

GRANTS AND CONTRACTS - TRANSMITTAL MEMO

Date: October 18, 2016

From Purchasing/Contracts

To: Candie Nixon, Cathie Whitney

CONTRACT #: KL130069

VENDOR: Alachua County Health Department

DESCRIPTION: #KL130069 Amendment to CHOICES Agreement with Alachua County Health Department for the administration of the Influenza Vaccine

APPROVED BY: BoCC

APPROVAL DATE: 20161011

Received On: 20161018

TERM START 20161001

TERM END 20280930

AMOUNT: \$1,500,000.00

ACCOUNT: 031-2926-562.34-10

ENCUMBRANCE #

RFP/BID #

ACTIONS REQUIRED Please forward a copy to the vendor & retain a copy for your files.
One of two originals sent to

copy to: F&A
Risk
Purchasing
File

**AMENDMENT TO AGREEMENT
BETWEEN ALACHUA COUNTY AND
ALACHUA COUNTY HEALTH DEPARTMENT FOR THE
ADMINISTRATION OF INFLUNZA VACCINE**

THIS **FIRST** AMENDMENT TO AGREEMENT made and entered into this 11th day of October A.D. 2016, by and between Alachua County, a charter county and political subdivision of the State of Florida, by and through its Board of County Commissioners, hereinafter referred to as "County", and Alachua County Health Department, hereinafter referred to as "**(Health Department)**":

WITNESSETH:

WHEREAS, the parties hereto previously entered into an agreement dated **October 1, 2013**; and,

WHEREAS, the parties wish to amend the agreement.

NOW, THEREFORE, the parties hereby agree to amend the Agreement dated October 1, 2013 as follows:

- A. Title of the agreement is amended to omit the use of the term "Flu-Mist Vaccine" and replace with the term "Influenza Vaccine"
- B. Section 3, Duties of the Health Department, sub-paragraph "a" is amended in its entirety to read as follows:

Vaccinate students in the Alachua County Public School System, Alachua County Charter Schools, Alachua County Private Schools, and those students being home schooled using Influenza vaccine

- C. Section 3, Duties of the Health Department, is amended to add sub-paragraph "h" reading as follows:

Utilize this contract to support addressing unexpected vaccine preventable infectious diseases

- D. Section 4, Duties of the County, sub-paragraph "a" is amended in its entirety to read as follows:

Pay the Health Department \$12.50 for each vaccine administered

- E. Section 4, Duties of the County, sub-paragraph "b" is amended in its entirety to read as follows:

Place \$1,500,000 of revenue collected pursuant to Section 212.055(7), Florida Statutes, and County Ordinance 04-05, in a Trust Fund titled "CHOICES Influenza Vaccine Trust Fund," to be administered by the Clerk of the Court as the custodian of County funds.

- F. Section 5, Method of Payment, sub-paragraph "b" is amended in its entirety to read as follows:
Twelve dollars and fifty cents (\$12.50) for each Influenza Vaccine administered
- G. Section 5, Method of Payment, sub-paragraph "c" is amended in its entirety to read as follows:

As a condition precedent for any payment, the Health Department shall submit yearly by June 30th, unless otherwise agreed in writing by the County, an invoice to the County requesting payment for services. Each invoice shall bear the signature of the Health Department, which signature shall constitute the Health Department's representation to the County that the services have been provided. The invoice shall contain sufficient information to support the number of Influenza vaccinations administered to students in the Alachua County Public Schools, Alachua County charter schools, private schools in Alachua County, and students being home-schooled in Alachua County and claimed for payment by County. Submission of the Health Department's invoices for final payment shall further constitute the Health Department's representation to the County that, upon receipt by the County of the amount invoiced, all obligations of the Health Department to others, including its consultants, incurred in connection with the Project, will be paid in full. The Health department shall submit invoices to the county at the following address:

Director
Alachua County Department of Community Support Services
218 SE 24th Street
Gainesville, Florida 32641


- H. This First Amendment shall take effect upon the date of execution by both Parties

SAVE and EXCEPT as expressly amended herein, all other terms and provisions of the original agreement between the parties, dated **October 1, 2013**, shall be and remain in full force and effect.

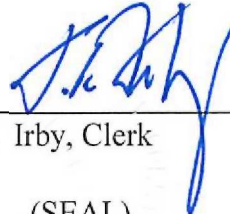
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IN WITNESS WHEREOF, the parties have caused this First Amendment to Agreement to be executed for the uses and purposes therein expressed on the day and year first above-written.

ALACHUA COUNTY, FLORIDA

By: 
Robert Hutchinson, Chair
Board of County Commissioners
Date: October 11, 2016

ATTEST:



J. K. Irby, Clerk
(SEAL)

APPROVED AS TO FORM


Alachua County Attorney's Office

HEALTH DEPARTMENT

ATTEST (By Corporate Officer)
By: _____
Print: _____
Title: _____

By: 
Print: DAVID D. MYERS
Title: ADMINISTRATOR
Date: 8/29/16

MUST BE ATTESTED (WITNESSED) BY A DESIGNATED OFFICER OF THE CORPORATION. IF NOT INCORPORATED, THEN SHOULD BE NOTARIZED. SAMPLE FORMATS FOR NOTARY ARE AVAILABLE ON THE INTRANET UNDER OFFICE OF MANAGEMENT AND BUDGET SECTION.



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Agenda

October 11, 2016 Regular BoCC Meeting

Category

CONSENT/Governmental Units

Sub-Category

Community Services Group

Item Type

Information

Title

Amendment to Agreement for the administration of the Influenza Vaccine using CHOICES funds

Amount

\$1,500,000.00

Description

First Amendment to Agreement for the administration of the Influenza Vaccine using CHOICES funds

Recommendation

Approve the First Amendment between Alachua County and the Alachua County Health Department

Alternative(s)

Do not authorize the agreement between Alachua County and the Alachua County Health Department

Requested By

Claudia Tuck, Candie Nixon, Cathie Whitney

Originating Department

Community Support Services

Attachment(s) Description

Amendment to Agreement between Alachua County and the Alachua County Health Department for the Administration of Influenza Vaccine

Documents Requiring Action

Amendment to Agreement between Alachua County and the Alachua County Health Department for the Administration of Influenza Vaccine

Executive Summary

In 2012, the Board of County Commissioners directed the Department of Community Support Services to develop a recommendation regarding the long-term use of CHOICES funds to support the Alachua County Flumist Program. In 2014, the BoCC authorized the approval of \$1.5 million towards the CHOICES Flu-Mist Vaccine Trust Fund. This agreement was developed in partnership with the Alachua County Health Department. The agreement is set to expire in the year 2028.

Background

This agreement sets aside \$1.5M of the CHOICES Trust Fund Balance for use in this program with a limitation of expending \$100,000 per year, thus funding the Influenza Vaccine program for 15 years in a trust fund titled "CHOICES Influenza Vaccine Trust Fund." At the recommendation of the Alachua County Health Department, this agreement is being amended to reflect the following changes: 1. Replace the word "Flu-Mist" with "Influenza." In 2016, the Center for Disease Control and Prevention (CDC) questioned the effectiveness of the Flu-Mist brand and has withdrawn its' support of the nasal vaccine. However, the CDC continues to staunchly support the use of a

vaccine as the best protection against the flu; 2. The rate of the vaccine has increased to \$12.50 per dose (up from \$10). This agreement will continue to benefit students in the Alachua County Public School System, Alachua County Charter Schools, Alachua County Private Schools and home-schooled students. The Health Department presents an annual report to the BoCC pertaining to the effectiveness of the program and related data.

Issues

1. The CDC no longer supports use of the Flu-Mist brand.

Fiscal Recommendation

Approve the Amendment as the CHOICES Trust Fund has the funds to financially support the Influenza Vaccine program.

Fiscal Alternative(s)

n/a

Funding Sources

CHOICE Trust Fund

Account Code(s)

031-2926-562-34-10

Attachments: (list)



[Amendment to Agreement between Alachua County and Alachua County Health Department for the Administration of the Influnza Vaccine.pdf](#)

Audit Data	Date & Time
Agenda Item Added by Tom Tonkavich	9/15/2016 3:25:15 PM
Amendment to Agreement between Alachua County and Alachua County Health Department for the Administration of the Influnza Vaccine.pdf added as an attachment by Tom Tonkavich	9/16/2016 9:07:11 AM
Agenda Item Approved by Claudia Tuck	9/16/2016 11:32:04 AM

Thomas Rouse - (Purchasing Grants/Contracts Administrator)
Role : Approver

Change Role |

Version: 1.2.1.3 - 1.2.7.5

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