

DEPARTMENT OF STATE HEALTH SERVICES



Amendment  
To

The Department of State Health Services (DSHS) and CORPUS CHRISTI-NUECES COUNTY PUBLIC HEALTH DISTRICT (Contractor) agree to amend the Program Attachment # \_001B\_ (Program Attachment) to Contract # \_2012-039517\_ (Contract) in accordance with this Amendment No. 001C : IMMUNIZATION BRANCH - LOCALS\_, effective \_06/01/2012\_.

The purpose of this Amendment is to add funds for coalition and collaboration activities within their jurisdiction, as well as to add new Exhibits for reporting.

Therefore, DSHS and Contractor agree as follows:

The program attachment number is revised as follows:

PROGRAM ATTACHMENT NO. ~~001B~~ 001C

SECTION I. STATEMENT OF WORK is revised to add the following:

In the 2008-2012 Centers for Disease Control and Prevention (CDC) Immunization Program Operations Manual (<<http://www.cdc.gov/vaccines/vac-gen/policies/ipom/default.htm>>), the CDC has identified the establishment of community stakeholder groups as one important aspect of the larger effort to increase immunization levels. The increasing number of recommended vaccines requires ongoing education for the public and medical providers, as emphasized in DSHS's Inter-Local Application Work Plan (<[http://www.dshs.state.tx.us/immunize/docs/Contractor/Work\\_Plan.pdf](http://www.dshs.state.tx.us/immunize/docs/Contractor/Work_Plan.pdf)>) for local health departments. The CDC "encourages the use or development of coalitions, partnerships, and other unique relationships to maximize efforts" to involve the community in the evolving education regarding recommended immunizations. For this contract:

Contractor shall engage community groups/stakeholders in a collaboration to increase community vaccination coverage levels throughout Texas, as described herein. Using Model Strategies for Successful Meetings (Exhibit B) and Partner Identification Tool (Exhibit C):

- The Contractor shall develop, lead, direct, and host no less than two (2) community planning group/coalition meetings in its local jurisdiction.
- Contractor shall develop a planning group with the goal of establishing a sustainable mechanism on a local level that can be replicated utilizing best practices as identified by the CDC, <http://www.cdc.gov/vaccines/partners.htm>.
- Best practices for increasing vaccination coverage levels include:
  - Working with other community associations and/or affiliations;

- o establishing "medical homes" for clients; utilizing effective reminder/recall systems;
- o Consistent use of an immunization ImmTrac registry; and
- o Provider education on vaccines; and public and parent education on the importance of vaccination completeness and timeliness.

□ Contractor will appoint a coalition coordinator and a facilitator;

□ Attend the National Conference on Immunization and Health Coalitions in New Orleans, LA in May 23-25, 2012; and

□ Attend the TISWG meeting in June 20-21, 2012;

□ DSHS shall coordinate all technical assistance to include specialized training and support provided by a DSHS designee;

□ At least one on-site technical assistance visit will occur during this contract period.

Contractor shall comply with all applicable federal and state regulations and statutes, including but not limited to:

□ DSHS regulations at 25 TAC §97.101 & §97.221; and

□ Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP) guidelines located at <http://www.cdc.gov/vaccines/recs/acip/default.htm>.

**SECTION II. PERFORMANCE MEASURES is revised to add the following:**

<u>Reports for Coloration/Coalition Amendment</u>		
<u>Report Type</u>	<u>Reporting Period</u>	<u>Report Due Date</u>
<u>Progress Report</u>	<u>05/01/2012-06/30/2012</u>	<u>07/30/2012</u>
<u>Progress Report</u>	<u>07/01/2012-08/31/2012</u>	<u>09/30/2012</u>

In addition, Contractor shall:

□ Identify participants showing a commitment to collaborate with one or more community entities;

□ Provide signed letters of agreement or other documentation of commitment by August 31, 2012;

□ Receive technical assistance to include specialized training and support provided by DSHS;

□ One (1) on-site technical assistance visit will be scheduled during this contract period;

□ Submit a progress report, Exhibit D by September 30, 2012 indicating:

- o Identify the coalition coordinator and facilitator identified;
- o Identify the staff that attend the National Conference on Immunization and Health Coalitions in New Orleans, LA in May 2012;
- o Identify the staff who attend TISWG meetings; and
- o The number of meeting with local community associations and/or affiliations with interest in increasing immunization rates in children, minutes and sign in sheet of attendees must be attached.

□ Reports should be submitted electronically to: [DSHSImmunizationcontracts@dshs.state.tx.us](mailto:DSHSImmunizationcontracts@dshs.state.tx.us) <<mailto:DSHSImmunizationcontracts@dshs.state.tx.us>>

**Exhibits B, C, and D are added in their entirety.**

**Categorical Budget is revised as attached.**

All other terms and conditions not hereby amended are to remain in full force and effect. In the event of a conflict between the terms of this contract and the terms of this Amendment, this Amendment shall control.

**Department of State Health Services**

**Contractor**

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Signature of Authorized Official

\_\_\_\_\_  
Signature of Authorized Official

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Bob Burnette, C.P.M., CTPM

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