDICAID MATERNITY	0	0	0	0	0
001192	MEDICAID COMPREHENSIVE CHILD	0	8,000	8,000	0	8,000
001193	MEDICAID COMPREHENSIVE ADULT	0	27,000	27,000	0	27,000
001194	MEDICAID LABORATORY	0	0	0	0	0
001208	MEDIPASS \$3.00 ADM. FEE	0	0	0	0	0
001059	MEDICAID LOW INCOME POOL	0	97,873	97,873	0	97,873
001051	EMERGENCY MEDICAID	0	0	0	0	0
001058	MEDICAID - BEHAVIORAL HEALTH	0	0	0	0	0
001071	MEDICAID - ORTHOPEDIC	0	0	0	0	0
001072	MEDICAID - DERMATOLOGY	0	0	0	0	0
001075	MEDICAID - SCHOOL HEALTH CERTIFIED MATCH	0	0	0	0	0
001069	MEDICAID - REFUGEE HEALTH	0	0	0	0	0
001055	MEDICAID - HOSPITAL	0	0	0	0	0
001148	MEDICAID HMO NON-CAPITATION	0	3,030	3,030	0	3,030
001074	MEDICAID - NEWBORN SCREENING	0	0	0	0	0
MEDICAID TOTAL		0	668,452	668,452	0	668,452
7. ALLOCABLE REVENUE - STATE						
018000	REFUNDS	0	0	0	0	0
037000	PRIOR YEAR WARRANT	0	0	0	0	0
038000	12 MONTH OLD WARRANT	0	0	0	0	0
ALLOCABLE REVENUE TOTAL		0	0	0	0	0
8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE						
	PHARMACY SERVICES	0	0	0	52,897	52,897
	LABORATORY SERVICES	0	0	0	23,152	23,152
	TB SERVICES	0	0	0	0	0
	IMMUNIZATION SERVICES	0	0	0	52,593	52,593
	STD SERVICES	0	0	0	0	0
	CONSTRUCTION/RENOVATION	0	0	0	0	0
	WIC FOOD	0	0	0	1,416,530	1,416,530
	ADAP	0	0	0	57,629	57,629
	DENTAL SERVICES	0	0	0	0	0
	OTHER (SPECIFY)	0	0	0	0	0
	OTHER (SPECIFY)	0	0	0	0	0
OTHER STATE CONTRIBUTIONS TOTAL		0	0	0	1,602,801	1,602,801
9. DIRECT LOCAL CONTRIBUTIONS - BCC/TAX DISTRICT						
008010	CONTRIBUTION FROM CITY GOVERNMENT	0	0	0	0	0
008020	CONTRIBUTION FROM HEALTH CARE TAX NOT THRU BCC	0	0	0	0	0
008040	BCC GRANT/CONTRACT	0	0	0	0	0
008030	CONTRIBUTION FROM HEALTH CARE TAX	0	2,000	2,000	0	2,000

ATTACHMENT II.

**NASSAU COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2012 to September 30, 2013

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
9. DIRECT LOCAL CONTRIBUTIONS - BCC/TAX DISTRICT						
008034	BCC CONTRIBUTION FROM GENERAL FUND	0	1,004,541	1,004,541	0	1,004,541
DIRECT COUNTY CONTRIBUTION TOTAL		0	1,006,541	1,006,541	0	1,006,541
10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY						
001060	CHD SUPPORT POSITION	0	0	0	0	0
001077	RABIES VACCINE	0	0	0	0	0
001077	CHILD CAR SEAT PROG	0	2,000	2,000	0	2,000
001077	PERSONAL HEALTH FEES	0	21,145	21,145	0	21,145
001077	AIDS CO-PAYS	0	0	0	0	0
001094	ENVIRONMENTAL HEALTH FEE COUNTY	0	36,706	36,706	0	36,706
001094	LOCAL ORDINANCE FEES	0	0	0	0	0
001114	NEW BIRTH CERTIFICATES	0	23,836	23,836	0	23,836
001115	VITAL STATISTICS - DEATH CERTIFICATE	0	25,000	25,000	0	25,000
001117	VITAL STATS-ADM. FEE 50 CENTS	0	1,020	1,020	0	1,020
001073	CO-PAY FOR THE AIDS CARE PROGRAM	0	0	0	0	0
001025	CLIENT REVENUE FROM GRC	0	0	0	0	0
001040	CELL PHONE ADMINISTRATIVE FEE	0	0	0	0	0
FEES AUTHORIZED BY COUNTY TOTAL		0	109,707	109,707	0	109,707
11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY						
001009	RETURNED CHECK ITEM	0	0	0	0	0
001029	THIRD PARTY REIMBURSEMENT	0	151,900	151,900	0	151,900
001029	HEALTH MAINTENANCE ORGAN. (HMO)	0	0	0	0	0
001054	MEDICARE PART D	0	0	0	0	0
001077	RYAN WHITE TITLE II	0	0	0	0	0
001090	MEDICARE PART B	0	14,000	14,000	0	14,000
001190	HEALTH MAINTENANCE ORGANIZATION	0	0	0	0	0
005040	INTEREST EARNED	0	0	0	0	0
005041	INTEREST EARNED-STATE INVESTMENT ACCOUNT	0	6,810	6,810	0	6,810
007010	U.S. GRANTS DIRECT	0	0	0	0	0
008050	SCHOOL BOARD CONTRIBUTION	0	99,958	99,958	0	99,958
008060	SPECIAL PROJECT CONTRIBUTION	0	0	0	0	0
010300	SALE OF GOODS AND SERVICES TO STATE AGENCIES	0	250	250	0	250
010301	EXP WITNESS FEE CONSULTNT CHARGES	0	0	0	0	0
010405	SALE OF PHARMACEUTICALS	0	0	0	0	0
010409	SALE OF GOODS OUTSIDE STATE GOVERNMENT	0	0	0	0	0
011001	HEALTHY START COALITION CONTRIBUTIONS	0	237,387	237,387	0	237,387
011007	CASH DONATIONS PRIVATE	0	2,000	2,000	0	2,000
012020	FINES AND FORFEITURES	0	10,500	10,500	0	10,500
012021	RETURN CHECK CHARGE	0	100	100	0	100
028020	INSURANCE RECOVERIES-OTHER	0	0	0	0	0
090002	DRAW DOWN FROM PUBLIC HEALTH UNIT	0	70,526	70,526	0	70,526
011000	HEALTHY START CHILD GRANT	0	13,000	13,000	0	13,000
011000	LOW INCOME POOL SUB CONTRACT	0	68,137	68,137	0	68,137
011000	GRANT DIRECT-COUNTY HEALTH DEPARTMENT DIRECT SERVICES	0	0	0	0	0
011000	ST VINCENTS MOBILE HEALTH VAN	0	15,000	15,000	0	15,000
011000	ST VINCENTS FBBCEDP RAINBOW KOMEN OTHER	0	17,504	17,504	0	17,504

ATTACHMENT II.

**NASSAU COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2012 to September 30, 2013

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY					
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT DIRECT-ARROW	0	0	0	0	0
011000 GRANT DIRECT-QUANTUM DENTAL	0	0	0	0	0
011000 GRANT DIRECT-HEALTH CARE DISTRICT PAHOKEE	0	0	0	0	0
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT-DIRECT	0	0	0	0	0
010402 RECYCLED MATERIAL SALES	0	0	0	0	0
010303 FDLE FINGERPRINTING	0	0	0	0	0
007050 ARRA FEDERAL GRANT	0	0	0	0	0
001010 RECOVERY OF BAD CHECKS	0	0	0	0	0
008065 FCO CONTRIBUTION	0	0	0	0	0
011006 RESTRICTED CASH DONATION	0	0	0	0	0
028000 INSURANCE RECOVERIES	0	0	0	0	0
001033 CMS MANAGEMENT FEE - PMPMP	0	0	0	0	0
010400 SALE OF GOODS OUTSIDE STATE GOVERNMENT	0	0	0	0	0
010500 REFUGEE HEALTH	0	0	0	0	0
005045 INTEREST EARNED-THIRD PARTY PROVIDER	0	0	0	0	0
005043 INTEREST EARNED-CONTRACT/GRANT	0	0	0	0	0
010306 DOH/DOC INTERAGENCY AGREEMENT	0	0	0	0	0
011002 ARRA FEDERAL GRANT - SUB-RECIPIENT	0	0	0	0	0
011004 LOW INCOME POOL - SUBRECIPIENT	0	0	0	0	0
OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL	0	707,072	707,072	0	707,072
12. ALLOCABLE REVENUE - COUNTY					
018000 REFUNDS	0	68,750	68,750	0	68,750
037000 PRIOR YEAR WARRANT	0	0	0	0	0
038000 12 MONTH OLD WARRANT	0	0	0	0	0
COUNTY ALLOCABLE REVENUE TOTAL	0	68,750	68,750	0	68,750
13. BUILDINGS - COUNTY					
ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	333,260	333,260
GROUNDS MAINTENANCE	0	0	0	0	0
OTHER (SPECIFY)	0	0	0	0	0
INSURANCE	0	0	0	18,690	18,690
UTILITIES	0	0	0	0	0
OTHER (SPECIFY)	0	0	0	0	0
BUILDING MAINTENANCE	0	0	0	63,682	63,682
BUILDINGS TOTAL	0	0	0	415,632	415,632
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

ATTACHMENT II.

NASSAU COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department

October 1, 2012 to September 30, 2013

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
14. OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST FUND - COUNTY					
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTIONS TOTAL	0	0	0	0	0
GRAND TOTAL CHD PROGRAM	2,256,509	2,560,522	4,817,031	2,018,433	6,835,464

**ATTACHMENT II.
NASSAU COUNTY HEALTH DEPARTMENT**

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

October 1, 2012 to September 30, 2013

	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)	1.04	590	867	15,105	12,947	15,105	12,947	31,964	24,140	56,104
STD (102)	0.67	408	734	9,285	7,959	9,285	7,959	18,215	16,273	34,488
HIV/AIDS PREVENTION (03A1)	0.02	0	0	614	526	614	526	2,280	0	2,280
HIV/AIDS SURVEILLANCE (03A2)	0.04	0	0	908	779	908	779	3,374	0	3,374
HIV/AIDS PATIENT CARE (03A3)	0.51	0	0	12,556	10,762	12,556	10,762	46,636	0	46,636
ADAP (03A4)	0.47	0	0	6,189	5,305	6,189	5,305	22,988	0	22,988
TB CONTROL SERVICES (104)	0.41	182	560	6,969	5,974	6,969	5,974	18,906	6,980	25,886
COMM. DISEASE SURV. (106)	2.41	0	841	39,777	34,094	39,777	34,094	78,141	69,601	147,742
HEPATITIS PREVENTION (109)	0.01	42	53	199	171	199	171	391	349	740
PUBLIC HEALTH PREP AND RESP (116)	1.90	0	26	38,022	32,590	38,022	32,590	137,070	4,154	141,224
VITAL STATISTICS (180)	1.49	3,918	8,428	20,300	17,400	20,300	17,400	0	75,400	75,400
COMMUNICABLE DISEASE SUBTOTAL	8.97	5,140	11,509	149,924	128,507	149,924	128,507	359,965	196,897	556,862
B. PRIMARY CARE:										
CHRONIC DISEASE SERVICES (210)	0.25	171	24	4,845	4,153	4,845	4,153	0	17,996	17,996
TOBACCO PREVENTION (212)	2.15	0	72	38,565	33,056	38,565	33,056	119,530	23,712	143,242
WIC (21W1)	11.88	0	0	184,558	158,360	184,558	158,360	685,836	0	685,836
WIC BREASTFEEDING PEER COUNSELING (21W2)	1.13	0	0	16,125	13,821	16,125	13,821	59,892	0	59,892
FAMILY PLANNING (223)	9.28	1,545	3,570	130,085	111,502	130,085	111,502	280,412	202,762	483,174
IMPROVED PREGNANCY OUTCOME (225)	0.00	3	3	45	38	45	38	88	78	166
HEALTHY START PRENATAL (227)	3.93	731	5,642	48,799	41,826	48,799	41,826	3,670	177,580	181,250
COMPREHENSIVE CHILD HEALTH (229)	0.77	376	436	13,516	11,585	13,516	11,585	42,126	8,076	50,202
HEALTHY START INFANT (231)	3.29	425	3,312	34,181	29,298	34,181	29,298	12,257	114,701	126,958
SCHOOL HEALTH (234)	3.83	0	120,539	73,075	62,636	73,075	62,636	135,118	136,304	271,422
COMPREHENSIVE ADULT HEALTH (237)	16.77	821	3,849	230,839	197,434	230,839	197,434	165,395	691,151	856,546
COMMUNITY HEALTH DEVELOPMENT (238)	1.42	0	1,215	18,818	16,130	18,818	16,130	14,532	55,364	69,896
DENTAL HEALTH (240)	11.07	3,924	9,161	202,574	173,635	202,574	173,635	38,958	713,460	752,418
PRIMARY CARE SUBTOTAL	65.77	7,996	147,823	996,025	853,474	996,025	853,474	1,557,814	2,141,184	3,698,998
C. ENVIRONMENTAL HEALTH:										
Water and Onsite Sewage Programs										
COASTAL BEACH MONITORING (347)	0.07	146	146	3,351	2,872	3,351	2,872	12,312	134	12,446
LIMITED USE PUBLIC WATER SYSTEMS (357)	1.18	173	615	20,841	17,864	20,841	17,864	37,528	39,882	77,410
PUBLIC WATER SYSTEM (358)	0.00	0	0	0	0	0	0	0	0	0
PRIVATE WATER SYSTEM (359)	0.03	0	177	588	504	588	504	0	2,184	2,184
INDIVIDUAL SEWAGE DISP. (361)	3.06	371	1,385	59,868	51,315	59,868	51,315	166,909	55,457	222,366
Group Total	4.34	690	2,323	84,648	72,555	84,648	72,555	216,749	97,657	314,406
Facility Programs										
FOOD HYGIENE (348)	0.33	30	197	6,644	5,695	6,644	5,695	19,544	5,134	24,678
BODY PIERCING FACILITIES SERVICES	0.03	0	3	595	510	595	510	1,223	987	2,210
GROUP CARE FACILITY (351)	0.38	50	132	7,660	6,586	7,660	6,586	12,202	16,290	28,492
MIGRANT LABOR CAMP (352)	0.00	0	0	0	0	0	0	0	0	0
HOUSING,PUBLIC BLDG SAFETY,SANITATION (353).00	0.00	0	0	0	0	0	0	0	0	0

**ATTACHMENT II.
NASSAU COUNTY HEALTH DEPARTMENT**

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

October 1, 2012 to September 30, 2013

	FTE's (0.00)	Clients Units	Services/ Visits	Quarterly Expenditure Plan				State	County	Grand Total
				1st	2nd (Whole dollars only)	3rd	4th			
C. ENVIRONMENTAL HEALTH:										
Facility Programs										
MOBILE HOME AND PARKS SERVICES (354)	0.25	24	61	4,577	3,924	4,577	3,924	9,967	7,035	17,002
SWIMMING POOLS/BATHING (360)	0.56	192	400	12,925	11,078	12,925	11,078	34,513	13,493	48,006
BIOMEDICAL WASTE SERVICES (364)	0.30	114	117	5,520	4,732	5,520	4,732	15,161	5,343	20,504
TANNING FACILITY SERVICES (369)	0.16	20	46	2,671	2,289	2,671	2,289	9,762	158	9,920
Group Total	2.01	430	956	40,592	34,814	40,592	34,814	102,372	48,440	150,812
Groundwater Contamination										
STORAGE TANK COMPLIANCE (355)	0.04	2	4	1,063	911	1,063	911	3,906	42	3,948
SUPER ACT SERVICE (356)	0.24	46	92	6,131	5,255	6,131	5,255	22,530	242	22,772
Group Total	0.28	48	96	7,194	6,166	7,194	6,166	26,436	284	26,720
Community Hygiene										
TATTOO FACILITIES SERVICES	0.01	0	0	267	229	267	228	800	191	991
COMMUNITY ENVIR. HEALTH (345)	0.00	0	0	0	0	0	0	0	0	0
INJURY PREVENTION (346)	0.00	0	0	0	0	0	0	0	0	0
LEAD MONITORING SERVICES (350)	0.00	0	0	0	0	0	0	0	0	0
PUBLIC SEWAGE (362)	0.00	0	0	0	0	0	0	0	0	0
SOLID WASTE DISPOSAL (363)	0.00	0	0	0	0	0	0	0	0	0
SANITARY NUISANCE (365)	0.00	0	0	0	0	0	0	0	0	0
RABIES SURVEILLANCE/CONTROL SERVICES (366)	0.08	0	0	1,870	1,603	1,870	1,603	3,630	3,316	6,946
ARBOVIRUS SURVEILLANCE (367)	0.79	0	2,605	13,214	11,326	13,214	11,326	28,287	20,793	49,080
RODENT/ARTHROPOD CONTROL (368)	0.00	0	0	0	0	0	0	0	0	0
WATER POLLUTION (370)	0.00	0	0	0	0	0	0	0	0	0
INDOOR AIR (371)	0.00	0	0	0	0	0	0	0	0	0
RADIOLOGICAL HEALTH (372)	0.00	0	0	0	0	0	0	0	0	0
TOXIC SUBSTANCES (373)	0.00	0	0	0	0	0	0	0	0	0
Group Total	0.88	0	2,605	15,351	13,158	15,351	13,157	32,717	24,300	57,017
ENVIRONMENTAL HEALTH SUBTOTAL	7.51	1,168	5,980	147,785	126,693	147,785	126,692	378,274	170,681	548,955
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	3,289	2,819	3,289	2,819	12,216	0	12,216
NON-OPERATIONAL COSTS SUBTOTAL	0.00	0	0	3,289	2,819	3,289	2,819	12,216	0	12,216
TOTAL CONTRACT	82.25	14,304	165,312	1,297,023	1,111,493	1,297,023	1,111,492	2,308,269	2,508,762	4,817,031

ATTACHMENT III

NASSAU 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

NASSAU COUNTY HEALTH DEPARTMENT

FACILITIES UTILIZED BY THE COUNTY HEALTH DEPARTMENT

Facility Description	Location	Owned By
Administration and Field Services (Healthy Families/Healthy Start/ Epidemiology)	30 South 4th Street Fernandina Beach, FL	Nassau County BOCC
Environmental Health Division	96135 Nassau Place Yulee, FL	Nassau County BOCC
Fernandina Beach Clinic	1620 Nectarine Street Fernandina Beach, FL	Nassau County BOCC
Yulee Clinic	86014 Page's Dairy Road Yulee, FL	Nassau County BOCC
Dental Clinic/Health Education (Full Service School)	86207 Felmore Road Yulee, FL	Nassau County School Board
Callahan Clinic	45397 Mickler Street Callahan, FL	Nassau County BOCC
Hilliard Clinic	37203 Pecan Street Hilliard, FL	Nassau County BOCC

ATTACHMENT V
NASSAU COUNTY HEALTH DEPARTMENT
SPECIAL PROJECTS SAVINGS PLAN

IDENTIFY THE AMOUNT OF CASH THAT IS ANTICIPATED TO BE SET ASIDE ANNUALLY FOR THE PROJECT.

<u>CONTRACT YEAR</u>	<u>STATE</u>	<u>COUNTY</u>	<u>TOTAL</u>
2008-2009	\$ _____	\$ _____	\$ _____ -
2009-2010	\$ _____	\$ _____	\$ _____ -
2010-2011	\$ _____	\$ _____	\$ _____ -
2011-2012	\$ _____	\$ _____	\$ _____ -
2012-2013	\$ _____	\$ _____	\$ _____ -
PROJECT TOTAL	\$ _____ -	\$ _____ -	\$ _____ -

SPECIAL PROJECT CONSTRUCTION/RENOVATION PLAN

PROJECT NAME: _____

LOCATION/ ADDRESS: _____

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

SQUARE FOOTAGE: _____

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

ESTIMATED PROJECT INFORMATION:

START DATE (*initial expenditure of funds*): _____

COMPLETION DATE: _____

DESIGN FEES: \$ _____

CONSTRUCTION COSTS: \$ _____

FURNITURE/EQUIPMENT \$ _____

TOTAL PROJECT COST: \$ _____ -

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.