

September 19, 2002

The Honorable Board of Supervisors  
County of Los Angeles  
383 Kenneth Hahn Hall of Administration  
500 West Temple Street  
Los Angeles, California 90012

Dear Supervisors:

**IMMUNIZATION PROGRAM FISCAL YEAR 2002-2003 (All Districts) (3 Votes)**

IT IS RECOMMENDED THAT YOUR BOARD:

1. Approve and instruct the Director of Health Services, or his designee, to sign the attached Standard Agreement No. 02-25166, Exhibit I, with the California Department of Health Services (CDHS), retroactive to July 1, 2002 through June 30, 2003, to provide continued funding support for the Immunization Program for Fiscal Year (FY) 2002-2003, in the amount of \$1,118,265.
2. Approve and instruct the Director of Health Services, or his designee, to offer and sign Amendment No. 1 to two Women, Infants, and Children agreements, similar to Exhibit II, with Northeast Valley Health Corporation, Inc and with Public Health Foundation Enterprises, Inc., to continue the provision of assessment and referral services, retroactive to July 1, 2002 through June 30, 2003, for a total maximum obligation of \$64,000 and \$50,243 respectively, 100% offset by State funds, with provision for a 12-month automatic renewal through June 30, 2004, contingent upon receipt of CDHS funding for FY 2003-2004.
3. Approve and instruct the Director of Health Services, or his designee, to offer and sign Amendment No. 1, substantially similar to Exhibit III, with the following 16 providers: Arroyo Vista Family Health Center, Asian Pacific Health Care Venture, Avalon Municipal Hospital and Clinic, Chinatown Service Center, Clinica Msr. Oscar A. Romero, Clinica Para Las Americas, East Los Angeles Health Task Force, Eisner Pediatric and Family Medical Center, El Proyecto del Barrio, Family Health Care Centers of Greater Los Angeles, Inc., Koryo Health Foundation, Mission City Community Network, Inc., Northeast Valley Health Corporation, QueensCare Family Clinics, Valley Community Clinic, and Venice Family

Clinic, retroactive to July 1, 2002 through June 30, 2003, for a total maximum County obligation of \$696,050, 100% offset by State funds, with provisions for 12-month automatic renewal through June 30, 2004, contingent upon receipt of CDHS funding for FY 2003-2004.

4. Delegate authority to the Director of Health Services, or his designee, to sign any amendments to the Standard Agreement with CDHS for FY 2002-2003 and FY 2003-2004 if applicable, to provide financial support for the Immunization Program which do not individually exceed 25% of the total amount of the Standard Agreement, following County Counsel's review and approval.

PURPOSE OF THE RECOMMENDED ACTIONS/JUSTIFICATION:

In approving the recommended actions, the Board is authorizing the Director of Health Services, or his designee, to:

- sign Standard Agreement No. 02-25166 with the CDHS to provide continued funding support for the Immunization Program for FY 2002-2003 in the amount of \$1,118,265.
- sign Amendment No. 1 to two Women, Infants, and Children (WIC) agreements and to 16 Community Health Centers (CHCs) agreements, retroactive to July 1, 2002 through June 30, 2003, to continue the provision of immunization services in Los Angeles County, for a total maximum County obligation of \$114,243 and \$696,050 respectively, 100% offset by State funds, with provisions for a 12-month automatic renewal through June 30, 2004, contingent upon receipt of CDHS funding for FY 2003-2004.
- sign amendments to the Standard Agreement with CDHS to provide financial support for the Immunization Program for FY 2002-2003 which do not individually exceed 25% of the total amount of the Standard Agreement following County Counsel's review and approval.

Current County policy and procedures require the timely submission of contracts for Board approval. However, this amendment/agreement was not scheduled for placement on the Board's agenda prior to its effective date because the Department did not receive the agreement until May 31, 2002 and because of conflicting Departmental priorities.

Board approval of the Standard Agreement with the CDHS is required in order to receive State financial support for the Immunization Program for FY 2002-2003. Approval of the recommended amendment to the WIC agreements and the 16 CHC agreements will enable the Department to continue providing vital immunization services to Los Angeles County communities.

FISCAL IMPACT/FINANCING:

The total program cost for FY 2002-2003 is \$1,124,931, which is funded by \$1,118,265 in State funds and a net County cost of \$6,666 to cover indirect costs.

For the two recommended WIC amendments, the maximum County obligation is \$64,000 for Northeast Valley Health Corporation, Inc. (County Agreement No. H-212985) and \$50,243 for Public Health Foundation Enterprises, Inc. (County Agreement No. H-212966). The maximum County obligation for the amendments with the 16 CHCs is \$696,050. Contract costs are 100% offset by State funds. Funding is included in the FY 2002-2003 Adopted Budget. There is no additional net County cost associated with this action.

**FACTS AND PROVISIONS/LEGAL REQUIREMENTS:**

For a number of years, the Board has authorized continuation of immunization activities and has approved agreements provided by State funding.

In January 1999, the CDHS released an RFA to community-based agencies. In April 1999, the CDHS selected 16 subcontract agencies for the award of contract funds to provide immunization services throughout Los Angeles County. On July 18, 2000, the Board approved the FY 2000-01 Standard Agreement and new subcontract agreements with 16 community based-agencies, with provisions for 12-month automatic renewals through June 30, 2002. On August 21, 2001, the Board authorized the termination of the subcontract agreement with Community Health Foundation of East Los Angeles (CHFELA), and instructed the Department to reallocate funding to other service providers in an effort to continue services to former patients displaced as a result of the termination.

On September 4, 2001, the Board approved two WIC subcontracts with provision for a 12-month automatic renewal through June 2003, for the provision of assessment and referral services; and fifteen subcontract agreements with community based-agencies, with provisions for a 12-month automatic renewal through June 2003 to continue providing immunization services throughout Los Angeles County.

On June 4, 2002, the Board approved a subcontract agreement with Franciscan Clinics, D.B.A. QueensCare Family Clinics to provide services previously provided by CHFELA.

On June 18, 2002, the Board approved subcontract amendments to continue the Promotora Collaborative Project (Esperanza Community Housing Corporation - \$228,660 and St. John Well Child Center - \$30,952) through June 30, 2003.

On May 31, 2002, DHS received Standard Agreement No. 02-25166 (Exhibit I) for supplemental funding for the Immunization Program for the period July 1, 2002 through June 30, 2003.

County Counsel has reviewed and approved the Standard Agreement (Exhibit I) and amendments (Exhibits II and III) as to use and form.

Attachments A and B provide additional information. Attachment C is the Grant Management Statement for grant awards exceeding \$100,000.

The Honorable Board of Supervisors  
September 19, 2002  
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CONTRACTING PROCESS:

It is not appropriate to advertise amendments and State Standard agreements on the L.A. County Online Web Site.

IMPACT ON CURRENT SERVICES (OR PROJECTS):

The Board's approval of the Standard Agreement with CDHS and the recommended amendments to the two WIC subcontracts and the 16 CHC agreements will ensure the continued provision of immunization services throughout the County.

When approved, this Department requires three signed copies of the Board's action.

Respectfully submitted,

Thomas L. Garthwaite, M.D.  
Director and Chief Medical Officer

TLG:jr

Attachments (5)

c: Chief Administrative Officer  
County Counsel  
Executive Officer, Board of Supervisors

BLET/CD2271.JR

SUMMARY OF AGREEMENTS

IMMUNIZATION PROGRAM FISCAL YEAR 2002-03

1. TYPE OF SERVICES:

Provision of a comprehensive immunization services delivery program within Los Angeles County to assist in the prevention of the occurrence and transmission of vaccine-preventable disease.

2. AGENCY ADDRESS AND CONTRACT PERSON:

Immunization Branch  
 California Department of Health Services (CDHS)  
 2151 Berkeley Way, Room 712  
 Berkeley, California 94704  
 Attention: John L. Dunajski, Assistant Chief, Immunization Branch  
 Telephone: (510) 540-2065; Facsimile/FAX: (510) 883-6015

3. TERM OF CDHS AGREEMENT

July 1, 2002 through June 30, 2003.

4. TERM OF THE WIC AND CHC AMENDMENTS

July 1, 2002 through June 30, 2003 with provision for an additional 12-month automatic renewal.

5. FINANCIAL INFORMATION:

	<u>FY 2002-03</u>	<u>FY 2003-04</u>
	<u>Budget</u>	<u>Budget</u>
Total Program Costs	\$1,124,931	\$1,124,931
Less: State reimbursement	<u>1,118,265</u>	<u>1,118,265</u>
Net County Cost	\$ 6,666	\$ 6,666

6. SUBCONTRACT SERVICES:

To provide enhanced immunization services.

<u>Contract No.</u>	<u>Contractor</u>	<u>FY 2002-2003</u> <u>Max. Obligation</u>
<u>WIC Subcontract Services:</u>		
H-212985	Northeast Valley Health Corporation, Inc. (NEVHC) - WIC 1172 North Maclay Avenue San Fernando, California 91340-1300 Attention: Kim Wyard, Executive Director Telephone: 818-898-1399/Facsimile: 818-365-7670	\$64,000

**SUMMARY OF AGREEMENTS (cont'd)**

<u>Contract No.</u>	<u>Contractor</u>	<u>FY 2002-2003 Max. Obligation</u>
H-212966	Public Health Foundation Enterprise, Inc. (PHFE) - WIC 13200 Crossroads Parkway North, Suite 135 City of Industry, California 91746 Attention: Karen Garcia, Corporate Manager Telephone: 562-699-7320/Facsimile: 562-699-8856	\$50,243
 <u>Community Health Center Subcontract Services</u>		
H-213067	Arroyo Vista Family Health Center 6000 North Figueroa Street Los Angeles, California 90042 Attention: Martina Ramirez, Ph.D. Telephone: 323-254-5221/Facsimile: 323-254-4618	\$99,684
H-213069	Asian Pacific Health Care Venture 1630 Hillhurst Avenue, #200 Los Angeles, California 90027 Attention: Mika Aoki Telephone: 323-644-3880/Facsimile: 323-644-3892	\$10,000
H-212987	Avalon Municipal Hospital and Clinic 100 Falls Canyon Road, P.O. Box 1663 Avalon, California 90704 Attention: Krista Steuter, Clinic Manager Telephone: 310-510-0700/Facsimile: 213-680-9427	\$10,000
H-213008	Chinatown Service Center 767 North Hill Street, Suite 400 Los Angeles, California 90012 Attention: Christina Hsu Telephone: 213-880-1740/Facsimile: 213-680-9427	\$13,499
H-212967	Clinica Msr. Oscar A. Romero 123 South Alvarado Street Los Angeles, California 90017 Attention: Roland Palencia Telephone: 213-989-7700/Facsimile: 213-989-7701	\$10,000
H-212986	Clinica Para Las Americas 318 South Alvarado Street Los Angeles, California 90057 Attention: Linda Dacon Telephone: 213-484-8434/Facsimile: 213-484-1814	\$37,382

<u>Contract No.</u>	<u>Contractor</u>	<u>FY 2002-2003 Max. Obligation</u>
H-213083	East Los Angeles Health Task Force 2120 East 6 <sup>th</sup> Street Los Angeles, California 90023 Attention: Susana Arellano Telephone: 323-261-2171/Facsimile: 323-261-0246	\$74,338
H-213010	Eisner Pediatric and Family Medical Center 1530 South Olive Street Los Angeles, California 90016 Attention: Chona J. de Leon Telephone: 213-746-1037/Facsimile: 213-746-9379	\$86,687
H-212988	El Proyecto del Barrio 8902 Woodman Avenue Arleta, California 91331 Attention: Loraine Gutierrez Telephone: 818-830-7033/Facsimile: 818- 830-7280	\$67,850
H-213084	Family Health Care Centers of Greater Los Angeles, Inc. 6501 South Garfield Avenue Bell Gardens, California 90201 Attention: Robert Hooper, Executive Director Telephone: 562-928-9600/Facsimile 562-927-6974	\$15,945
H-212989	Koryo Health Foundation 1058 South Vermont Avenue Los Angeles, California 90006 Attention: David Suh Telephone: 213-380-8833/Facsimile: 213-368-6047	\$10,000
H-212968	Mission City Community Network, Inc. 16206 Parthenia Street North Hills, California 91343 Attention: Laura Valenzuela Telephone: 818-895-3100/Facsimile: 818-893-9464	\$30,373
H-212984	Northeast Valley Health Corporation 1172 North Maclay Avenue San Fernando, California 91340-1300 Attention: Kim Wyard, Executive Director Telephone: 818-898-1388/Facsimile: 818-365-7670	\$100,000
H-207612	Franciscan Clinics D.B.A. QueensCare Family Clinics 1300 North Vermont Avenue, Suite 102 Los Angeles, California 90027 Attention: Susan K. Fuentes, Vice President Telephone: 323-644-6191/Facsimile: 323-953-2757	\$99,972

**SUMMARY OF AGREEMENTS** (cont'd)

<u>Contract No.</u>	<u>Contractor</u>	<u>FY 2002-2003 Max. Obligation</u>
H-212951	Valley Community Clinic 6902 Coldwater Canyon Avenue North Hollywood, California 91605 Attention: Diane Chamberlain Telephone: 818-763-8836/Facsimile: 818-7630-7231	\$10,000
H-213009	Venice Family Clinic 604 Rose Avenue Venice, California 90291 Attention: Christine Lund Telephone: 310- 664-7721/Facsmile: 310-392-6642	\$20,320

7. PRIMARY GEOGRAPHIC AREA TO BE SERVED:

Countywide.

8. DESIGNATED ACCOUNTABLE FOR PROGRAM EVALUATION:

James G. Haughton, M.D., MPH., Medical Director, Public Health.

9. APPROVALS:

Public Health: John F. Schunhoff, Ph.D., Chief of Operations

Contract and Grants Division: Riley Austin, Acting Chief

County Counsel (as to form): Robert E. Ragland, Deputy County Counsel



Los Angeles County Chief Administrative Office
Grant Management Statement for Grants Exceeding \$100,000

Department: Health Services

Grant Project Title and Description
Immunization Program Supplemental FY 02-03 Funding.

Table with 3 columns: Funding Agency (CDHS), Program (Fed. Grant #/State Bill or Code #) (Standard Agreement No. 02-25166), Grant Acceptance Deadline (June 30, 2002)

Summary table with 4 columns: Total Amount of Grant (\$1,118,265), County Match Requirements (N/A), Grant Period (FY 2002-03), Begin Date (July 1, 2002), End Date (June 30, 2003), Number of Personnel Hired Under this Grant (Full Time, Part 2)

Obligations Imposed on the County When the Grant Expires

Table with 4 columns: Question, Yes, No, and a blank column for marking. Contains questions about personnel notification, temporary items, and program continuation.

Impact of additional personnel on existing space: N/A

Other requirements not mentioned above N/A

Signature \_\_\_\_\_ Date \_\_\_\_\_

Contract No. \_\_\_\_\_

**IMMUNIZATION PROGRAM - WOMEN, INFANTS, AND CHILDREN  
PROJECT SERVICES AGREEMENT**

**AMENDMENT NO. 1**

THIS AMENDMENT is made and entered into this \_\_\_\_\_ day  
of \_\_\_\_\_, 2002,

by and between

COUNTY OF LOS ANGELES  
(hereafter County)

PUBLIC HEALTH FOUNDATION  
ENTERPRISES, INC. (hereafter  
"Contractor")

WHEREAS, reference is made to that certain document entitled  
"IMMUNIZATION PROGRAM - WOMEN, INFANTS, AND CHILDREN PROJECT  
SERVICES AGREEMENT" dated September 4, 2001, and further  
identified as County Agreement No. H-212966 (hereafter  
"Agreement"); and

WHEREAS, it is the intent of the parties hereto to amend  
Agreement to provide for the changes set forth herein; and

WHEREAS, said Agreement provides that changes may be made in  
the form of a written Amendment which is formally approved and  
executed by the parties

NOW, THEREFORE, the parties hereby agree as follows:

1. This Amendment shall become effective on July 1, 2002  
and shall remain in full force and effect to, and including,

June 30, 2003. Thereafter, this Agreement shall be automatically renewed for an additional twelve (12) months effective July 1, 2003 through June 30, 2004, subject to the availability of State funding to the County. If such State funding is not forthcoming, this Agreement shall terminate June 30, 2003.

2. Effective on the effective date of the Amendment, Paragraph 2, DESCRIPTION OF SERVICES, shall be revised as follows:

"2. DESCRIPTION OF SERVICES: Contractor shall provide services to County in the manner and form as described in the body of this Agreement and in Exhibits B-1 and C, Scopes of Work, attached hereto and incorporated herein by reference."

3. Effective on the effective date of this Amendment, Paragraph 3. MAXIMUM OBLIGATION OF COUNTY, shall be revised as follows:

"3. MAXIMUM OBLIGATION OF COUNTY: Upon the effective date of this agreement through June 30, 2003, the maximum obligation of County for Contractor's performance hereunder is Fifty Thousand, Two Hundred Forty Eight Dollars (\$50,248) as set forth in Exhibit B-1, Schedule B-1, Budget, attached hereto and incorporated herein by reference.

During the automatic renewal period of July 1, 2003 through June 30, 2004, the maximum obligation of County, for services provided hereunder shall not exceed, Fifty Thousand,

Two Hundred Forty Eight Dollars (\$50,248) as set forth in Exhibit C, Schedule C, Budget, attached hereto and incorporated herein by reference.

Contractor shall use funds only to pay for expenditures as set forth in the schedules, attached hereto and incorporated herein by reference, and only to the extent that such funds are reimbursable to County.

Contractor may reallocate up to ten percent (10%) of any amount in any expenditure category to any other expenditure category. Director may authorize Contractor to exceed any expenditure category beyond the ten percent (10%) reallocation providing County's maximum obligation shall not exceed that provided herein, and provided further that Contractor submits a written request and justification to the Director for any reallocation in excess of ten percent (10%) and obtains Director's prior written approval. Expenditure category amounts are those set forth in Exhibit B-1, Schedule B-1 and Exhibit C, Schedule C, as the total funding for Personnel Services, Operating Expenses, and Indirect Costs."

4. Effective on the effective date of this Amendment, Paragraph 4. BILLING AND PAYMENT, shall be revised to read as follows:

"4. BILLING AND PAYMENT: County agrees to compensate Contractor in accordance with the payment structure set forth

in Exhibit B-1, Schedule B-1 and Exhibit C, Schedule C, attached hereto and incorporated herein by reference. Each invoice shall be approved and signed by the Executive Director of Contractor or his duly authorized designee. Contractor shall submit original invoices directly to: (1) Department of Health Services, Public Health Programs and Services, 1055 Wilshire Boulevard, Suite 1950, Los Angeles, California 90017, Attention: Medical Director/Deputy Director, with duplicate invoice to: (2) Department of Health Services, Financial Management, 5555 Ferguson Drive, 1<sup>st</sup>. Floor, City of Commerce, California 90022, Attention: Contracts and Grants Unit; no later than (15) days after the end of each calendar month. After receipt of a correct and accurate billing, County shall pay Contractor in accordance with its customary accounts payable procedures.

Notwithstanding any other provisions of this Agreement, this Agreement shall be subject to all the provisions of the State agreement for this project, and payment to Contractor under the terms of this Agreement shall be subject to County's receipt of sufficient State funds.

In the Event that County, due to audit or otherwise, is required to reimburse grant funds to the State of California Department of Health Services or has its grant funds reduced, County in turn may require Contractor to reimburse County for

any or all of the payments made hereunder or may reduce payments to Contractor."

5. Exhibit B-1, "Scope of Work", Schedule B-1 "Budget", Exhibit C, "Scope of Work", and Schedule C, "Budget" shall be added to the Agreement.

6. COMPLIANCE WITH JURY SERVICE PROGRAM

A. Jury Service Program. This Contract is subject to the provisions of the County's ordinance entitled Contractor Employee Jury Service ("Jury Service Program") as codified in Sections 2.203.010 through 2.203.090 of the Los Angeles County Code.

B. Written Employee Jury Service Policy:

(1) Unless Contractor has demonstrated to the County's satisfaction either that Contractor is not a "Contractor " as defined under the Jury Service Program (Section 2.203.020 of the County Code) or that contractor qualifies for an exception to the Jury Service Program (Section 2.203.070 of the County Code), Contractor shall have and adhere to a written policy that provides that its Employees shall receive from the contractor, on an annual basis, no less than five days of regular pay for actual jury service. The policy may provide that Employees deposit any fees received for such jury service with the Contractor or that the

Contractor deduct from the Employee's regular pay the fees received for jury service.

(2) For purposes of this Section, "Contractor" means a person, partnership, corporation or other entity which has a contract with the County or a subcontract with a County contractor and has received or will receive an aggregate sum of \$50,000 or more in any twelve-month period under one or more County contracts or subcontracts. "Employee" means any California resident who is a full time employee of Contractor. "Full time" means 40 hours or more worked per week, or a lesser number of hours if: a) the lesser number is a recognized industry standard as determined by the County, or b) Contractor has a long-standing practice that defines the lesser number of hours as full-time. Full-time employees providing short-term, temporary services of 90 days or less within a twelve-month period are not considered full-time for purposes of the Jury Service Program. If Contractor uses any subcontractor to perform services for he County under the Contract, the subcontractor shall also be subject to the provisions of this Section. The provisions of this Section shall be inserted into any such subcontract agreement and a copy of the Jury Service Program shall

be attached to the agreement.

(3) If Contractor is not required to comply with the Jury Service Program when the Contract commences, Contractor shall have a continuing obligation to review the applicability of its "exception status" from the Jury Service Program, and Contractor shall immediately notify County if Contractor at any time either comes within the Jury Service Program's definition of "Contractor" or if contractor no longer qualifies for an exception to the Program. In either event, contractor shall immediately implement a written policy consistent with the Jury Service Program. The County may also require, at any time during the Contract and at its sole discretion, that contractor demonstrate to the County's satisfaction that Contractor either continues to remain outside of the Jury Service Program's definition of "Contractor" and/or that contractor continues to qualify for an exception to the Program.

(4) Contractor's violation of this Section of the contract may constitute a material breach of the Contract. In the event of such material breach, County may, in its sole discretion, terminate the Contract and/or bar Contractor from the award of future County contracts for a period of time consistent with the



seriousness of the breach.

7. CONTRACTOR'S OBLIGATIONS AS A "BUSINESS ASSOCIATE"  
UNDER THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF  
1996 ("HIPAA"): The performance of Contractor's obligations under this Agreement could require Contractor's receipt of, or access to, County Health Information. County is subject to the administrative simplification requirements of HIPAA, and regulations promulgated thereunder, including the Standards for Privacy of Individually Identifiable Health Information at 45 Code of Federal Regulations ("C.F.R.") Parts 160 and 164 ("Privacy Regulations"). Further such, Privacy Regulations require County to enter into a contract with Contractor, in its role as a "business associate", in order to mandate certain protections for the privacy and security of Health Information, the provisions and obligations of which, Contractor as a "business associate" under said Privacy Regulations, are set forth in this Paragraph hereinbelow.

A. For purposes of this Paragraph, the following definitions apply:

(1) "Disclose", "Disclosed" and "Disclosure" mean, with respect to Health Information, the release, transfer, provision of access to, or divulging in any other manner of Health Information outside Contractor's internal operations or to other than its employees.

(2) "Health Information" means information that:

a. relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual;

b. identifies the individual (or for which there is a reasonable basis for believing that the information can be used to identify the individual); and

c. is received by Contractor from or on behalf of County, or is created by Contractor, or is made accessible to Contractor by County.

(3) "Use" (in both its verb and noun forms) or "Uses" means, with respect to Health Information, the sharing, employment, application, utilization, examination or analysis of such information with Contractor's internal operations.

B. Permitted Uses and Disclosures of Health

Information:

Contractor:

(1) shall Use and Disclose Health Information as necessary or appropriate to perform those activities as described in this Agreement;

(2) shall Disclose Health Information to County upon request;

(3) may, as necessary for the proper management and administration of its business or to carry out its legal responsibilities, Use Health Information; and

(4) disclose Health Information if:

- a. the Disclosure is required by law, or
- b. Contractor obtains reasonable assurance from the person to whom the information is Disclosed that the Health Information will be held confidentially and Used or further Disclosed only as required by law or for the purpose of which it was Disclosed to the person, and the person agrees to notify Contractor of any instances of which the person is aware in which the confidentiality of the Health Information has been breached. Contractor shall not use or Disclose Health Information for any purpose.

C. Appropriate Safeguards for Health Information.

Contractor warrants that it shall implement and maintain appropriate safeguards to prevent the Use or Disclosure of Health Information in any manner other than as permitted by this Paragraph.

D. Reporting Non-Permitted Use or Disclosure.

Contractor shall report to County each non-permitted Use or Disclosure that is made by Contractor, its employees, representatives, agents, or subcontractors but is not specifically permitted by this Agreement. The initial report shall be made by telephone call to County's Privacy Officer within forty-eight (48) hours from the time the Contractor becomes aware of the non-permitted Use or Disclosure, followed by a written report to the Privacy Officer no later than five (5) days from the date the Contractor becomes aware of the non-permitted Use or Disclosure.

E. Availability of Internal Practices, Books and Records to Government Agencies. Contractor agrees to make its internal practices, books and records relating to the Use and Disclosure of Health Information available to the Secretary of the federal Department of Health and Human Services for purposes of determining County's compliance with the Privacy Regulations.

F. Access to Amendment of Health Information. Contractor shall, to the extent County determines that any Health Information constitutes a "designated record set" under the Privacy Regulations, (1) make the Health Information specified by County available to the individual(s) identified by County as being entitled to

access and copy that Health Information, and (2) make any amendments to Health Information that are requested by County. Contractor shall provide such access and make such amendments within the time and in the manner specified by County.

G. Accounting of Disclosures of Health Information.

Upon County's request, Contractor shall provide to County an accounting of each Disclosure of Health Information made by Contractor or its employees, agents, representatives or subcontractors. The accounting shall include: (1) the date of the Disclosure; (2) the name, and address if known, of the entity or person who received the Health Information; (3) a brief description of the Health Information disclosed; and (4) a brief statement of the purpose of the Disclosure. For each Disclosure, Contractor shall track the information specified in (1) through (4), above, and shall securely maintain the information for six (6) years from the date of the Disclosure.

H. Term and Termination. In addition to and notwithstanding the termination provision set forth in the Agreement, the Agreement may be terminated immediately upon written notice by County to Contractor if County determines, in its sole discretion, that Contractor has violated any material term of this Paragraph. Contractor's obligation under subparagraphs "A" and including "C" of this Paragraph,

shall survive the termination or expiration of the Agreement.

I. Disposition of Health Information Upon Termination or Expiration. Upon termination or expiration of the Agreement, Contractor shall either return or destroy, in County's sole discretion and in accordance with any instructions by County, all Health Information in the possession or control of Contractor or its agents and subcontractors. However, if County determines that neither return nor destruction of Health Information is feasible, Contractor may retain Health Information provided that Contractor (1) continues to comply with the provisions of this Paragraph for as long as it retains Health Information, and (2) further limits Uses and Disclosures of that Health Information to those purposes that make its return or destruction infeasible.

J. No Third Party Beneficiaries. There are no third party beneficiaries to the provisions of this Paragraph.

K. Use of Subcontractors and Agents. Contractor shall require each of its agents and subcontractors that received Health Information from Contractor to execute a written agreement obligating the agent or subcontractor to comply with all the terms of this Paragraph.

8. Except for the changes set forth hereinabove, Agreement shall not be changed in any other respect by this Amendment.

In WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by its Director of Health Services and Jurisdiction has caused this Amendment to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

COUNTY OF LOS ANGELES

By \_\_\_\_\_  
Thomas L. Garthwaite, M.D.  
Director and Chief Medical Officer

NORTHEAST VALLEY HEALTH  
CORPORATION, INC.  
\_\_\_\_\_  
Contractor

By \_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

Title \_\_\_\_\_  
(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM BY THE  
OFFICE OF COUNTY COUNSEL  
LLOYD W. PELLMAN  
County Counsel

APPROVED AS TO CONTRACT  
ADMINISTRATION:

By \_\_\_\_\_  
Chief, Contracts and Grants  
Division

JR:4/11/01

JR



## SCOPE OF WORK (FISCAL YEAR 2003-2004)

The contractor will achieve the following goals and objectives. Objectives are achieved by the following work plan, composed of implementation and evaluation activities. Activities are to be completed according to the stated timelines and are to be documented as specified.

Agency: **Public Health Foundation Enterprises (PHFE) WIC Program**

Goal: Improve the immunization rates among PHFE-WIC children 0-24 months by conducting immunization assessment and referral (AR) activities, and coordinating with immunization providers to offer co-located and on-site services at participating PHFE-WIC Centers in Los Angeles County.

Measurable Objectives	Implementation Activities	Timeline	Evaluation/Documentation
I. Increase the proportion of children bringing in a documented Immunization record.	<p>Educate WIC families on the importance of immunizations.</p> <p>Publicize immunization assessment and referral project and request clients to bring in their child's immunization record to every WIC certification visit.</p>	07/01/03 – 06/30/04	See Objective III. Evaluation/Documentation.
II. For those infants providing documented immunization records, increase the rate of infants receiving the first dose of hepatitis B vaccine soon after birth and before hospital discharge.	<p>Identify the baseline rate of infants with a hepatitis B vaccine received soon after birth and before hospital discharge.</p> <p>Revise prenatal education class curricula to include hepatitis B education and re-train staff.</p>	07/01/03 – 07/31/03  07/01/03 – 06/30/04	<p>Baseline QMF (WIC database program) report of the hepatitis B status of infants born June 2002.</p> <p>Monthly QMF reports of the number and percent of infants that received the hepatitis B birth dose.</p>
III. For those children providing documented immunization records, increase the immunization coverage rates of children ages 0-24 months greater than 70%.	<p>Enter the immunization history of each child ages 0-24 months into the WIC ISIS-IZ program.</p> <p>Assess immunization status of WIC children ages 0-24 months at Los Angeles PHFE-WIC Centers by use of a documented immunization record.</p> <p>For children found either not to be up-to-date for age with recommended immunizations or without an immunization record, refer to their primary health care provider, co-located immunization provider, on-site immunization provider and/or provide a list of medical clinics offering free or low cost</p>	07/01/03 – 06/30/04	<p>ISIS-IZ outcome measures report on the total number of participants 12-17 months of age.</p> <p>–Of those 12-17 months, the number and percent with immunization histories in the WIC ISIS-IZ database.</p> <p>–Of those with immunization histories, the number and percent with 3 DTaP, 2 Polio, 2 HIB.</p> <p>ISIS-IZ outcome measures report on the total number of participants 24-29 months of age.</p> <p>-Of those 24-29 months, the number</p>

**PHFE WIC Program Scope of Work (continued)**

Measurable Objectives	Implementation Activities	Timeline	Evaluation/Documentation
	immunizations.  Provide immunization promotional incentives to children with up-to-date immunization records (optional).		and percent with immunization histories in the WIC ISIS-IZ database. -Of those with immunization histories, the number and percent with 4 DTaP, 3 Polio, 1 MMR, 3 HIB.
IV. Submit quarterly reports of Outcome Measures.	Utilize reporting form and submit to Los Angeles County Immunization Program (LACIP) WIC Coordinator.	10/10/03 01/10/04 04/10/04 07/10/04	Use reporting form provided by LACIP WIC Coordinator.

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Contract No. \_\_\_\_\_

**IMMUNIZATION PROJECT SERVICES AGREEMENT**

**AMENDMENT NO. 1**

THIS AMENDMENT is made and entered into this \_\_\_\_\_ day  
of \_\_\_\_\_, 2002,

by and between

COUNTY OF LOS ANGELES  
(hereafter County)

ARROYO VISTA FAMILY HEALTH  
CENTER (hereafter  
"Contractor")

WHEREAS, reference is made to that certain document entitled  
"IMMUNIZATION PROJECT SERVICES AGREEMENT" dated September 4,  
2001, and further identified as County Agreement No. H-213067  
(hereafter "Agreement"); and

WHEREAS, it is the intent of the parties hereto to amend  
Agreement to provide for the changes set forth herein; and

WHEREAS, said Agreement provides that changes may be made in  
the form of a written Amendment which is formally approved and  
executed by the parties

NOW, THEREFORE, the parties hereby agree as follows:

1. This Amendment shall become effective on July 1, 2002  
and shall remain in full force and effect to, and including,  
June 30, 2003. Thereafter, this Agreement shall be automatically

renewed for an additional twelve (12) months effective July 1, 2003 through June 30, 2004, subject to the availability of State funding to the County. If such State funding is not forthcoming, this Agreement shall terminate June 30, 2003.

2. Effective on the effective date of the Amendment, Paragraph 2, DESCRIPTION OF SERVICES, shall be revised as follows:

"2. DESCRIPTION OF SERVICES: Contractor shall provide services to County in the manner and form as described in the body of this Agreement and in Exhibits B-1 and C, Scopes of Work, attached hereto and incorporated herein by reference."

3. Effective on the effective date of this Amendment, Paragraph 3. MAXIMUM OBLIGATION OF COUNTY, shall be revised as follows:

"3. MAXIMUM OBLIGATION OF COUNTY: Upon the effective date of this agreement through June 30, 2003, the maximum obligation of County for Contractor's performance hereunder is Ninety Nine Thousand, Six Hundred Eighty Four Dollars (\$99,684) as set forth in Exhibit B-1, Schedule B-1, Budget, attached hereto and incorporated herein by reference.

During the automatic renewal period of July 1, 2003 through June 30, 2004, the maximum obligation of County, for services provided hereunder shall not exceed, Ninety Nine Thousand, Six Hundred Eighty Four Dollars (\$99,684) as set

forth in Exhibit C, Schedule C, Budget, attached hereto and incorporated herein by reference.

Contractor shall use funds only to pay for expenditures as set forth in the schedules, attached hereto and incorporated herein by reference, and only to the extent that such funds are reimbursable to County.

Contractor may reallocate up to ten percent (10%) of any amount in any expenditure category to any other expenditure category. Director may authorize Contractor to exceed any expenditure category beyond the ten percent (10%) reallocation providing County's maximum obligation shall not exceed that provided herein, and provided further that Contractor submits a written request and justification to the Director for any reallocation in excess of ten percent (10%) and obtains Director's prior written approval. Expenditure category amounts are those set forth in Exhibit B-1, Schedule B-1 and Exhibit C, Schedule C, as the total funding for Personnel Services and Operating Expenses."

4. Effective on the effective date of this Amendment, Paragraph 4. BILLING AND PAYMENT, shall be revised to read as follows:

"4. BILLING AND PAYMENT: County agrees to compensate Contractor in accordance with the payment structure set forth in Exhibit B-1, Schedule B-1 and Exhibit C, Schedule C,

attached hereto and incorporated herein by reference. Each invoice shall be approved and signed by the Executive Director of Contractor or his duly authorized designee. Contractor shall submit original invoices directly to: (1) Department of Health Services, Public Health, Immunization Program, 3530 Wilshire Boulevard, Suite 700, Los Angeles, California 90010, Attention: Contract Manager, with duplicate invoice to: (2) Department of Health Services, Financial Management, 5555 Ferguson Drive, 1<sup>st</sup>. Floor, City of Commerce, California 90022, Attention: Contracts and Grants Unit; no later than (15) days after the end of each calendar month. After receipt of a correct and accurate billing, County shall pay Contractor in accordance with its customary accounts payable procedures.

Notwithstanding any other provisions of this Agreement, this Agreement shall be subject to all the provisions of the State agreement for this project, and payment to Contractor under the terms of this Agreement shall be subject to County's receipt of sufficient State funds.

In the Event that County, due to audit or otherwise, is required to reimburse grant funds to the State of California Department of Health Services or has its grant funds reduced, County in turn may require Contractor to reimburse County for any or all of the payments made hereunder or may reduce

payments to Contractor."

5. Exhibit B-1, "Scope of Work", Schedule B-1 "Budget", Exhibit C, "Scope of Work", and Schedule C, "Budget" shall be added to the Agreement.

6. COMPLIANCE WITH JURY SERVICE PROGRAM

A. Jury Service Program. This Contract is subject to the provisions of the County's ordinance entitled Contractor Employee Jury Service ("Jury Service Program") as codified in Sections 2.203.010 through 2.203.090 of the Los Angeles County Code.

B. Written Employee Jury Service Policy:

(1) Unless Contractor has demonstrated to the County's satisfaction either that Contractor is not a "Contractor" as defined under the Jury Service Program (Section 2.203.020 of the County Code) or that contractor qualifies for an exception to the Jury Service Program (Section 2.203.070 of the County Code), Contractor shall have and adhere to a written policy that provides that its Employees shall receive from the contractor, on an annual basis, no less than five days of regular pay for actual jury service. The policy may provide that Employees deposit any fees received for such jury service with the Contractor or that the Contractor deduct from the Employee's regular pay the

fees received for jury service.

(2) For purposes of this Section, "Contractor" means a person, partnership, corporation or other entity which has a contract with the County or a subcontract with a County contractor and has received or will receive an aggregate sum of \$50,000 or more in any twelve-month period under one or more County contracts or subcontracts. "Employee" means any California resident who is a full time employee of Contractor. "Full time" means 40 hours or more worked per week, or a lesser number of hours if: a) the lesser number is a recognized industry standard as determined by the County, or b) Contractor has a long-standing practice that defines the lesser number of hours as full-time. Full-time employees providing short-term, temporary services of 90 days or less within a twelve-month period are not considered full-time for purposes of the Jury Service Program. If Contractor uses any subcontractor to perform services for the County under the Contract, the subcontractor shall also be subject to the provisions of this Section. The provisions of this Section shall be inserted into any such subcontract agreement and a copy of the Jury Service Program shall be attached to the agreement.



(3) If Contractor is not required to comply with the Jury Service Program when the Contract commences, Contractor shall have a continuing obligation to review the applicability of its "exception status" from the Jury Service Program, and Contractor shall immediately notify County if Contractor at any time either comes within the Jury Service Program's definition of "Contractor" or if contractor no longer qualifies for an exception to the Program. In either event, contractor shall immediately implement a written policy consistent with the Jury Service Program. The County may also require, at any time during the Contract and at its sole discretion, that contractor demonstrate to the County's satisfaction that Contractor either continues to remain outside of the Jury Service Program's definition of "Contractor" and/or that contractor continues to qualify for an exception to the Program.

(4) Contractor's violation of this Section of the contract may constitute a material breach of the Contract. In the event of such material breach, County may, in its sole discretion, terminate the Contract and/or bar Contractor from the award of future County contracts for a period of time consistent with the seriousness of the breach.

7. CONTRACTOR'S OBLIGATIONS AS A "BUSINESS ASSOCIATE"  
UNDER THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF  
1996 ("HIPAA"): The performance of Contractor's obligations  
under this Agreement could require Contractor's receipt of, or  
access to, County Health Information. County is subject to the  
administrative simplification requirements of HIPAA, and  
regulations promulgated thereunder, including the Standards for  
Privacy of Individually Identifiable Health Information at 45  
Code of Federal Regulations ("C.F.R.") Parts 160 and 164  
("Privacy Regulations"). Further such, Privacy Regulations  
require County to enter into a contract with Contractor, in its  
role as a "business associate", in order to mandate certain  
protections for the privacy and security of Health Information,  
the provisions and obligations of which, Contractor as a  
"business associate" under said Privacy Regulations, are set  
forth in this Paragraph hereinbelow.

A. For purposes of this Paragraph, the following  
definitions apply:

(1) "Disclose", "Disclosed" and "Disclosure"  
mean, with respect to Health Information, the release,  
transfer, provision of access to, or divulging in any  
other manner of Health Information outside Contractor's  
internal operations or to other than its employees.

(2) "Health Information" means information that:

a. relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual;

b. identifies the individual (or for which there is a reasonable basis for believing that the information can be used to identify the individual); and

c. is received by Contractor from or on behalf of County, or is created by Contractor, or is made accessible to Contractor by County.

(3) "Use" (in both its verb and noun forms) or "Uses" means, with respect to Health Information, the sharing, employment, application, utilization, examination or analysis of such information with Contractor's internal operations.

B. Permitted Uses and Disclosures of Health

Information:

Contractor:

(1) shall Use and Disclose Health Information as necessary or appropriate to perform those activities as described in this Agreement;

(2) shall Disclose Health Information to County

upon request;

(3) may, as necessary for the proper management and administration of its business or to carry out its legal responsibilities, Use Health Information; and

(4) disclose Health Information if:

- a. the Disclosure is required by law, or
- b. Contractor obtains reasonable assurance from the person to whom the information is Disclosed that the Health Information will be held confidentially and Used or further Disclosed only as required by law or for the purpose of which it was Disclosed to the person, and the person agrees to notify Contractor of any instances of which the person is aware in which the confidentiality of the Health Information has been breached. Contractor shall not use or Disclose Health Information for any purpose.

C. Appropriate Safeguards for Health Information.

Contractor warrants that it shall implement and maintain appropriate safeguards to prevent the Use or Disclosure of Health Information in any manner other than as permitted by this Paragraph.

D. Reporting Non-Permitted Use or Disclosure.

Contractor shall report to County each non-permitted Use or Disclosure that is made by Contractor, its employees, representatives, agents, or subcontractors but is not specifically permitted by this Agreement. The initial report shall be made by telephone call to County's Privacy Officer within forty-eight (48) hours from the time the Contractor becomes aware of the non-permitted Use or Disclosure, followed by a written report to the Privacy Officer no later than five (5) days from the date the Contractor becomes aware of the non-permitted Use or Disclosure.

E. Availability of Internal Practices, Books and Records to Government Agencies. Contractor agrees to make its internal practices, books and records relating to the Use and Disclosure of Health Information available to the Secretary of the federal Department of Health and Human Services for purposes of determining County's compliance with the Privacy Regulations.

F. Access to Amendment of Health Information. Contractor shall, to the extent County determines that any Health Information constitutes a "designated record set" under the Privacy Regulations, (1) make the Health Information specified by County available to the individual(s) identified by County as being entitled to

access and copy that Health Information, and (2) make any amendments to Health Information that are requested by County. Contractor shall provide such access and make such amendments within the time and in the manner specified by County.

G. Accounting of Disclosures of Health Information.

Upon County's request, Contractor shall provide to County an accounting of each Disclosure of Health Information made by Contractor or its employees, agents, representatives or subcontractors. The accounting shall include: (1) the date of the Disclosure; (2) the name, and address if known, of the entity or person who received the Health Information; (3) a brief description of the Health Information disclosed; and (4) a brief statement of the purpose of the Disclosure. For each Disclosure, Contractor shall track the information specified in (1) through (4), above, and shall securely maintain the information for six (6) years from the date of the Disclosure.

H. Term and Termination. In addition to and notwithstanding the termination provision set forth in the Agreement, the Agreement may be terminated immediately upon written notice by County to Contractor if County determines, in its sole discretion, that Contractor has violated any material term of this Paragraph. Contractor's obligation under subparagraphs "A" and including "C" of this Paragraph,

shall survive the termination or expiration of the Agreement.

I. Disposition of Health Information Upon Termination or Expiration. Upon termination or expiration of the Agreement, Contractor shall either return or destroy, in County's sole discretion and in accordance with any instructions by County, all Health Information in the possession or control of Contractor or its agents and subcontractors. However, if County determines that neither return nor destruction of Health Information is feasible, Contractor may retain Health Information provided that Contractor (1) continues to comply with the provisions of this Paragraph for as long as it retains Health Information, and (2) further limits Uses and Disclosures of that Health Information to those purposes that make its return or destruction infeasible.

J. No Third Party Beneficiaries. There are no third party beneficiaries to the provisions of this Paragraph.

K. Use of Subcontractors and Agents. Contractor shall require each of its agents and subcontractors that received Health Information from Contractor to execute a written agreement obligating the agent or subcontractor to comply with all the terms of this Paragraph.

8. Except for the changes set forth hereinabove, Agreement shall not be changed in any other respect by this Amendment.

In WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by its Director of Health Services and Jurisdiction has caused this Amendment to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

COUNTY OF LOS ANGELES

By \_\_\_\_\_  
Thomas L. Garthwaite, M.D.  
Director and Chief Medical Officer

ARROYO VISTA FAMILY HEALTH CENTER  
(Contractor)

By \_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

Title \_\_\_\_\_  
(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM BY THE  
OFFICE OF COUNTY COUNSEL  
LLOYD W. PELLMAN  
County Counsel

APPROVED AS TO CONTRACT  
ADMINISTRATION:

By \_\_\_\_\_  
Chief, Contracts and Grants  
Division

jr:8/9/02  
Imm-CHC



## FISCAL YEAR 2003-2004 SCOPE OF WORK

The contractor will achieve the following goals and objectives. Objectives are achieved by the following work plan, composed of implementation and evaluation activities. Activities are to be completed according to the stated timelines and are to be documented as specified.

**Agency: Arroyo Vista Family Health Center**

Clinic Site - Highland Park - 6000 North Figueroa Street, Los Angeles 90042

Clinic Site - Lincoln Heights - 2221 North Broadway, Los Angeles 90031

**Goal: Increase immunization levels, as measured by 4-3-1-3 up-to-date rate, by 5% to 10% to children who are clients of CHC by their second birthday.**

Measurable Objectives	Implementation Activities	Timeline	Evaluation/Documentation
Adopt all Standards of Pediatric Immunization Practices	Review clinic policies and identify barriers to immunization.	Ongoing	Operational review will be conducted by LACIP nursing staff to assess degree of adherence to the Standards.
Provide vaccinations to 90% of children who are patients of Community Health Center (CHC) by their second birthday.	Continue to train nursing staff.  Administer measles, mumps, rubella vaccine (MMR), Varicella vaccine, Polio vaccines, Diphtheria, tetanus, and pertussis vaccine (DTP), Haemophilus influenza type b vaccine (Hib), and Hepatitis B vaccine, as needed.	Ongoing	Document hiring of staff.  Document in quarterly report and submit data to LACIP.
Maintain an Immunization tracking system to ensure that 100% of infants and toddlers are tracked and recalled, if necessary.	Continue to train staff to conduct tracking activities.  Send reminder postcards to parents two weeks before next appointment.  Notify parents by telephone and sending recall postcards after a broken immunization appointment.  Ensure that all staff are adhering to written protocols.	Ongoing	Document hiring of staff.  Describe tracking system usage and document number of reminder postcards sent each month and submit in quarterly reports.

**ARROYO VISTA FAMILY HEALTH CENTER  
 FY 03-04 SCOPE OF WORK  
 PAGE 2**

Measurable Objectives	Implementation Activities	Timeline	Evaluation/Documentation										
Continue to extend immunization services delivery to include additional clinic days and hours per week	Continue to train a full time LVN and Medical Assistant for immunizations.  Enhance walk-in express lane at clinics on Monday, Wednesday, Friday, and Saturday.  Monday to Friday 8:00a.m. to 6:30p.m. Saturday 8:00a.m. to 4:00p.m.	Ongoing	Document hiring, as needed, of staff and implementation of service delivery expansion in quarterly reports.  Document number and age of immunization patients. Include quantity and type of vaccine administered on DIR. Submit weekly to local LACIP area office.										
Increase community awareness about availability of immunizations for preschool age children through special outreach activities, health education, and promotional campaigns.	Schedule outreach activities in the community.  Distribute immunization literature and flyers to preschools, churches, adult schools, and local community agencies in the private and public sector.	Ongoing	Documents will be kept on file and activities will be document in quarterly reports.										
Initiate baseline and end line record audit of immunization clinic records for children (24 months to 35 months old) who are clients of the clinic that is in in accordance with the protocol provided by LACIP. Non-profit CHC's with a CASA should achieve above the 40% level or show improvement as follows:  <table data-bbox="210 1234 588 1396"> <thead> <tr> <th></th> <th><u>Improvement</u></th> </tr> </thead> <tbody> <tr> <td>Below 40%</td> <td>25%</td> </tr> <tr> <td>40% - 49%</td> <td>15%</td> </tr> <tr> <td>50% - 69%</td> <td>10%</td> </tr> <tr> <td>70% - 85%</td> <td>5%</td> </tr> </tbody> </table>		<u>Improvement</u>	Below 40%	25%	40% - 49%	15%	50% - 69%	10%	70% - 85%	5%	Conduct or have LACIP randomly sample immunization clinic records using the adopted methodology from the State.	Annually	Data will be analyzed to assess change in infant immunization coverage.
	<u>Improvement</u>												
Below 40%	25%												
40% - 49%	15%												
50% - 69%	10%												
70% - 85%	5%												

**ARROYO VISTA FAMILY HEALTH CENTER  
 FY 03-04 SCOPE OF WORK  
 PAGE 3**

Measurable Objectives	Implementation Activities	Timeline	Evaluation/Documentation
Conduct immunization registry disclosure with immunization patients.	Provide immunization patients with Los Angeles Immunization Network (LINK) disclosure statement and document in chart that disclosure statement was provided and if patient refused to participate.	Ongoing	Document in patient charts that disclosure statement was provided and if patient refused to participate.
Participate in LINK.	Implement use of LINK.	Ongoing	Document number of immunization records in LINK.

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