



Chelan-Douglas Health District

200 Valley Mall Parkway, East Wenatchee, WA 98802

Chelan-Douglas Health District Board of Health Regular Meeting Minutes – March 18, 2024

Board Members Present (quorum):

Jerrilea Crawford, Chair (5)
Kevin Overbay (1)
Marc Straub (4)
Marissa Smith (7)
Alma Chacon (9)
Joseph Hunter (11)

Shon Smith, Vice Chair (2)
Dan Sutton (3)
Sharon Waters (6)
Bindu Nayak (8)
Bill Sullivan (10)

Board Members Absent:

Non-Voting Alternate Board Members Present:

Michael Peterson (7)

Carin Smith (9)

Staff Present:

Kristen Hosey, Interim Health Administrator
Erin McCool, CDHD Attorney
Cari Hammond, Personal Health Director
Richmond Petty, Interim Environmental Health Director

Diane Forhan, Operations Director
Hollie Casey, Clerk of the Board
Peter Williams, CD/Epi Director
Kent Sisson, EPR Director

Public Present –

The meeting was held in person and via zoom and phone conferencing with members of the public attending and listening to the meeting.

Meeting –

Chair Jerrilea Crawford called the meeting to order at 3:00 PM and requested the Board Clerk to take attendance.

Consent Agenda (1:06)-

- a. Approval of the February 26, 2024 Board Meeting Minutes
- b. Approval of the March 6, 2024 Special Board Meeting Minutes
- c. Approval of February Payroll in the amount of \$322,122.74
- d. Approval of February Benefits in the amount of \$114,775.66
- e. Approval of Payment of 2024 Vouchers No. 20240128-20240189 in the amount of \$169,205.34
- f. Approval of the Contract Matrix

Chair Crawford requested a motion to approve the Consent Agenda with a correction to the vehicle count under item 'f' of New Business in the February minutes to amend the vehicle count to 'two' vehicles instead of 'three'. Dan Sutton moved to approve the Consent Agenda with the correction of item 'f' of New Business in the February minutes. Kevin Overbay seconded the motion, and the motion passed unanimously.

After the vote, Sharon Waters noted that the year in the date on the first page of the February Minutes was incorrect, and Chair Crawford then requested an amended motion to correct item 'f' and the year of the date on page one of the February Minutes. Dan Sutton amended his motion to approve the Consent Agenda with corrections to item 'f' and the year of the date on page one of the February Minutes. Marc Straub seconded this amended motion, and motion passed unanimously.

Approval of Agenda (3:30)-

Chair Crawford realized she skipped the Approval of the Agenda after a brief Board discussion, and then asked for a vote to approve the March Agenda as presented.

Marc Straub moved to approve the March Agenda as provided. Kevin Overbay seconded the motion, and the motion passed unanimously.

Public Comment (3:53)-

Chair Crawford explained that 20 minutes has been set aside for public comment and asked for those present in person and via Zoom who wanted to speak during public comment to identify themselves. Once Chair Crawford identified the number of members of the public that wanted to speak, she allotted three minutes to each presenter.

- There were no members of the public in person or on-line requesting to comment.

Executive Session: RCW 42.30.100(1)(i) Potential Litigation (4:46)-

At 3:09pm Chair Crawford requested a motion for the Board to go into Executive Session for seven minutes, until 3:16pm.

Dan Sutton moved to go into Executive Session for seven minutes, until 3:16pm. Joseph Hunter seconded the motion and the motion passed unanimously. The Board returned to the regular meeting at 3:16pm. No action was taken in Executive Session.

New Business (6:17)-

- a. Review of the Cintas Contract

Diane Forhan, Fiscal Director, explained that the District would like enter into a contract with Cintas at no more than \$6,900 over five years for consumables and fixtures. Diane also pointed out that this would cut about \$5,000 from the capital improvements for the remodel on bathroom fixtures for the District building remodel. Board discussion followed.

Kevin Overbay moved to approve the District to enter a 5 year \$34,500 contract with Cintas for consumables and fixtures. Marc Straub seconded the motion and the motion passed with 10 in favor, and one abstention (Sutton).

Bill Sullivan requested a motion to amend the agenda to allow a second period of Public Comment at this point in the meeting due to members of the public now being present. Kevin Overbay seconded the motion for the purpose of discussion. Bill Sullivan explained that he would like to give members of the public that are now present, and have been consistently, a chance to speak due to the change in

location. Kevin Overbay suggested public comment should occur at the end of Board business to allow a second period of public comment. After discussion, the motion passed unanimously.

Second Public Comment Period (18:27)–

- Laurie Buhler of Douglas County and Kim Darlington of Douglas County each shared their concerns about the COVID vaccines.

Old Business (25:24)-

- a. The Chelan-Douglas Health District Employee Manual Review and Approval
Kristen Hosey, Interim Health Administrator, explained to the Board that the District’s Employee Manual hasn’t been updated since 2010 and the District has been working to bring it up to date with policies and language. Kristen requested the Board to approve the manual so the District can get the updated version out to staff. Erin McCool, CDHD Attorney, noted that she did not receive any questions from Board Members regarding the CDHD Employee Manual, and pointed out that even though the manual is outdated, the District was still in compliance with state laws. Erin suggested if the Board moves forward with an approval of the manual, that a review and updates occur every two years at the most. Erin also acknowledged that the manual has language pulled from both Federal and State employee protection laws. Board discussion followed.

Bindu Nayak moved to approve the Chela-Douglas Health District Employee Manual as presented to the Board. Alma Chacon seconded the motion, and the motion passed unanimously.

Reports (38:22)--

Emergency Preparedness Update – Kent Sisson, EPR Director (38:36)

Kent Sisson, EPR Director, walked the Board through the Emergency Preparedness Update presentation. Kent explained the District is currently working on the After Action Report (AAR) corrective action #1 by ensuring that all District staff receive the appropriate Incident Command System (ICS) levels of training. Kent also pointed out that the AAR corrective action #5 has been reworked into two plans: Isolation & Quarantine Plan, and Medical Counter Measures Plan and are ready to implement if needed. Last, Kent reviewed the MCM Plan Dispensing Modalities and explained each component. Board discussion followed.

Kristen Hosey, Interim Health Administrator (1:04:38)

Interim Health Administrator, Kristen Hosey, in interim Health Officer, Dr. James Wallace’s absence, gave a quick review of the last Pertussis Response Situation Report with the Board, and explained that the Situation Report will be done weekly as the outbreak continues and will be shared with the Board on a weekly basis. Kristen then reviewed her administrative report that was provided in the Board packet. Board discussion followed.

Board Discussion (1:24:05)-

Bill Sullivan noted that the CDHD has vaccine information and recommendations that he believes are inaccurate and asked legal counsel about the ramifications of the District having that language on the CDHD webpage. Chair Crawford suggested that this kind of question should be brought up to legal counsel in advance notice. CDHD Attorney, Erin McCool indicated it would be helpful to have advance notice if the Board would like a legal opinion on a subject to ensure adequate preparation.

Chair Jerrilea Crawford declared the meeting adjourned at 4:41PM.



Jerrilea Crawford, Board Chair



Hollie Casey, Clerk of the Board



CHELAN-DOUGLAS HEALTH
DISTRICT

EMPLOYEE MANUAL

2024

Draft

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Draft

Welcome to Chelan-Douglas Health District!

Dear Employee,

If you are new to the Chelan Douglas Health District (CDHD), welcome! If you are a current employee, thank you!

Our employees are key to our ability to address the ever-changing needs of our region. We hired you because we believe that you have the skills to help CDHD be successful in reaching its mission and vision, which includes helping improve the health and safety of our neighbors and community.

Welcome to the team!



200 Valley Mall Parkway

East Wenatchee, WA 98802

509.886.6400

Section 1: Introduction

1.1 Employee Manual Purpose/Applicability

The Chelan-Douglas Health District (CDHD) Employee Manual is intended to serve as a practical guide to CDHD policies and practices for employees. The Manual is not intended to cover all topics or circumstances which will guide employees in the performance of their duties. Some additional procedures may be available outside of this manual, such as the Employee Benefits Packet.

Except for the policy of at-will employment, which can only be changed with the signed written consent of the Health Administrator, CDHD reserves the right (on an individual basis or generally) to make revisions, modifications, interpretations, or deletions to the policies stated herein or to any other policies, procedures, benefits, or other programs, at any time with or without notice at CDHD's sole discretion.

Each employee is expected to read and familiarize themselves with the content of this manual, and any subsequent revisions to this manual.

This manual in its entirety is not applicable to interns, students, and volunteers, except for certain policies that address behavioral expectations, unlawful harassment, confidential information, and ethics. Supervisors are responsible for reviewing these policies with interns, students and/or volunteers who are assigned to them.

Where there are differences between the provisions of this Employee Manual and more specific statements contained in CDHD policies and procedures, collective bargaining agreements, or benefit plan documents, those documents shall take precedence.

This Employee Manual replaces and supersedes any and all previous Human Resources manuals, guidelines, and handbooks. This handbook applies to all employees regardless of date of hire.

For union employees: If the applicable Collective Bargaining Agreement (CBA) for your union covers specific topics also included in this Employee Manual your CBA supersedes this Employee Manual on those topics only, otherwise this Handbook is the primary policy source.

1.2 Employee Acknowledgment

Each new employee with CDHD will be required to review and sign an "Acknowledgment of Receipt of Employee Manual" of this handbook within one week of the effective date of this Manual, or upon hire. Additionally, all employees are required to review and sign an "Employee Acknowledgment of Revisions" to this handbook as they occur.

1.3 Introduction to CDHD

The primary responsibility for the health and safety of Washington residents' rests with the 39 county governments. CDHD is a two-county health district, one of three multi-county health districts in the state of Washington. Our Board of Health ("Board") approves the budgets, programs, and select policies at CDHD, including annual review and approval of this manual. Board members include county commissioners, as well as community members (RCW 70.05.060).

Day-to-day operations at CDHD are overseen by the CDHD Health Administrator, who is hired by the Board, and who works in tandem with the Health Officer. At CDHD there are various departments

including: operations, emergency preparedness and response, communications, language access and outreach, child and family health, communicable disease and epidemiology and environmental health. More information specific to CDHD programming and Board meetings are available on the CDHD website.

Vision

CDHD makes optimal use of available resources and partnerships to provide high-quality public health services in Chelan and Douglas Counties. Its program priorities emphasize the foundational public health functions basic to public safety in any community.

Mission

Our mission is to protect and improve the health of individuals and communities in Chelan and Douglas Counties through the promotion of health and the prevention of disease and injury. In addition, we also strive to make our work environment a very rewarding experience for our team.

Values

At CDHD we value:

1. Prevention: We believe that prevention is the most effective way to protect our community from disease and injury.
2. Collaboration: Community partnerships produce cost-effective health outcomes by bringing people, resources, and organizations together.
3. Population-Based Services: We make data-driven decisions and deliver science-based programs, knowing that the provision of population-based services is the defining responsibility of public health.
4. Equity: We believe everyone in our community deserves an equal opportunity for a healthy life.
5. Community Service and Accountability: As vigilant stewards of the public's trust, we provide efficient services that are responsive and accountable to the community and its elected representatives.
6. Improvement: We continuously improve the quality of our services and systems to better serve our community through a system of benchmarks and program evaluation.
7. Education: Education is a key tool in achieving all public health objectives.

Section 2: Fair Employment Policies

2.1 Equal Employment Opportunity

CDHD is an equal opportunity employer that believes in promoting a diverse workplace in order to create a working environment in which all employees are provided with equal employment opportunities. CDHD will not discriminate against qualified applicants or employees with respect to any term or condition of employment based on actual or perceived race, color, national origin, ancestry, sex, gender identity or expression, sexual orientation, age, religion, creed, physical or mental disability, medical condition, genetic information, pregnancy, childbirth, or related medical condition, marital status, veteran status, or any other protected class or characteristic established under applicable federal, state, or local statute or ordinance.

CDHD's compliance with equal employment opportunity laws applies to hiring, placement, upgrading, transfer, promotion, demotion, recruitment, advertising or solicitation for employment, treatment during employment, rates of pay or other forms of compensation, and selection for training, layoff, or termination. The spirit and intent of this policy also applies to all customer, vendor, and professional relationships.

All CDHD employees are responsible for ensuring compliance with this policy. Employees with questions or concerns about equal employment opportunities in the workplace are encouraged to bring these issues to the attention of Human Resources. CDHD will not allow any form of retaliation against employees who, in good faith, raise issues of perceived discrimination.

2.2 Open Door Policy

Managers are encouraged to facilitate open communication, feedback, discussions, and availability. If there are any work-related issues that are causing you concern, you have the right to address them with your manager at a mutually agreeable time. Problems, complaints, suggestions, and observations are welcomed by management and serve as a way for the CDHD to resolve issues. If you have a question of a personal nature, or one that you feel is particularly delicate, feel free to discuss it with your supervisor, the leadership team, or Human Resources (HR).

2.3 Internal Complaint Procedure

CDHD is committed to providing a productive work environment that promotes the health, safety, and well-being of our employees. You are encouraged to speak directly and respectfully to the individual(s) with whom you are experiencing an issue. If the issue cannot be resolved directly with the individuals involved, or the issue is regarding an aspect of your employment, come forward with these questions/concerns immediately so CDHD can address them.

Step 1: Report Concerns to Your Supervisor

If you have concerns or questions, speak directly to your supervisor. If the issue/concern is not resolved with the Supervisor, or if the complaint concerns conduct by your supervisor, move to step 2 as described below.

Step 2: Submit Complaint to the Manager

If you feel the decision made by your supervisor is unfair you may submit a written complaint for review to the manager of your supervisor. This should state the basis for the complaint or disagreement with your supervisor. You may be asked to be a part of a meeting with your supervisor and your manager. If the complaint is not resolved at this level, you may submit a request for review to the Health Administrator, or designee.

Step 3: Appeal Decision

The Administrator will investigate each complaint received as appropriate. As soon as practicable after the conclusion of the investigation the Administrator will notify the employee of the outcome of any investigation and their decision, which will be considered final.

Additional Information:

The use of this procedure is not intended to delay the implementation of any corrective or other employment action by CDHD. Moreover, this procedure does not create a promise or guarantee of the resolution, and CDHD reserves the right to end the procedure under circumstances it believes are appropriate.

CDHD expects all employees to cooperate fully in investigations by, for example, answering questions completely and honestly and giving the investigator all documents and other material that might be relevant. All complaints will be handled as confidentially as possible, and all employees will be expected to comply with confidentiality standards, to the extent permitted by law. When the investigation is complete, CDHD may take corrective action as it deems appropriate.

CDHD will not engage in, or permit retaliation against, any employee who makes a good-faith complaint or participates in an investigation. If you believe that you are being subjected to any kind of negative treatment because you made or were questioned about a complaint, report the conduct immediately to Human Resources.

Employees may seek out support or guidance from Human Resources at any time during the complaint process. Human Resources may support in investigation of the complaint and present findings as well.

Classified employees may also reach out to the Union during this process and have union representation as set forth in the applicable Collective Bargaining Agreement.

2.4 Disability Accommodations

CDHD is committed to providing equal employment opportunities for all qualified individuals with disabilities in accordance with the federal Americans with Disabilities Act (ADA) and the Washington Law Against Discrimination. In accordance with these laws, CDHD strictly forbids all forms of discrimination, harassment, or retaliation against qualified applicants or employees with disabilities (See Glossary for definitions).

Requests for a reasonable accommodation will be considered on a case-by-case basis. CDHD will consider and provide reasonable accommodation to qualified employees or applicants with a known disability, provided the accommodation does not cause 1) an undue hardship on the employer's operations, or 2) a direct threat to health or safety.

The first step in the reasonable accommodation process is disclosure of a disability to HR, as employers are only required to accommodate disabilities of which they are aware. Such information will be treated as confidential except to the extent management and operations need to know.

Employees are not required to disclose a disability unless they are seeking an accommodation.

To evaluate options for accommodation, CDHD may request medical opinions to verify the nature of an employee's disability, identify potential reasonable accommodations, or determine whether the employee's continued work would directly threaten the health or safety of the employee or others. These documents are confidential to HR, the Health Administrator and Legal Counsel.

2.5 Pregnancy Accommodation

Healthy Starts Act

CDHD will provide reasonable accommodations for pregnant employees due to childbirth, pregnancy, or related medical conditions, so long as an accommodation does not constitute an undue hardship for CDHD.

An eligible employee is entitled to the following accommodations without the need for medical certification:

- Limitation of lifting up to 17 lbs.
- More frequent, longer, or flexible restroom breaks
- Modifying a no food or drink policy
- Making seating available or allowing an employee to sit more frequently where the job typically requires standing.

A request for a transfer or additional accommodations must be supported by the written certification of the employee's health care provider where allowed by law. CDHD will engage in the interactive process to determine whether CDHD can reasonably accommodate the pregnant employee's request.

Reasonable accommodations may include:

- Job restructuring, part-time or modified work schedules, reassignment to a vacant position or acquiring or modifying equipment, devices, or an employee's workstation.
- Providing for a temporary transfer to a less strenuous or less hazardous position.
- Scheduling flexibility for prenatal visits; and
- Any further pregnancy-related accommodation an employee may request, and to which CDHD must give reasonable consideration in consultation with the information provided on pregnancy accommodation by the Washington Department of Labor and Industries or the attending health care provider of the employee.

CDHD is not required to create additional employment that would not otherwise have been created or discharge any employee, transfer any employee with more seniority or promote any employee who is not qualified to perform the job unless CDHD does so or would do so for other classes of employees who need accommodation.

CDHD will not take adverse action against any employee who requests, declines, or uses an accommodation under this policy. Further, CDHD will not deny employment opportunities to an otherwise qualified employee or prospective employee if such denial is based on the CDHD's need to reasonably accommodate an employee's or prospective employee's condition related to pregnancy, childbirth, or a related medical condition. Additionally, CDHD will not require an employee to take leave if another reasonable accommodation can be provided for the employee's pregnancy and pregnancy-related health conditions.

If employees have any questions about or would like to request a reasonable accommodation pursuant to this policy, they should contact Human Resources.

2.6 Religious Accommodation

CDHD celebrates the diversity of thought and religious practice. Accordingly, CDHD will provide reasonable accommodation for employees' religious beliefs, observances, and practices when a need for such accommodation is identified, and reasonable accommodation is possible. Any employee who perceives a conflict between job requirements and religious belief, observance, or practice should bring the conflict and their request for accommodation to the attention of HR to initiate the accommodation practice.

CDHD respects the religious beliefs and practices of all employees and will make, upon request, an accommodation for such observances when a reasonable accommodation is available that does not create an undue hardship on business or operations.

Section 3: Code of Conduct

3.1 Rules of Conduct

CDHD strives to provide excellent customer services and expects employee's performance to reflect that standard.

People who work together have an impact on each other's performance, productivity, and personal satisfaction in their jobs. CDHD expects all employees, supervisors, consultants, contractors, vendors, customers, and agents to observe certain standards of job performance and follow rules of conduct. The rules outlined below are intended to provide examples of prohibited conduct but are not meant to be comprehensive of all conduct in violation of CDHD's policies. CDHD expects its employees to act professionally and use good judgment in all situations. If you have questions about these policies, please ask your supervisor or contact Human Resources.

Examples of conduct warranting disciplinary action include, but are not limited to:

- Violation of any policy as described in this manual.
- Engaging in criminal conduct or failing to report information in accordance with CDHD's background check policy, whether or not related to job performance.
- Using profane, abusive, threatening, or disrespectful language, unless otherwise protected by law.
- Retaliation against any employee who reports a concern, complaint, or participates in an investigation.
- Poor performance, unsatisfactory work quality or quantity.
- Unauthorized use, theft, or damage of any CDHD property, the property of any employee or customer. Removing or borrowing CDHD property without prior authorization.
- Compromising or endangering the safety of yourself or others, participating in horseplay or activities that could jeopardize the physical safety of person or equipment on the premises owned or occupied by CDHD.
- Providing false information or omitting material facts on any documents in connection with employment including, but not limited to job applications, resumes, employment, medical, payroll, financial, or timekeeping records.
- Insubordination, refusal to follow management's instructions concerning a job-related matter, or otherwise being disrespectful or insubordinate.
- Unauthorized Absence – Failure to notify Supervisor when unable to report for work on a scheduled workday.
- Failing to observe work schedules, including rest and lunch periods.
- Abusing vacation or sick leave, including failing to provide a doctor's certificate when requested or required to do so.
- Violating any safety, health, or security policy, rule, or procedure.
- Providing false information or omitting material facts or information related to internal performance evaluations, disciplinary action, or investigations.
- Committing a fraudulent act or a breach of trust, including but not limited to breaches of ethical conduct or unauthorized disclosure of CDHD's confidential, proprietary, or trade secret(s) and/ or other confidential obligations in any circumstances.

3.2 Harassment and Discrimination

CDHD is committed to providing a workplace that is free from unlawful harassment, discrimination, and retaliation. This includes sexual harassment (which includes harassment based on pregnancy, perceived pregnancy, childbirth, breastfeeding, or related medical conditions) and harassment based on actual or perceived gender, gender identity, gender expression, and sex stereotyping, as well as harassment based on such factors as race, color, religion, religious creed (including religious dress and religious grooming), national origin, ancestry, citizenship, age, physical or mental disability, legally-protected medical condition or information (including genetic information), family care or medical leave status, military caregiver status, military status, veteran status, marital status, domestic partner status, sexual orientation, status as a victim of domestic violence, sexual assault or stalking, enrollment in a public assistance program, requesting a reasonable accommodation on the basis of disability or bona fide religious belief or practice, or any other basis protected by federal, state, or local laws. This policy is also part of CDHD's commitment to diversity and inclusion, and a workplace that is free from harassment, disrespect, and divisiveness.

CDHD will not tolerate harassment of or discrimination against applicants, employees, interns, or volunteers by managers, supervisors, co-workers or third parties with whom employees come into contact. Similarly, CDHD will not tolerate harassment by its employees of non-employees with whom CDHD employees have a business, service, or professional relationship.

Discrimination Defined

Conduct prohibited by this policy includes any discriminatory employment action or unwelcome conduct, whether **verbal, written, physical, or visual** that adversely affects someone based on protected characteristics which:

- affects tangible job benefits; or
- unreasonably interferes with work performance; or
- creates an intimidating, hostile or offensive work environment.

Among the types of unwelcome conduct prohibited by this policy include, but are not limited to:

- Epithets
- Slurs
- Stereotyping
- Intimidating and/or humiliating acts
- The circulation or posting of written or graphic materials that show hostility toward individuals because of their protected characteristics.

Harassment Defined

For purposes of this policy, harassment is any verbal, written, physical, or visual conduct that creates a hostile work environment, or is designed to threaten, intimidate, create, or coerce an employee, co-worker, or any person working for or on behalf of CDHD. The following examples of harassment are guidelines and are not exclusive when determining whether there has been a violation of this policy:

- Verbal harassment, including comments that are offensive or unwelcome regarding a person's nationality, origin, race, color, religion, gender, sexual orientation, age, body, disability, or appearance, including epithets, slurs, and negative stereotyping.

- Nonverbal harassment, including distribution, display, or discussion of any written or graphic material that ridicules, denigrates, insults, belittles, or shows hostility, aversion, or disrespect toward an individual or group including but not limited to national origin, race, color, religion, age, gender, sexual orientation, pregnancy, appearance, disability, sexual identity, marital status or other any other protected class or characteristic.

All employees, regardless of their positions or immigration status, are expected to comply with this policy.

General Provisions

Whenever CDHD receives a complaint of discrimination or harassment or otherwise becomes aware of possible discrimination or harassment, it will investigate and ensure a fair process for all parties.

All employees are required to cooperate with any internal investigation of discrimination or harassment. Discriminatory or harassing behavior does not need to be illegal for CDHD to take corrective disciplinary action.

CDHD will strive to create a workplace free from disrespect, divisiveness, incivility, and inappropriate behavior. Therefore, behavior that could create a discriminatory or harassing environment should the behavior continue or escalate will not be tolerated and will lead to corrective disciplinary action.

Sexual Harassment Defined

Sexual harassment is defined as unwelcome language or conduct that is sexual in nature. Sexual harassment includes visual, verbal, or physical conduct of a sexual nature as well as any form of offensive behavior including gender-based harassment of a person even when the harassment is not sexual in nature. Sexual harassment can include language or conduct against a person of the same sex as the harasser, unwelcome sexual advances, requests for sexual favors, graphic verbal or written comments about an individual's sex life or body, and sexually degrading words used to describe an individual, or other visual, verbal, or physical conduct of a sexual nature. It also includes harassment based on a person's gender, including pregnancy, childbirth, and related medical conditions. Sexual harassment may also include excessive, one-sided romantic attention, such as requests for dates, love notes, gifts, phone calls, and e-mails. The recipient of the action defines "unwelcome attention," and such definitions must be respected by all individuals affiliated with CDHD.

The list below includes examples of harassing behavior; however, it does not cover every type of harassment that will be considered to be a violation of this policy.

Examples of Language and Conduct that is Considered Prohibited Harassment:

- Physical conduct includes but not limited to sexual assault; any intentional and unwanted physical contact, pressing or intentionally brushing up against another person's body; blocking someone's movement, or invading their space.
- Visual conduct including but not limited to leering; sexual gestures; displaying of sexually suggestive objects, pictures, cartoons, posters, screensavers, or websites.
- Verbal conduct including but not limited to: sexually derogatory comments, nicknames, slurs and jokes; verbal abuse of a sexual nature; graphic verbal comments about an individual's body; derogatory comments related to gender or stereotypical gender roles; subtle or obvious pressure

for unwelcome sexual activities; sexually suggestive or obscene written notices; conversations, stories, comments or jokes about a person's sexuality or sexual experience; unwelcome questions about a person's sexuality or gender identity or expression. Asking a co-worker on a date multiple times if the request was unwelcome.

- Verbal abuse or joking concerning a person's gender characteristics such as vocal pitch, facial hair or the size or shape of a person's body. Hostile actions taken against an individual because of that individual's sex, sexual orientation, or gender identity or expression.
- Offering an employment benefit (such as a raise, bonus, promotion, assistance with one's career or better working conditions) in exchange for sexual favors, or threatening an employment detriment (such as termination, demotion, worse working conditions, or disciplinary action) when a person refuses to engage in sexual activity.
- Sending sexually related, sexually derogatory, or sexually suggestive text messages, videos, or messages via social media.
- Making or threatening retaliatory action after receiving a negative response to sexual advances.
- Degrading comments in the form of sex stereotyping, which occurs when conduct or personality traits are considered inappropriate simply because they may not conform to other people's ideas or perceptions about how persons of specific sex should act or look.
- Other actions not listed above that constitute sexual harassment and/or a violation of this policy.

Location and Timing of Behavior

Sexual harassment is not limited to the physical workplace. It can occur during travel, at events sponsored by CDHD, or by phone, email, text, or social media. Such behavior can also occur outside of scheduled work time. Employees who engage in sexually harassing conduct outside of the workplace or outside of work hours will be subject to corrective disciplinary action.

Responsibilities of Employees

- Each employee has the responsibility to refrain from discrimination and sexual harassment that impacts the workplace.
- Supervisors should monitor work areas to ensure compliance with this policy and should report all incidents of discrimination, harassment, and/or retaliation that they observe, or about which they become aware, to Human Resources. In such circumstances where a person discloses sexual harassment but does not want to make a formal complaint, or when the complaining party changes their mind and retracts the complaint, the supervisor is still obligated to act upon the information and follow the Investigative Procedures.
- Any employee who is found to violate this policy after an investigation has been conducted will be subject to corrective disciplinary action in accordance with CDHD's disciplinary policy, up to and including termination of employment.
- Any employee who believes they have been the target of sexual harassment or witnesses sexual harassment, is encouraged to follow the [Internal Complaint Procedure](#) as outlined in this Manual.
- The employee does not need to confront the harasser in order for a complaint, investigation, and corrective disciplinary action to take place. A covered person who experiences sexual harassment may, if they choose to and can do so safely, inform the harassing person that such conduct is unwelcome and offensive and must stop.
- Employees shall familiarize themselves with this policy and the [Internal Complaint Procedure](#) and attend all required sexual harassment training.

- Every employee is required to participate in harassment training within three months of employment and at least every two years, or as otherwise required.

Retaliation

Retaliation means adverse conduct taken because an individual reported an actual or perceived violation of this policy, opposed practices prohibited by this policy or participated in the reporting and investigation process described below. “Adverse conduct” includes but is not limited to:

- Any action that would discourage or keep an individual from reporting discrimination, harassment, or retaliation.
- Shunning and avoiding an individual who reports discrimination, harassment, or retaliation.
- Express or implied threats or intimidation intended to prevent an individual from reporting discrimination, harassment, or retaliation; and
- Denying employment benefits because an applicant or employee reported discrimination, harassment, or retaliation or participated in the reporting and investigation process described below.

Methods to Report Complaints of Discrimination or Harassment

If an employee feels that they are being discriminated against or harassed, or witnesses discrimination or harassment by another employee, supervisor, manager, vendor, etc., they should immediately follow the reporting procedures described under the [Internal Complaint Procedure](#) described in this Manual. A complaint may be made in the employee’s primary language.

Corrective Action

CDHD prohibits conduct severe enough to be unlawful. Yet even more, the workplace conduct standards also prohibit conduct and comments which are not severe enough to violate local, state, or federal law—but which are still inappropriate in the workplace.

As a result, CDHD will take prompt, appropriate, and effective corrective action (e.g., remedial measures) any time it is established that discrimination, harassment, or retaliation in violation of this policy has occurred regardless of such violation also violates the law. Additionally, workplace supports such as our Employee Assistance Program are available.

Corrective action may include, for example: training, or referral to counseling. Depending on the circumstances could lead to disciplinary action (Refer to Disciplinary Action section in this manual). Regarding acts of harassment or discrimination by customers or vendors, corrective action will be taken after consultation with the Administrator. CDHD will not tolerate retaliation against any employee for making a good faith complaint of harassment or discrimination, or for cooperating in an investigation.

Any bad faith allegation(s) regarding harassment or discrimination by a staff member, in which there is dishonest or fraudulent intent, can lead to disciplinary action or termination. No provisions with these policies are intended to protect individuals who make allegations in bad faith.

3.3 Policy Prohibiting Bullying

CDHD does not tolerate bullying behavior. Individuals who engage in workplace bullying may be disciplined, up to and including termination of employment. Workplace bullying is the use of force,

threats, or coercion to abuse, intimidate, or humiliate another individual. Workplace bullying includes, but is not limited to, the following:

- Verbal abuse, such as the use of patently offensive, demeaning, and harmful derogatory remarks, insults, and epithets.
- Verbal or physical conduct that is threatening, intimidating or obscene.
- Pushing, shoving, kicking, poking, tripping, assaulting, or threatening physical assault, or intentionally damaging a person's work area or property.
- Sabotaging, or deliberately subverting, obstructing, or disrupting another person's work performance.

Cyberbullying is also prohibited. It refers to bullying, as defined above, that occurs through the use of a computer, cell phone, smartphone, tablet, pager, or other devices that transmit electronic information, regardless of whether the device is owned by or located at CDHD or connected to CDHD's network.

3.4 Conflicts of Interest

Employees are expected to use good judgment, adhere to high ethical standards, and avoid situations that create an actual or potential conflict between their personal interests and the interests of CDHD.

A conflict of interest, or the appearance of one, occurs when the employee or a member of the employee's household or immediate family uses the employee's position within CDHD for personal benefit or for personal gain. A financial interest or investment, accepting of gifts, personal association, or business relationship with a customer, supplier, or competitor that interferes with the employee's ability to exercise independent judgment on CDHD's behalf is prohibited. Employees unsure as to whether a certain transaction, activity, or relationship constitutes a conflict of interest should discuss it with their immediate supervisor or Human Resources for clarification. Any exceptions to this guideline must be approved in writing by the Health Administrator.

While it is not feasible to describe all possible conflicts of interest that could develop, some of the more common conflicts that employees should avoid include the following:

- Working for a competitor, supplier, or customer without prior disclosure or approval from their supervisor, or Human Resources, subject to applicable law.
- Receiving, seeking, or soliciting anything of economic value as a gift, gratuity, or favor from any individual connected to CDHD.
- Engaging in self-employment in competition with CDHD.
- Using CDHD's proprietary, confidential, or trade secret information for personal gain.
- Using CDHD property or labor for personal or third-party use without prior approval.
- Committing CDHD to give its financial or other support to any outside activity or organization without the prior approval of the Health Administrator.

3.5 Employee Relationships

CDHD prohibits romantic or sexual relationships between supervisors and members of their staff. These relationships may create compromising conflicts of interest or the appearance of such conflicts. In addition, this type of relationship may give rise to the perception by others that there is favoritism or bias in employment decisions affecting that employee. Given the uneven balance of power within such

relationships, consent by the staff member may be suspect and may be viewed by others, or at a later date, by the staff member, as having been given as the result of coercion or intimidation. The atmosphere created by appearances of bias, favoritism, intimidation, coercion and/or exploitation undermines the trust and mutual respect which is essential to a healthy work environment.

CDHD does not normally employ individuals living together in a significant partner relationship, under any of the following circumstances:

- Where one of the parties would have the authority or practical power to supervise, appoint, remove, or discipline the other.
- Where one party would be responsible for evaluating the work of the other.
- Where both parties would report to the same immediate supervisor.
- Where other circumstances might lead to potential conflict among the parties or conflict between the interest of one or both parties and the best interests of the CDHD.
- Where one of the parties is a policy-level official of the CDHD.
- When an immediate family member serves on the Board of Health.

If two employees not meeting these guidelines develop such a relationship after becoming employed, CDHD reserves the right to transfer or terminate one of the employees as these may pose difficulties for supervision, security, safety, or morale within CDHD and lead to concerns of unfair treatment and favoritism. CDHD also reserves the right not to employ close relatives of policy level board members or officers of its grantors or oversight agencies, or others with whom CDHD deals, where such a restriction is necessary to avoid the reality or appearance of improper influence or favor.

CDHD may, in its sole discretion, modify reporting relationships, reassign job duties, and/or take any other action to prevent a conflict of interest and the appearance of unfair treatment or favoritism.

3.6 Outside Employment

CDHD respects employees' right to engage in activities outside of employment such as those that are of a personal or private nature, to the extent that such activities do not create a conflict of interest as described in the [Conflicts of Interest](#) policy set forth in this Manual or adversely affect the employees' ability to perform their job. Under certain circumstances, if an employee's personal conduct begins to adversely affect their performance on the job or begins to make it impossible for them to carry out any or all of their job duties while at work, appropriate disciplinary action up to and including termination of employment may be appropriate.

An example of an activity that might adversely affect employees' ability to perform their job duties is outside employment. While CDHD does not prohibit employees from holding other jobs, the following types of outside employment are prohibited:

- Employment that conflicts with the employee's work schedule, duties and responsibilities or creates an actual conflict of interest.
- Employment that impairs or has a detrimental effect on the employee's work performance CDHD.
- Employment that requires the employee to conduct work or related activities during working times or use any of CDHD's tools, materials, or equipment.
- For the purposes of this policy, self-employment is considered outside employment.

CDHD will not assume any responsibility for an employee's outside employment. Specifically, CDHD will not provide workers' compensation coverage or any other benefit for injuries occurring from or arising out of, such outside employment.

3.7 Non-Solicitation Policy

To avoid disruption of the workplace, no solicitations, collections, circulation of petitions, or distributions of literature by employees are permitted during working time or in working areas (See Glossary).

In addition, no person from outside CDHD is allowed on CDHD premises at any time for these or related purposes. If you observe someone who is not an employee engaging in any of these activities at any time, please notify Human Resources immediately.

While many employees appreciate the opportunity to donate to causes and participate in fundraisers, please be respectful of your co-workers' time and attention by limiting these offerings to non-working times and locations. Examples include school fundraisers, Girl Scouts, etc.

3.8 Political Activities

CDHD employees may participate in political or partisan activities of their choosing provided that the CDHD name, resources, staff time, and property are not utilized. Employees may not campaign on CDHD time or while representing the CDHD in any way. Employees may not allow others to use CDHD facilities or funds for political activities.

Any CDHD employee who meets with or may be observed by the public or otherwise represents CDHD to the public, while performing their regular duties may not wear or display any button, badge, or sticker relevant to any candidate or ballot issue during working hours. Employees shall not solicit, on CDHD property or CDHD time, for a contribution to a partisan political cause.

Employees who file for public office may be required to take a leave of absence without pay during their campaign or be terminated from the CDHD employment upon election where said office may, in the sole judgment of CDHD, create an appearance of impropriety or conflict of interest.

3.9 Gifts and Gratuities

Employees may not receive, accept, take, seek, or solicit, directly or indirectly, anything of economic value such as a gift, gratuity, or favor from any person if such employee has reason to believe:

- The donor would not give the gift, gratuity, or favor but for such employee's office or position with CDHD.
- The donor has or seeks to obtain contractual or other business or financial relationships with CDHD.
- The donor conducts operations or activities that CDHD regulates.
- The donor has interests that the employee's performance or nonperformance of official duties may substantially affect.

These provisions are not meant to prevent small gifts such as cookies, pens, or other items having no significant value that are given to staff and shared in the office environment.

3.10 External Communications

Occasionally, employees may be contacted by outside sources (e.g., media organizations, outside attorneys, or investigators) requesting information about CDHD matters, including information regarding current or former employees, or business relationships and transactions. To avoid providing inaccurate or incomplete information to outside sources, any employee contacted by any outside source regarding CDHD should refer the person (without comment) to the Health Administrator.

The Administrator, or their designee, is responsible for all official contacts with the news media during working hours, including answering of questions from the media. The Administrator may designate specific employees to give out procedural, factual, or historical information on limited, specific subjects. Unless designated by the Administrator, employees are prohibited from responding to media inquiries on behalf of CDHD, except to refer them to an authorized person.

This policy is not intended to restrict communications or actions protected or required by state or federal law, including but not limited to any colleagues' NLRA Section 7 rights.

Other information related to external communications can be obtained from the PIO team.

3.11 Dress Code

CDHD has adopted a business casual dress code. Each employee is a representative of CDHD, and it is important for all employees to project a professional image while at work. Employees are expected to be neat, clean, and well-groomed while on the job. Clothing must be consistent with the standards for the area in which they are working and be appropriate to the type of work being performed.

More specific dress code requirements for reasons of safety may also be established by individual departments based on work duties (i.e., for clinic settings, outdoor fieldwork, etc.).

Employee Expectations:

- Employees shall present a neat, clean, and professional appearance in their performance of duties at all times.
- Dress in a manner that will not hinder their ability to effectively complete their work assignments. Taking into consideration the communities served, customer expectations, business needs or standards, and the employee's safety.
- Employees are expected to practice good personal hygiene.
- Employees should dress appropriately for meetings and appointments with customers or constituents.
- Employees shall comply with dress requirements intended to ensure job-related safety when performing fieldwork, on construction sites, or in clinical settings.

Maintaining an acceptable personal appearance is an ongoing requirement of employment with Chelan-Douglas Health District.

If you do not adhere to the standards set forth in this policy, you may be asked to leave the premises to correct the issue. Hourly paid employees will not be compensated for any work time missed because of failure to comply with designated workplace attire and grooming standards.

Acceptable/Unacceptable Attire

Staff are expected to dress in business casual attire. All clothing should properly cover cleavage, chest, stomach, backside, and undergarments, even while bending/stooping over. Clothing should be clean, unwrinkled, and not excessively tight-fitting or overly baggy.

Some examples of acceptable and unacceptable business casual attire are outlined below. This list is not meant to be all-inclusive, as other attire may be acceptable but not directly listed here. If you are unsure, please discuss with your supervisor.

- Acceptable:
 - Blouses
 - Polo shirts (small universal logo/brand)
 - Clothing must be free from slogans, pictures, and/or advertisements.
 - Camisole/tank-top (must be covered by another garment, i.e., blouse, sweater, etc.)
 - Sweater/Sport Jacket
 - Denim jeans (Clean and in good condition, free of any rips or tears, fading or fraying)
 - Khakis/slacks
 - Dresses/skirts (no shorter than three inches above the knee)
 - Leggings (solid color, substantial material, and backside fully covered by another garment, i.e., long shirt, sweater, dress, etc.)
 - Footwear including loafers, clean athletic shoes, boots, flats, sandals, etc.
 - Open-toed shoes are permitted so long as they do not interfere with job function or present a safety hazard.
 - Footwear that requires laces should be laced up and tied.
 - Head coverings (as related to religious or cultural heritage, medical reasons)
 - Hats when performing fieldwork (to protect from the elements.)
- Unacceptable:
 - Shirts/T-shirts with slogans, logos or graphics predominately reflected on the shirt.
 - Spaghetti straps, muscle shirts, halter tops
 - Tight, see-through, backless, bare midriff, low cut tops or otherwise inappropriate clothing
 - Athletic wear including sweatpants and spandex
 - Shorts are not permitted in the office, but by permission for field work (such as during pool inspections)
 - Clothing that is ripped, frayed, stained or messy
 - Footwear including slipper-style sandals, casual sandals and rubber flip-flops.
 - Hats/ball caps or any other head covering with slogans, logos or graphics.

Tattoos and Jewelry

- Tattoos and body art that could be viewed as offensive and/or culturally insensitive must be covered.
- Visible piercings (including facial piercings) should be worn with discretion and must not impede work duties or pose a safety risk.
- Jewelry must not impede work duties or pose a safety risk.

Personal Hygiene

- Regular personal hygiene habits should result in a clean, non-offensive appearance. The use of scented products should not be unpleasant, distracting, or present a health risk for others they encounter.
- The use of strong fragrances should be avoided as they may cause discomfort to those who are highly sensitive to smells.

Deviations

An employee's religious beliefs or medical conditions, as defined by applicable law, that require deviation from CDHD Dress Code will be addressed on an individual basis. The Administrator or HR will offer guidance as to proper attire, appearance, and hygiene standards. Special requirements for reasons of safety may also be established.

Field Setting

Employees who work in the field on a regular/occasional basis should maintain a professional appearance when interacting with the public. Due to the nature of the work, employees must wear sufficient and proper clothing to aid in preventing - scratches, abrasions, slivers, sunburn, hot liquid burns, or similar hazards. Staff must not wear loose or ragged clothing, scarfs, or ties while working around moving machinery as described in WAC 296-155-035.

Minimum attire for field inspectors includes:

- Short sleeve shirt
- Long pants
- Sturdy work shoes

A hat may be worn, as long as the hat does not have slogans, logos or graphics. Shorts may be acceptable instead of long pants with prior supervisor approval. However, CDHD logo/graphics are acceptable.

While working in the field employees shall wear all appropriate personal protection equipment (PPE). Please refer to Departmental safety policy for appropriate PPE.

Construction Sites

Employees working on construction sites, **or** in hazardous areas must follow all safety regulations, guidelines and policies and wear the appropriate PPE.

Clinical Settings

Employees who work in a clinical setting full-time or on a part-time basis should maintain a professional appearance when interacting with the public. Attire should align with safety regulations to minimize risk of injury or contamination.

3.12 CDHD-Issued Logo Wear

Clothing with Chelan-Douglas Health District logo may be issued to employees and should primarily be worn when commuting to/from work, while at work, or at a work-related function. Employees are

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expected to conduct themselves in a professional manner and be cognizant of how their actions are a direct representation of CDHD.

Employees shall not wear issued Logo Wear at a public event on personal time or at bars or restaurants.

This would be considered inappropriate and could result in the employee having to return CDHD-issued clothing or other disciplinary action.

All issued items bearing the CDHD logo are considered CDHD property and must be returned to the supervisor upon separation of employment with CDHD.

Note: CDHD logo wear should only be worn for official work duties, therefore, logoed items should never be donated for resale at thrift stores or given to organizations that distribute clothing to those in need.

SECTION 4.0 Electronic Communications and Technology

4.1 Property Belonging to CDHD

Confidential and Proprietary Information

CDHD property includes not only tangible property, like desks and computers but also intangible property such as information as described below. Employees are responsible for ensuring that proper security is maintained at all times.

Proprietary, Confidential, and Personal Information

Given the nature of CDHD's business, protecting proprietary, confidential, and personal information is of vital concern to CDHD. This information is one of CDHD's most important assets. It enhances CDHD's opportunities for future growth, and indirectly adds to the job security of all employees.

In the course of employment with the CDHD, employees may have access to sensitive personal and medical information, as well as access to confidential information about CDHD operations. This confidential information (whether in verbal, written or electronic format) may not be disclosed to anyone, except where required for a business purpose.

The disclosure of confidential information (whether purposefully or inadvertently through casual conversation) not only violates CDHD policy but may also violate applicable state law. Any unauthorized disclosure aka Breach of Confidentiality of confidential information may result in disciplinary action up to and including termination.

4.2 General Policy for Electronic Health Information

It is the policy of CDHD that all workforce members must preserve the integrity, confidentiality, and availability of electronic protected health information (ePHI) and other sensitive information pertaining to our patients. Employees should work with the IT Director to follow the Health Information Portability and Accountability Act (HIPAA) Security Procedures and procedures on cybersecurity to ensure that CDHD and its workforce have the necessary medical and other information to provide the highest quality services possible. To ensure CDHD's compliance with the HIPAA Security Rule, CDHD and its workforce shall:

- Ensure the confidentiality, integrity, and availability of all ePHI CDHD creates, receives, maintains, or transmits.
- Protect against any reasonably anticipated threats or hazards to the security or integrity of such information.
- Protect against any reasonably anticipated uses or disclosures of such information that are not permitted or required under HIPAA Privacy Rule.
- Ensure compliance with the applicable HIPAA Security Rule and the HIPAA Security Procedures by its workforce.

4.3 Use of CDHD Equipment and Technology

CDHD provides various Technology Resources to authorized employees to assist them in performing their job duties for CDHD. Each employee has a responsibility to use CDHD's Technology Resources in a manner that increases productivity, enhances CDHD's public image, and is respectful of other employees.

Appropriate Use

CDHD's Technology Resources are to be used by employees only for the purpose of conducting CDHD business. CDHD strongly discourages employees from storing any personal data on any of CDHD's Technology Resources.

Improper Use: Prohibition Against Harassing and Discriminatory Use

CDHD is aware that employees use email for correspondence that is less formal than written memoranda. Employees must take care, however, not to let informality degenerate into improper use. As set forth more fully in CDHD's [Policies Against Discrimination and Harassment](#), CDHD does not tolerate discrimination or harassment based on any legally protected characteristic protected by federal, state, or local laws. Under no circumstances may employees use CDHD's Technology Resources to transmit, receive, or store any information that is discriminatory, harassing, or defamatory in any way (e.g., sexually explicit or racial messages, jokes, cartoons, etc.).

Improper Use: Financial or Political Lobbying:

CDHD equipment may not be used for individual businesses or to promote non-work-related activities. RCW 42.17A.555 prohibits the use of CDHD "resources to promote or oppose a political candidate or support a ballot proposition." The statute includes an exception to the prohibition for "activities which are part of the normal and regular conduct of the office or agency." This also includes staff time and other agency resources. If you are unsure, please talk to your supervisor or manager.

4.4 Mobile Communication Devices

CDHD recognizes the need for some employees to have access to mobile communication devices for business purposes, including cellular calls and data access.

It is the responsibility of both CDHD and staff using mobile devices to ensure the confidentiality, privacy, integrity and availability of CDHD data including information created, collected, stored processed, access, shared, or transmitted on mobile devices.

Use of mobile devices, whenever possible, are to utilize CDHD managed systems to maintain data. This includes use of Microsoft Office 365 accounts (for managing emails, instant messages, and calendars). It's important to note that records created or received on mobile devices that relate to the scope of employment of an employee are subject to the provisions of CDHD's Public Records Request Policy

The presence of camera phones in the workplace presents challenging issues regarding personal privacy and CDHD security. Capturing the visual image of others without their knowledge or consent is an invasion of privacy and is prohibited. The use of the phone function of a camera phone is appropriate. Employees must also follow applicable law (RCW9.73.030) regarding recording any conversations with others. Nothing in this policy shall be construed as limiting CDHD's right to use camera surveillance equipment, when appropriate, in the course of conducting workplace investigations, subject to applicable law.

4.5 Texting

Due to the difficulty in retaining and archiving records created by texting employees are not to send or receive electronic messages via text for the purposes of conducting business, unless previously authorized to do so by their supervisor or the Administrator. In such instances, processes must be established to retain the messages in accordance with the applicable retention period and required format which protects the data.

4.6 Social Media Policy

CDHD understands that social media can be a fun and rewarding way to share your life and opinions with family, friends, and coworkers around the world. However, the use of social media also presents certain risks and carries with it certain responsibilities.

Social media includes **all means** of communicating or posting information or content of any sort on the Internet. When identifying yourself as a CDHD employee on personal social media accounts, please refer to the Communications Department's social media guidelines for more guidance on best practices. To ensure the interactions on official CDHD social media accounts further the mission and vision of CDHD, and meaningful dialogue, CDHD reserves the right to monitor the conversations by removing comments and or posts that are disruptive. These include, but are not limited to, comments or posts that contain:

- Comments that attack a person's character
- Content that constitutes discrimination and/or harassment
- Obscenity
- Threats or personal attacks that are directed, suggested, or implied.
- Repetitive posts of the same material that disrupt the normal operation of the forum.

Use of social media channels for CDHD business, including but not limited to Facebook, X (formerly Twitter), Instagram, YouTube, LinkedIn, Snapchat and TikTok by CDHD employees should be in coordination with the public information office (PIO) team. All uses on social media through CDHD computer systems, networks, or during employee time shall follow applicable laws, including statutes and rules relating to Ethics in Public Service, privacy law, intellectual property rights law and applicable social media site standards.

Content published by CDHD and its employees on CDHD accounts is public record and subject to Washington State Public Records Act and request. All CDHD social media accounts must be approved by the PIO before started and archived using a third-party social media archiving platform (currently Archive Social). Misuse of social media may result in disciplinary action.

4.7 Obligations Upon Termination

Upon termination of employment, whether voluntary or involuntary, all CDHD documents, computer records, and other tangible property in the employee's possession or control must be returned to CDHD on or before their last day of employment.

SECTION 5: Workplace Safety and Health

5.1 General Health and Safety

CDHD strives to provide safe and healthy work environments. This can be accomplished if every employee observes all Occupational Safety and Health Administration (OSHA) and Washington Industrial Safety and Health Act (WISHA) regulations, as well as CDHD policies and procedures for health and safety.

CDHD has safety policies and procedures to provide employees with written guidelines to be followed to reduce workplace incidents and accidents. Safety policies are available to all staff on the CDHD designated site, ADP or other shared network drive.

In addition to safety policies, all new employees receive a required orientation by their supervisor on appropriate program-specific health and safety topics. This orientation will allow new employees to perform their work responsibilities safely and efficiently. It is the responsibility of every CDHD employee to help maintain a safe and healthful work environment.

CDHD Employees are expected to comply with safety rules here are some examples:

- Report immediately any injury or accident, safety hazard, or property needing repair to your supervisor.
- Keep your individual work area clean and orderly at all times.
- Store all materials and equipment in their proper places and appropriately.
- Do not engage in horseplay on work premises.

Agency Responsibilities Regarding Workplace Safety

CDHD endeavors to use reasonable efforts to ensure the working environment is generally safe and secure for all employees and volunteers. The CDHD will endeavor to remedy known safety issues or hazards as quickly as possible. Reported conditions or hazards that require an extended timeline to mitigate, shall be posted as a “hazard area” or “unsafe condition.” That condition shall be communicated to all CDHD employees as soon as possible.

Employees shall be trained on the recognition of unsafe working conditions, hazards and root causes of work-related accidents and injuries. Each division or department of CDHD will ensure safety plans and protocols applicable to the division are in place and updated. Employees will be trained on safety plans and protocols at time of initial onboarding and during annual training sessions. Employees will be trained on this policy and how to properly report unsafe working conditions to their supervisor, manager or the administrator.

Unsafe or hazardous conditions existing on property other than the CDHD should be reported to the employee’s direct supervisor, manager, and the actual property owner where the condition exists.

Employee Responsibility Regarding General Workplace Safety

Employees should exercise caution in the performance of duties and shall follow and adhere to published safety regulations and controls. Every employee is responsible for maintaining a safe work area and following CDHD safety rules. An employee that recognizes an unsafe condition or hazard involving CDHD property shall promptly report that condition to their director supervisor, manager and

HR. An employee encountering a hazard in the field shall promptly report that situation to their supervisor or manager and the property owner (if known). It is the responsibility of all employees to perform their assigned duties in the safest manner possible while following safety guidelines.

In the case of an accident involving a personal injury, regardless of how serious, employee shall immediately notify their supervisor and complete and submit a CDHD Employee Report of Injury form.

Any employee determined to be acting recklessly or with indifference to established safety protocols, procedures, or policy resulting in an accident or incident, will be subject to disciplinary action. Any employee determined to be intentionally falsifying or embellishing reports related to safety, accidents, or incidents will be subject to disciplinary action.

Root Causes

Employees should have general knowledge of the root causes of work-related accidents and injuries. While reporting an accident or incident, an employee shall include any information regarding the root cause of the situation. The information should be included in the Employee Report of Injury form.

Root Causes of Work-Related Accidents and Injuries

- Work procedures lacking in safety protocols
- Lack of employee training
- Worker complacency
- Unsafe equipment
- Lack of proper supervision or training
- No follow-up or mitigation regarding previous injuries or incidents
- Poor safety management or adherence to policy

5.2 Reporting

This policy outlines the proper reporting procedure and documentation requirements involved in a work-related accident (injury) or incident. Any employee requiring direction outside of this policy should not hesitate to contact their direct supervisor or manager for additional guidance.

Reporting an Accident (Injury)

An employee injured while at work shall immediately report the accident or injury to their supervisor, manager, or HR manager. An employee injured to a degree that they are unable to report the accident, may have a coworker or witness make the notification.

The employee shall seek medical attention as needed or as directed by their supervisor, manager, or HR. If the employee refuses to seek medical treatment, the employee will be required to write "Refused" on the Employee Report of Injury form at the point it asks, "Did you see a doctor about this injury/illness?"

An employee who observes, discovers or is informed of an injured employee should first ensure scene safety, render aid and then make proper notification to the employees' supervisor, manager or HR.

A request for an ambulance to respond to an injured or ill employee will be considered prior to any decision to transport an injured or ill employee to a health care facility for treatment. This seriousness and potential escalation of the injury or illness must be evaluated.

When seeking treatment at a medical facility, an employee or their designee will complete the State Labor and Industry (L&I) work related injury forms on hand with the medical for provider. The employee shall ask for a copy of the State L&I paperwork upon release from the medical facility. CDHD uses L&I and is not self-insured.

As a rule, the employee report of injury form shall be completed within 48 hours of the accident, unless otherwise extended by a manager or the administrator. All known facts related to the direct cause, indirect cause, or root cause of the accident/injury shall be included in the report completed by the employee. Completed employee report of injury forms and the L&I paperwork will be submitted to the employee's manager and will be on file with the HR.

Reporting an Incident (Non-Injury)

An employee encountering an unsafe or hazardous condition, threat of harm or harassment shall notify their supervisor or the HR manager of the incident as soon as possible. The reporting employee's supervisor and manager will conduct an investigation and may ask the employee to complete a statement in the incident. The supervisor and manager should complete an Incident Report which is submitted to the HR manager and may be shared with the management team and the CDHD safety committee for hazard mitigation purposes.

Non-Employee Reporting

A contractor, temporary worker, student, intern, or volunteer involved in an accident (injury) while on CDHD property, or while performing in the field for CDHD, should report the accident (injury) to a CDHD manager or supervisor while also reporting to their own supervisor, faculty or employer. The non-employee will follow the accident reporting requirements of their actual employer.

If a CDHD employee is made aware of an accident to a non-employee, the CDHD employee should notify a manager of the situation. The manager made aware of the accident should document the situation using the Incident Report form.

In the case a customer or general citizen is involved in an accident on CDHD property or becomes severely ill, the need for an ambulance should be evaluated. In all cases of an accident involving a customer or general citizen, an Incident Report shall be completed by a manager and an investigation will be initiated.

Occupational Illness Reporting

An employee suspecting that they have developed a work-related illness shall report the circumstances of the illness to their direct supervisor, manager or HR. If the employee has not been seen by a provider, the employee's supervisor, manager, or HR should recommend the employee seeks medical attention as soon as possible.

The supervisor, manager, or HR shall obtain as much information from the employee as possible regarding any work-related causation of the illness. If the illness is confirmed, or highly suspected as being related to the employee's workplace, the HR manager or administrator shall notify State L&I of the situation. State L&I may opt to conduct an investigation of the illness.

The employee's manager, HR manager, or the administrator's designee will conduct an investigation into reported illnesses based on the known facts and circumstances. In a case which the determination is made that the illness causation is work related, the cause will be mitigated immediately.

5.3 Investigation Process

The investigation of an accident/injury shall be conducted in a timely manner. As a rule, the manager or administrator's designee shall initiate the investigation within 48 hours of the reported accident or incident. The manager, supervisor or administrator's designee assigned to investigate an accident or incident will compile the official investigative report. In a case involving employee hospitalization, a disabling injury, or death, the Washington State Department of Labor and Industries will investigate. In those circumstances, the state report is recognized as the official investigative report.

5.4 Use of CDHD Vehicles

CDHD vehicles shall not be used for personal purposes. Occupancy of CDHD vehicles is restricted to authorized persons. The driver is expected to adhere to all Washington State motor vehicle laws. Authorized drivers of personal vehicles for CDHD purposes are required to comply with the State of Washington mandatory liability insurance requirements as defined in [RCW 46.29](#) and [RCW 46.30](#).

If a CDHD employee is involved in a motor vehicle accident while operating a CDHD vehicle, the employee shall promptly notify their supervisor, manager, and the facilities manager. Police reports along with insurance information specific to other motorists involved shall be given to the employee supervisor.

Use of Cellular Phones While Driving

The use of Cellular Phones while driving must be avoided by all means. All employees are required to abide by the [Distracted Driving Policy](#) while using CDHD vehicles or personal vehicles while on CDHD business.

5.5 Visitors

To ensure the safety and security of CDHD employees and customers, only authorized visitors are permitted beyond the reception areas. For safety and security reasons, visitors are not allowed to enter the facility at any time without an escort.

- Planned visits: Are pre-arranged and names should be given to the clerks in advance, so they are aware of the planned visit. The person hosting the visitor, or former employee, will be their escort.
- Unplanned visits: If the visit has not been pre-arranged, the visitor will be limited to the lobby area.
- Suppliers and Delivery Personnel: must be escorted at all times.

All visitors must enter through the main reception area and sign in and out at the reception desk. Authorized visitors will be escorted to their destination and must be accompanied by a representative of CDHD at all times. If issued, visitors are required to always visibly wear their ID badges while on CDHD premises. They must return their ID badge prior to their final departure.

Non-employees working with CDHD in another capacity (suppliers, delivery personnel, etc.), do not need to be issued a visitor pass as long as they are escorted at all times, or they do not go out of their normal areas of pick up and/or delivery.

Unplanned visits by individuals who employees may be familiar with are not automatically approved. If an individual is not a planned visit, reception is not allowed to authorize them access beyond the reception. In these cases, Reception should ask their name, who they are there to see and the nature of their visit. They must then contact HR who can then discreetly approach the employee to see if they feel comfortable with this visitor.

If a caller or visitor is attempting to reach a former employee, CDHD employees are not allowed to disclose any of that information (including new employer or contact information).

Students, Interns and Volunteers

CDHD welcomes students, interns and volunteers with sufficient notice and documentation. If you are contacted by a student, intern or volunteer interested in learning more about CDHD, there are a few important steps you must take.

First, notify your supervisor and obtain permission to host a student, intern, or volunteer. The supervisor may contact the manager, HR, or administrator for approval, depending on agency capacity.

Then, you or your supervisor will confirm that appropriate paperwork is in order for the student, intern, or volunteer, including but not limited to required timesheets and confidentiality forms. A student, intern or volunteer calendar is also available in Outlook Calendar and required so facilities are informed of student, intern, or volunteer needs (such as ID badges).

Safety

All employees and visitors are required to comply with all safety rules, regulations, and policies while on company property. Visitors are not allowed in company vehicles unless it has been pre-approved in writing by the Health Administrator or Operations Director. It is the responsibility of all CDHD employees to immediately report any suspicious person(s).

If, at any time, an employee feels unsafe or is concerned about an interaction or the behavior of a caller or visitor, you are encouraged to proceed to a safe space, contact the Health Administrator, HR, any member of management, and, if you deem appropriate, call 911.

5.6 Smoking Policy

In accordance with [Washington State's Clean Indoor Air Act of 2005](#), smoking is prohibited indoors. Employees who wish to smoke must do it outside, at least 25 feet away from all entrances, exits, windows that open, and ventilation intakes. Your cooperation in observing this policy is requested in order to respect the rights of both smokers and non-smokers. This policy applies equally to all employees, contractors, patrons, vendors, and visitors. Smoking products include, but are not limited to:

- Cigarettes
- Cigars
- Cigarillos
- Pipes
- Electronic Cigarettes (e-cigarettes) and vape pens

Employees should not be in CDHD Logo when smoking as smoking is a recognized public health problem.

5.7 Drug and Alcohol-Free Workplace Policy

CDHD has a strong commitment to maintaining a safe and healthy work environment for its employees, which includes a drug-free workplace. This policy is intended to ensure that CDHD employees and the clients it serves be free of safety hazards and reduced worker efficiency resulting from use of controlled substances or intoxicants such as alcoholic beverages.

Employees who work under the influence of drugs or alcohol compromise these interests by endangering the health and safety of themselves and others. Substance abuse in the workplace can cause several work-related problems, including absenteeism and tardiness, poor productivity and substandard job performance, an increased workload for co-workers, and inferior quality of service to customers. To further its interest in maintaining a safe and healthy working environment and preventing accidents and injury to its employees and others, CDHD has a policy against working under the influence of drugs or alcohol.

The unlawful or unauthorized use, abuse, solicitation, theft, possession, transfer, purchase, sale, or distribution of controlled substances or drug paraphernalia or alcohol by an individual anywhere on CDHD premises, while on CDHD business (whether or not on CDHD premises), while driving a CDHD vehicle or driving a personal vehicle for CDHD business, or while representing CDHD, is strictly prohibited. Staff found violating this policy may be required to immediately test for drugs or alcohol and/or be subject to immediate disciplinary action, including termination.

CDHD permits the legal use of prescribed drugs on the job if they do not impair the ability of the employee to perform the essential functions of the job. Employees taking a prescribed medication must carry it in the container labeled by a licensed pharmacist or be able produce it if asked.

In cases where an employee is believed to be under the influence or in possession of an illegal or unauthorized substance, or in cases otherwise involving some risk or harm, a manager or HR should be notified. CDHD reserves the right to search CDHD property including an employee's personal belongings, with or without notices, while on CDHD property. Any illegal drugs or drug paraphernalia may be turned over by the CDHD to an appropriate law enforcement agency and may result in criminal prosecution. Staff and client safety is the priority, and the individual should not drive themselves if they are impaired.

5.8 Weapons Free Workplace

To ensure that CDHD maintains a workplace safe and free of violence for all employees, CDHD prohibits the possession or use of weapons on CDHD property by employees.

All employees are subject to this provision, including temporary employees, on CDHD property. A license to carry the weapon does not supersede CDHD policy. Any employee in violation of this policy will be subject to disciplinary action, up to and including termination (See Glossary for Definitions).

5.9 Searches of Personal Property

If CDHD reasonably believes that there is an immediate threat to human health, life, or safety, CDHD reserves the right to conduct reasonable, unannounced searches of CDHD premises and personal searches of employees while entering, on, or leaving CDHD premises (RCW 49.44.230). Employees who fail or refuse

to promptly permit a search under this policy may be subject to disciplinary action, up to and including termination.

5.10 Policy Against Workplace Violence

Employees are expected to refrain from fighting, “horseplay” or other conduct that may be dangerous to others. Conduct that threatens intimidates or coerces others will not be tolerated.

Indirect or direct threats of violence, incidents of actual violence, and suspicious individuals or activities should be reported as soon as possible to your direct supervisor or any member of management. When reporting a threat or incident of violence, the employee should be as specific and detailed as possible. Employees are not expected to place themselves in peril. Emergencies or immediate threats should be reported to 911.

Conduct prohibited by this policy includes, but is not limited to, the following whether in the workplace or acting on behalf of CDHD in settings outside the workplace:

- Threats or threatening language of any kind.
- Intimidating or instilling fear in others, menacing, flashing of weapons, hostile, physically aggressive, injurious, violent behavior, including stalking and surveillance and/or destructive action undertaken for the purpose of domination or intimidation.
- Behavior that suggests a propensity towards violence, including belligerent speech, excessive arguing or swearing, or a demonstrated pattern of refusal to follow CDHD policies and procedures.
- Threats coming from an employee’s abusive personal relationship.
- Defacing or causing physical damage to CDHD property.
- CDHD resources may not be used to threaten, stalk or harass anyone at or outside the workplace.
- Possession, use, sale, or purchase of weapons or firearms of any kind on work premises, whether during working hours or work-related functions or while conducting CDHD business.
- Any conduct that adversely affects legitimate business interests and which could potentially result in violation of any criminal laws relating to threats of violence or violent acts.

Employees are encouraged to report safety concerns regarding domestic partner violence. Employees should inform Human Resources of any protective or restraining order that they have obtained that lists the workplace as a protected area. CDHD is committed to supporting victims of domestic partner violence by providing referrals, community resources and providing time off for reasons related to domestic partner violence.

5.11 Inclement Weather

The Health Administrator has the authority to close the CDHD office due to hazardous or severe weather. When hazardous or severe weather conditions occur outside of regular business hours, CDHD will make reasonable efforts to notify employees on the day of the closure.

In the event that CDHD closes early due to hazardous or severe weather, non-exempt employees are paid for all hours worked and will otherwise be paid in accordance with applicable federal and state laws. For any hours not worked and not otherwise compensable, non-exempt employees can use available paid time off. Exempt employees who report to work and are sent home early due to hazardous or severe weather will receive pay for a normal working day.

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When CDHD is open, but an employee is unable to report to work because of hazardous/severe weather, the employee should contact their supervisor at the earliest possible time. Employees will be required to use accrued vacation time or personal leave. If an employee does not have vacation time available, non-exempt employees will only be paid for hours worked, exempt employees will not be paid for full-day absences due to inclement weather. If the office remains open, employees must make a reasonable effort to report to work as scheduled.

Employees should not take unnecessary risks to report to work in unsafe conditions.

Section 6: Employment

6.1 Employment Classifications

Employees are classified by the type of work they perform and the number of hours they are regularly scheduled to work. Each position falls into one of the following categories, which will also determine eligibility for overtime and certain employee benefits.

Exempt versus Non-Exempt

Status	Definition
Exempt, salaried	Employees who are generally paid on a salary basis; are in executive, administrative, or professional positions; and are not eligible for overtime pay.
Non-Exempt, hourly	Employees who are ordinarily paid on an hourly basis; and are eligible for overtime pay.

Employment Types

Employment Type	Definition
Regular	Employees who are regularly scheduled to work a certain number of hours each work week.
Temporary	Employees who are hired on a temporary, short-term, or project basis. Appointments are limited – generally not to exceed three (3) months.
Outsourced Workers	Non-employees who provide services pursuant to a contract with specific parameters. Outsourced workers include temporary agency employees, vendors, independent contractors, or consultants, and are not considered CDHD employees and therefore receive no employee benefits whatsoever.

Employment Hours

Employment Hours	Definition
Full-time	Employees who are regularly scheduled to work at least thirty (30) hours per week.
Part-time	Employees who are regularly scheduled to work at least twenty (20) hours, but less than thirty (30) hours per week.

6.2 Introductory period

Intent and duration

The probationary period of employment, or initial period of work in a new position, should be a review period for both the employee and CDHD. To determine that the association is mutually satisfactory, all newly hired employees and regular employees transferred or promoted to a new will be placed into an introductory period for at least six months. During this time supervisors will carefully observe, monitor

and evaluate the employee's performance, conduct, and attitude. Issues identified may be brought to the attention of the employee for correction.

Extension

The introductory period may be extended up to an additional six months if the supervisor feels additional time is necessary to enable the employee to achieve satisfactory job performance.

Termination

Introductory period employees may be terminated by the Administrator during this time based upon the recommendations of the supervisor and/or division manager. Termination during the introductory period may be done without notice of cause or right to appeal. Newly hired employees terminated during their introductory period will receive payment for accrued annual leave.

6.3 Re-employment

Employees rehired by the CDHD within one year after their separation from CDHD will be placed on the same salary step as attained prior to the separation if they are rehired into the same or equivalent position. These employees may be granted longevity credit following successful completion of the probation period. Employees re-hired after one year will lose any previously accrued seniority or longevity and establish a new hire and anniversary date.

6.4 Employment Records

CDHD maintains personnel files for each employee. These files include information such as the employee's job application, resume, documentation of performance appraisals and salary increases, and other employment records. These files are locked in the HR office.

CDHD relies upon the accuracy of the information contained in the employment application, as well as the accuracy of other data presented during the hiring process and throughout an employee's employment. Employees are responsible for informing Human Resources of any changes in their personnel data. Unreported changes of personal phone number, address, marital status, etc. can affect withholding tax and benefit coverage and affect the ability of CDHD to contact the employee during an emergency.

Personnel files are the property of CDHD, and access to the information contained therein is restricted. Employees who wish to review their own files should provide Human Resources with reasonable advance written notice.

Confidentiality of Medical Information

Medical information about employees will be treated with strict confidentiality and only those with a legitimate business need to know such information will be given access. CDHD will take reasonable precautions to protect such information from inappropriate disclosure and maintain the confidentiality of employee medical information. Anyone who inappropriately discloses such information will be subject to disciplinary action, up to and including termination of employment.

6.5 Employment Verification and References

CDHD does not give references, other than to confirm the dates of employment and position held, without the employee's prior written consent. Only the Administrator or their designee may provide employment

references for current or former regular CDHD employees. Direct supervisors are authorized to give references for temporary employees and volunteers that they supervised but may not offer more information than what is listed above.

6.6 Employment of Minors

Generally, regular employees must be 18 years of age or older. Occasionally, CDHD hires students or others who are 16 or 17 years old, but such employment must be approved in advance by the Health Administrator. A minor's work authorization form must be completed and signed both by parents and the school that the student attends (if school is in session).

6.7 Performance Evaluations

CDHD continuously evaluates employees' performance, but it will endeavor to provide employees with an annual appraisal of their job performance. Such evaluations should be scheduled during the same month as the employee's anniversary when possible. Completed performance reviews will be retained in either hard copy – in personnel file; or electronically – in ADP.

6.8 Disciplinary Action

CDHD strives to provide a safe and harmonious work environment where employees are able to perform their work productively and effectively. CDHD has adopted a Code of Conduct (Section 3 of this manual) which establishes standards that employees must follow in their dealings with other employees, and the public. Corrective/Disciplinary action may be taken in cases where an employee does not meet conduct or performance expectations or violate any law or CDHD policies. In some cases, it may be appropriate to consider progressive discipline, which provides the opportunity for employees to be warned of the seriousness of unacceptable behavior and the consequences if the misconduct continues. Levels of Progressive Discipline Procedure includes:

1. Verbal – (Counselling)
2. Verbal Warning
3. Written Warning
4. Final Written Warning

The exact measures taken depend on the severity and frequency of the underlying issues and CDHD's specific rules and procedures. While the procedure is typically a sequence of steps, each manager can reserve the right to take appropriate action at the appropriate step on a case-by-case basis. Progressive disciplinary may be taken in cases where an employee does not meet conduct or performance expectations, violates any law or CDHD procedure. This policy does not constitute a contract, either express or implied, between CDHD and its employees.

The decision to use or not use disciplinary action is solely within the discretion of CDHD. Nothing in this Policy is intended to modify the at-will nature of employment, which means that either the employee or CDHD may terminate the employment relationship at any time.

6.10 Resignation

Resignation is a voluntary act initiated by the employee to terminate employment. CDHD requires employees to submit a written notice of their resignation to their supervisor at least ten (10) working days prior to the effective date of their resignation, unless this time limit is waived by the employee's supervisor. A resignation notice must contain the date of the last day to be worked. Failure to provide

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timely notice of resignation may result in the employee not being eligible for rehire. At CDHD's discretion, employees who give notice of the intent to separate may be placed on paid administrative leave during the two-week notice period.

All departing employees are required to return all office supplies, computer equipment, tools, keys, and property belonging to CDHD on or before their last day of employment as specified in the [Property Belonging to CDHD](#) policy.

Section 7: Compensation

7.1 Pay Dates

CDHD employees are paid semi-monthly, on the tenth and twenty-fifth of each month in accordance with the practices of Chelan County. If the payday falls on a weekend or a holiday, paychecks will be issued on the preceding workday.

Deductions

CDHD is required by state and federal laws to make certain deductions from employee compensation. Such deductions typically include applicable federal, state, and local income taxes. The amount of all deductions will be listed on the employee's pay stub.

Wage Errors

Every effort is made to avoid errors in your paycheck. If you believe an error has been made, please contact payroll immediately. The necessary steps will be taken to assure that any correction is made properly and promptly. If the CDHD is in error, overpays you, CDHD is entitled to offset that overpayment through deductions from your next paycheck(s). Employees who believe they have been subject to an improper deduction should report the matter to payroll immediately. The issue will be promptly investigated, and appropriate corrective action taken if needed.

7.2 Overtime Pay

Overtime shall be paid to non-exempt employees at a rate of one and a half times the regular rate of pay for all hours worked over forty (40) hours in a work week.

As required by law, overtime pay is based on actual hours worked. Therefore, time off for meals, time spent commuting to and from the initial site of work, approved paid absences (i.e., approved paid time off for purposes of vacation or sick), or any holiday or leave of absences will not be considered time worked for the purpose of calculating overtime pay.

Employees are sometimes asked to work additional time to meet deadlines, operational needs, and emergencies. Therefore, employees' cooperation in performing overtime work is appreciated. However, overtime may not be worked without advance approval by a supervisor, except in emergency situations in which case the supervisor must be informed immediately. In addition, CDHD does not allow non-exempt employees to work "off the clock." Any unapproved overtime worked or unapproved "off the clock" work will be compensated by CDHD, but employees may be subject to discipline (up to and including discharge) for failure to follow CDHD policy.

In the event of a local, state, or nationally recognized emergency with FEMA, state, or local financial support, exempt staff may be eligible for overtime pay if they are required to work the emergency. They will be required to keep accurate time keeping for the duration of the emergency. This policy can be implemented by the Executive Team, which includes the chair, vice chair, and Health Administrator, and ratified by CDHD Board of Health recognizing the emergency and authorizing the use of emergency funds for this purpose. It can also be implemented at any time by a majority vote of the Board of Health.

7.3 Business Travel

CDHD has established a process to manage staff travel and related expenses pursuant to RCWs 42.24.115. CDHD will also establish policies in accordance with CFR guidelines. Specifically, the Federal Travel Regulations of the CFR.

All travel must meet State, Federal and U.S. General Service Administration (GSA) guidelines. Staff will need to seek proper approval from managers and sign an Authorization Travel Form before travel. Approval will be needed from the Administrator in the event that lodging exceeds per diem rates. Generally, travel should be prepared and approved 21 days before traveling. Please contact Fiscal for related Travel Procedures.

7.4 Professional Endorsements and Training (Reimbursable Expenses)

Training which is required for professional licensure or certification or as a condition of practice in the employee's profession is not considered work time, except as may otherwise be specified. Time spent studying for training classes shall not be considered work time.

Employees are responsible for completing all training and for maintaining all credentials mandated by law, regulation, or CDHD policy and for providing their supervisors with documentation of the same. Supervisors are responsible for monitoring and maintaining documentation regarding required training by their employees. Employees are responsible for providing copies of the following to the human resources: department license renewal, certifications, and transcripts.

With pre-approval, CDHD will pay part or all expenses associated with obtaining new professional endorsements and for expenses associated with continuing education for professional endorsement requirements, or the employee's professional development. Professional development courses or programs must include subject matter that is directly related/required training and to the improvement of the employee's current job skills or that reasonably relates to the employee's career objectives at CDHD. Approved expenses may include course and registration fees, materials fees, and travel expenses. Employees will be required to provide verification of attendance and completion of the course. The following are guidelines for educational reimbursement:

- A) Employees may be eligible to attend educational courses with assistance from CDHD. Employees must obtain prior approval from their supervisor and the Administrator or his/her designee prior to course registration. Educational courses are allowed only if the courses are pertinent and useful to the employee's job and will not interfere with the employees work schedule. The cost of tuition, books, and other required expenditures may be reimbursed at the rate of 50% by CDHD and 50% by the employee upon completion of the class, provided the employee receives a passing grade of at least a "C".
- B) If CDHD requires the course, the cost of tuition, books, and other required expenditures will be reimbursed at the rate of 100% by CDHD upon completion of the course, provided the employee receives a passing grade of at least a "C".

A letter of intent of continued employment for two (2) years is required from the employee when attending courses either paid in full or part by CDHD. If the employee voluntarily terminates employment prior to two years from completion of the course, full reimbursement to CDHD is required. If employment is terminated within the two years of the employee being reimbursed for any cost of professional

endorsement, the employee is responsible for reimbursing CDHD for those costs unless the separation is a result of layoff, disability separation, or other good cause determined by the Administrator.

All submissions for reimbursement must have prior approval of the employee's supervisor and the Administrator or his/her designee.

Section 8: Time Management and Working Conditions

8.1 Work Week Defined

For purposes of preparing timecards, daily logs, or payroll purposes, the workday is defined as the 24-hour period which runs from 12:00 am Monday until 11:59 pm Sunday each week.

8.2 Attendance and Punctuality

CDHD's ability to effectively operate depends upon the cooperation and commitment of each employee. Regular attendance and consistent punctuality are required. Employees are expected to report and be ready to begin work for their scheduled hours.

CDHD recognizes, however, that there are times when absences, tardiness, and/or early departures cannot be avoided. In such cases, employees must notify their supervisor before their scheduled workday for each day they will be absent or tardy. Failure to properly notify your supervisor in advance of an absence, late arrival, or early departure from work, frequent or prolonged unexcused absenteeism or tardiness, and certainly falsification of time records will result in disciplinary action, up to and including termination of employment.

In the event that an employee fails to report to work for three (3) consecutive workdays without notifying their supervisor or supervisor, that employee will be deemed to have voluntarily resigned. If an employee is absent for three (3) or more consecutive workdays due to illness or injury of the employee or a child, parent, spouse or domestic partner, or the employee has a pattern of absence, the employee may be required to provide Human Resources with a doctor's note on the day the employee returns to work, to the maximum extent permitted by applicable law. An employee who is absent due to a work-related illness should apply for workers' compensation benefits.

8.3 Time Sheets and Record-Keeping

Accurately recording time worked is the responsibility of all employees. All employees are required to keep an accurate record of time worked in ADP in order to calculate employee pay and benefits. Time worked is all the time actually spent on the job performing assigned duties including regular and pre-approved overtime hours, as well as absences (e.g., sick, holidays, vacation), late arrivals, early departures, and meal periods.

There are no projections or "guessing" of work hours. Hours worked must be calculated from the time an employee starts work or arrives at the job site until the employee takes a lunch break or finishes work. Once an employee reviews and enters their hours, this is an indication that the hours logged are complete and accurate. Work performed off the job site or at home will be counted as time worked but must be approved in advance in writing by your supervisor.

Employees who violate this policy or falsify entries in ADP may be subject to disciplinary action, up to and including termination of employment.

8.4 Meal Periods

Employees who work five (5) hours in a workday are entitled to take an unpaid duty-free meal period. Meal periods must be a minimum of thirty (30) minutes in duration and must be taken 2 to 5 hours into their shift. A second unpaid meal period (not less than thirty (30) minutes) is required when working more than ten (10) hours and must be taken in the middle of their second 5-hour period. Employees are not required to remain on-site or on-call during their meal period.

8.5 Rest Period

Employees must take a ten (10) minute rest period for every four (4) hours worked with the rest period being in the middle of each 4-hour work period as far as practicable. Rest periods for non-exempt employees will be confirmed by the supervisor and scheduled based on business needs and operational requirements of the work site. Employees are not to work more than three (3) hours without a rest period. Rest periods may not be used to extend lunch breaks or “saved” for the purpose of arriving late or leaving early from work.

8.6 On Call Duty

To maintain effective and continuous business operations CDHD requires certain departments/divisions to designate team members to be on call during non-regular business hours.

CDHD employees may be required to stay at or return to work during public health incidents and/or emergencies to perform duties specific to their job classification or to perform duties as requested in an assigned response position. This may require working a non-traditional work schedule or working outside normally assigned duties.

Additional information can be found in the On-Call Manual.

8.7 Remote Work

CDHD Supports the concept of remote work (telecommuting, remote or hybrid) as an alternative way an employee can accomplish work tasks by working outside the traditional workplace. CDHD encourages the practice in those circumstances where remote work does not detract from the efficient or effective delivery of the services of CDHD. CDHD considers remote work to be a viable, flexible work option when both the employee and the position are suited for such an arrangement. CDHD recognizes the benefits of remote work to include enhancing employee productivity and satisfaction, reducing commute time, and addressing space restrictions. Given the nature of the ever-evolving work and the needs from CDHD partners, colleagues and community, remote work may be appropriate for some employees and jobs, but not for others.

Remote work, telecommuting and hybrid arrangements may be authorized only when it is in the best interest of CDHD to do so.

CDHD recognizes three general types of remote work arrangements:

- Telecommuting – short term (temporary) work from home arrangement (most common).
- Remote – works from home 4- or 5 days per week.

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- Hybrid – works in the office and works remotely on as assigned schedule for a defined period.

Employees who are eligible for a remote work assignment, (telecommuting, remote, or hybrid) are required to:

1. Have a documented/approved remote work plan and Agreement Form on file.
2. Must be trained on CDHD Remote work policy, a signed remote agreement and training record must be on file no later than day 1 of their Remote work assignment.
3. Review, complete and sign a Remote Work Home Office Checklist.
4. If applicable, sign out any equipment being utilized on this assignment.

Remote work eligibility and application process are available with HR and reviewed on a case-by-case basis by the manager in collaboration with HR and the Administrator.

8.8 Community Service Activities

Time and expenses spent representing CDHD on community service boards, committees, etc., may be compensable under the following conditions:

- Service must be as an official CDHD representative rather than an interested individual.
- The community activity will directly affect or influence CDHD activity.
- The hours of service are of such timing and duration as to not interfere with normally assigned duties.
- The employee's supervisor has approved the activity.

Section 9: Paid Time Off and Other Leave

9.1 Paid Holidays

CDHD observes the following holidays:

- New Year's Day
- Martin Luther King's Birthday
- President's Day
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Veteran's Day
- Thanksgiving Day
- Day after Thanksgiving Day
- Christmas Day
- Personal Holidays
- January 1st
- 3rd Monday in January
- 3rd Monday in February
- Last Monday in May
- June 19th
- July 4th
- 1st Monday in September
- November 11th
- 4th Thursday in November
- Day after Thanksgiving
- December 25th
- Schedule through supervisor

Any holiday falling on Saturday will be celebrated on the preceding Friday. Any holiday falling on Sunday will be celebrated on the following Monday.

A holiday for a regular full-time employee is 8 hours. A holiday for a regular part-time employee is prorated based on their hours worked. Temporary employees do not receive paid holiday benefits. Non-exempt regular employees who work on a holiday will be paid two times their regular rate of pay for that work. Such time must be pre-authorized by the employee's supervisor. Temporary and exempt regular employees will be paid at their regular rate for hours worked on a holiday.

9.2 Personal Holiday

- Regular full-time and part-time employees who are hired before July 1 in any given calendar year and who have satisfactorily completed their 6-month probationary period are eligible for 2 paid personal floating holidays, which must be taken within the current calendar year.
- Personal holidays cannot be carried over from year to year and will be lost if not used by December 31 of each year.
- The personal holidays will be scheduled based on the approval of the employee's supervisor.

9.3 Religious Holidays

If an employee's religious beliefs require observance of a holiday not included in the basic holiday schedule, the employee may, with the approval of the employee's supervisor, take the day off using their

floating holiday, vacation, compensatory time, or leave without pay. Employees are allowed up to 2 unpaid holidays per year for religious activities.

9.4 Vacation

Regular full-time employees are eligible for vacation leave. Full-time Employees accumulate eight (8) hours of vacation leave per month. Regular part-time employees will accumulate vacation on a prorated basis. Temporary employees do not receive vacation benefits.

Each regular full-time employee is eligible to accrue additional vacation day(s) after satisfactorily completing 2, 3, 5, 7, 10, 12, 15, 17, 20, 22, and 25 years of service according to the following schedule:

Years of Service	Regular Days	Longevity Bonus Days	Total
1 year	12 days	0	12
2 years	12 days	1	13
3 years	12 days	2	14
5 years	12 days	3	15
7 years	12 days	4	16
10 years	12 days	5	17
12 years	12 days	6	18
15 years	12 days	8	20
17 years	12 days	9	21
20 years	12 days	10	22
22 years	12 days	11	23
25 years	12 days	12	24

Longevity bonus days are to be credited on the employee's anniversary date.

Regular part time employees working less than 40 hours shall accrue longevity bonus vacation hours based on the above schedule prorated to their full-time equivalency. For example, a regular employee working 20 hours a week (0.5FTE) would receive four hours (or 0.5 of a regular 8-hour day) of bonus vacation leave. Additional bonus days do not accrue until the employee reaches the next step on the longevity schedule.

All new employees must satisfactorily complete their 6-month probationary period to be eligible to use vacation leave.

Each supervisor is responsible for scheduling employees' vacations without undue disruption to CDHD operations. Leave requests should be submitted at least two (2) weeks prior to taking vacation leave.

The maximum number of vacation hours that may be carried over from December 31 of one year to January 1 of the next year is 240 hours. In cases where CDHD operations have made it impractical for an employee to use vacation time, the supervisor, with the approval of the Administrator, may authorize short-term additional accruals. Employees are paid for unused vacation time upon termination of employment, up to the maximum of 240 hours.

9.5 Sick Leave

Regular full-time employees who work 40 hrs./week are eligible for sick leave benefits. Employees accumulate eight (8) hours of sick leave per month. Regular part-time employees will accumulate sick leave prorated on the basis of their hours worked. For example, a regular employee working 20 hours

would acquire 4 hours (or 0.5 of a regular day) of sick leave per month. Temporary employees receive 1 hour for every 40 hours that they work.

- Regular employees accrue and may use sick leave from their date of hire.
- Sick leave covers those situations in which an employee is absent from work due to:
 - Physical injury to or illness of the employee.
 - The need to care for the employee's immediate family.
 - Medical, chiropractic, psychiatric, or dental appointments for the employee's immediate family
 - The employee's exposure to a contagious disease where the on-the-job presence of the employee would jeopardize the health of others.
 - Use of a prescription drug that impairs job performance or safety.
 - Actual periods of temporary disability associated with pregnancy or childbirth.
 - The death of an immediate family member, not to exceed five (5) prorated workdays. Additional sick leave may be authorized by the supervisor for special needs up to one (1) additional week.

A doctor's certificate may be required when an employee is absent for a period in excess of three (3) days. CDHD may also request the opinion of a second doctor, at the CDHD's expense, to determine whether the employee is eligible for Family and Medical Leave or suffers from a physical or mental condition that impairs their ability to perform the essential functions of their job.

Employees who use all their accumulated sick leave and require more time off work due to illness or injury may take leave without pay as set forth in Section 9.6. Leave and benefits for pregnancy are applied in the same way as leave for temporary disabilities.

Employees may request accrued sick leave beyond the period of actual disability following childbirth with prior approval.

9.6 Leave Without Pay

The Administrator or manager may grant leaves of absence without pay for absence from work not covered by any other type of leave or if other leave balances are exhausted. Examples of situations for which leave without pay may be granted include time off work for personal reasons, such as prolonged illness, caring for an ill relative, pursuing an education, or fulfilling a military obligation in excess of fifteen (15) days per year.

- Accrued sick leave, if applicable, compensatory time, and vacation leave should be exhausted prior to taking any leave without pay.
- An employee's benefits are suspended during the period of unpaid leave until the employee returns to work. Vacation and sick leave do not accrue in any month during which an employee is on leave without pay for more than half the month.
- An employee may pay the cost of benefits to keep them in place during leave without pay.

An employee who fails to report promptly at the end of the unpaid leave is presumed to have resigned. An employee returning from a temporary disability may, at CDHD's option or if required by law, return to the same position or similar position at a comparable rate of pay.

If the leave without pay is due to an illness, CDHD may require, before the employee returns to work, a doctor's statement indicating that the employee is fit for duty and capable of returning to work and performing the essential functions of the employee's position.

CDHD provides military leave for employees while performing military service in accordance with federal and state law. Military service includes active military duty and reserve or National Guard training. An employee must provide their supervisor with copies of their military orders as soon as possible after they receive those orders. Reinstatement upon return from military service is determined in accordance with applicable federal and state law.

9.7 Jury and Witness Leave

Civil leave will be authorized to permit an employee to serve as a juror for a period of up to two weeks with pay. Additional jury service time will be allowed; however, the employee must use accrued vacation leave or comp time or serve on leave without pay basis.

The employee must notify the employee's immediate supervisor prior to using this leave and must show proof of being called as a juror. If an employee summoned for jury duty is excused during any portion of the workday, that employee must report to work for the duration of that day. When an employee receives any payment for serving as a juror, the amount of payment shall be reimbursed to CDHD (excluding mileage and meals reimbursement).

9.8 Bereavement Leave

Bereavement leave is a form of paid leave. In the event of a death in the employee's immediate family, a regular full-time employee working 40 hours/week will receive three (3) paid bereavement days (24 hours). Regular employees working less than 40/hours/week will receive 3 paid pro-rated days of bereavement leave on the basis on their hours worked. For example, an employee working 20 hours would receive 3 pro-rated days of 4 hours each, for a total of 12 hours of paid bereavement leave.

The definition of immediate family, for the purpose of bereavement leave, includes employee's spouse or domestic partner, children (including step and foster children) parents, brother or sister, grandparents, grandchildren, mother or father-in-law, son or daughter in-law.

If additional time off is needed, the employee must submit a request to their supervisor. If approved, the employee may take up to (1) additional week, which can be paid as sick leave, or taken as unpaid leave in both cases must be approved by the Supervisor in advance.

9.9 Administrative Leave

On a case-by-case basis, CDHD may place an employee on administrative leave with or without pay for an indefinite period of time, as determined by the Administrator to be in the best interests of CDHD. Administrative leave is not meant to be punitive and is a tool that can be used at the discretion of the Administrator.

9.10 Family and Medical Leave (FMLA)

Employees are eligible for FMLA if:

- At least fifty (50) or more employees are employed within a 75-mile radius of the employee's work site.

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- The employee has been employed for at least one year; and
- The employee has worked at least 1,250 hours within the previous twelve (12) months.

Basic Leave Entitlement

The FMLA requires covered employers to provide up to twelve (12) weeks of unpaid, job-protected leave in a 12-month period to eligible employees for certain family and medical reasons. The 12-month period is measured forward from the date of your first FMLA leave usage. The next 12-month period would begin the first time FMLA leave is taken after completion of the prior 12-month period.

- Example: Toni's FMLA leave begins On February 14, 2023, so her 12- month period is February 14, 2023, through February 13, 2024.

Leave may be taken for one, or more of the following reasons:

- To care for the employee's child after birth or placement for adoption or foster care.
- To care for the employee's spouse, son or daughter, or parent (but not in-law) who has a serious health condition; and/or
- For the employee's own serious health condition (including any period of incapacity due to pregnancy, prenatal medical care, or childbirth) that makes the employee unable to perform one or more of the essential functions of the employee's job.

Leave to care for the employee's child after birth, or placement for adoption or foster care must be taken within one (1) year of the child's birth or placement.

Definition of Serious Health Condition

A serious health condition is an illness, injury, impairment, or physical or mental condition that involves:

- An overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents the employee from performing the functions of the employee's job or prevents the qualified family member from participating in school or other daily activities.
- Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than three (3) consecutive calendar days combined with at least two visits to a health care provider or one visit and a regimen of continuing treatment.
- Incapacity due to pregnancy, or incapacity due to a chronic condition.

Other conditions may meet the definition of continuing treatment.

Military Family Leave

Eligible employees with a spouse, son, daughter, or parent (but not in-law) on covered active duty or called to covered active duty status (or has been notified of an impending call or order to covered active duty) in the Reserve component of the Armed Forces for deployment to a foreign country in support of a contingency operation or Regular Armed Forces for deployment to a foreign country may use their 12-week leave entitlement to address certain qualifying exigencies. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, caring for the parents of the military member on covered active duty, and attending post-deployment reintegration briefings.

FMLA also includes a special leave entitlement which permits eligible employees (spouse, son, daughter, parent (but not in-law) or next of kin of a covered service member) to take up to twenty-six (26) weeks of leave to care for a covered service member with a serious injury or illness during a single 12-month period (one-time basis only). A covered service member is a current member of the Armed Forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation, or therapy, is otherwise in outpatient status, or is on the temporary retired list, for a serious injury or illness. These individuals are referred to in this policy as “current members of the Armed Forces.” Covered service members also include a veteran who is discharged or released from military services under conditions other than dishonorable at any time during the five-year period preceding the date the eligible employee takes FMLA leave to care for the covered veteran, and who is undergoing medical treatment, recuperation or therapy for a serious injury or illness. These individuals are referred to in this policy as “covered veterans.”

The FMLA definitions of a “serious injury or illness” for current Armed Forces members and covered veterans are distinct from the FMLA definition of “serious health condition” applicable to FMLA leave to care for a covered family member.

Job Benefits and Protection

If applicable, during FMLA leave, CDHD must maintain health coverage under any “group health plan” on the same terms as if the employee had continued to work. If paid time off is substituted for unpaid leave, CDHD will deduct the employee’s portion of any applicable health plan premium as a regular payroll deduction. If the employee’s leave is unpaid, the employee must make arrangements with payroll prior to taking leave to pay their portion of any applicable health insurance premiums each month.

CDHD’s obligation to maintain health care coverage ceases if an employee’s premium payment is more than 30 days late. If an employee’s payment is more than 15 days late, CDHD will send a letter notifying the employee that coverage will be dropped on a specified date unless the co-payment is received before that date. If employees do not return to work at the end of the leave period (unless employees cannot return to work because of a serious health condition or other circumstances beyond their control), they will be required to reimburse CDHD for the cost of the premiums CDHD paid for maintaining coverage during their unpaid FMLA leave. For purposes of this paragraph, an employee will be considered to have returned to work if the employee returns to work for at least 30 calendar days, or the employee retires at the end of the FMLA leave period or within 30 days thereafter.

Employees returning to work from FMLA may be asked to provide a return-to-work verification from their medical provider, with any restrictions or limitations noted. Employees must be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms unless dictated otherwise by law.

The use of FMLA leave cannot result in the loss of any employment benefits that accrued prior to the start of an employee’s leave.

Use of Leave

FMLA Leave may be taken intermittently or on a reduced leave schedule when medically necessary. Employees must make reasonable efforts to schedule leave for planned medical treatment during a time

that is the least disruptive to the operation as long as it doesn't interfere with the purpose for which the leave is needed or prevent the employee from obtaining an appointment. Leave due to qualifying exigencies may also be taken on an intermittent basis.

Substitution of Paid Leave for Unpaid Leave

Employees must use accrued vacation and sick time while on unpaid FMLA leave which will be applied at the beginning of the leave. The exception to this is if the employee is also using PFML concurrently at which point the employee may decide if they would like to use their accrued but unused leave. The substitution of paid time for unpaid FMLA leave time does not extend the length of FMLA leaves and the paid time will run concurrently with an employee's FMLA entitlement.

Receipt of disability benefits, Workers' Compensation benefits, or other monetary benefits does not extend the maximum amount of leave time to which an employee is eligible under the FMLA.

Employee Responsibilities

Employees must provide thirty (30) days' advance notice of the need to take FMLA leave when the need is foreseeable. When thirty (30) days' notice is not possible, the employee must provide notice as soon as practicable and generally must comply with CDHD's normal call-in procedures.

Employees must provide sufficient information for CDHD to determine if the leave may qualify for FMLA protection and the anticipated timing and duration of the leave. Sufficient information may include that the employee is unable to perform job functions; the family member is unable to perform daily activities, the need for hospitalization or continuing treatment by a health care provider, or circumstances supporting the need for military family leave. Employees also must inform CDHD if the requested leave is for a reason for which FMLA leave was previously taken or certified. Employees may also be required to provide periodic recertification supporting the need for leave.

Employer Responsibilities

Covered employers must inform employees requesting leave whether they are eligible under the FMLA. If they are, the notice must specify any additional information required as well as the employees' rights and responsibilities. If they are not eligible, the employer must provide a reason for ineligibility.

Covered employers must inform employees if leave is designated as FMLA-protected and the amount of leave counted against the employee's leave entitlement. If the employer determines that the leave is not FMLA-protected, the employer must notify the employee.

9.11 Washington State Paid Family and Medical Leave (PFML)

Eligible employees will be provided coverage under the Washington State Paid Family and Medical Leave (PFML) program administered by the Washington Employment Security Department ("the ESD"). This program provides paid time off when a serious health condition prevents the employee from working, when they need to care for a family member or a new child, or for certain military-related events. There is not a requirement that employees use other accrued leave, such as annual or sick leave, before or after taking PFML.

Eligibility

CDHD employees who have worked 820 hours (for any Washington employer) during the qualifying period are eligible to participate, though the ESD will make this determination. A “qualifying period” is determined by the ESD.

Requesting Leave

This plan is administered by the Employment Security Department (ESD) and employees will need to apply through the ESD. However, employees are still required to request time off through CDHD. If the employee’s need for leave is foreseeable, they must provide thirty (30) days’ notice. If the need to take leave is not foreseeable, the employee should provide as much notice as possible, usually within a few business days of learning of the need. If the employee is unable to provide notice personally, written notice may be given by another responsible party, such as the employee’s spouse, neighbor, or coworker.

Job Benefits and Protection

During PFML, employees do not accrue leave benefits, seniority/time-in-service credits (for retirement and salary increases) and do not receive payment for holidays. Health benefits for the employee and any covered family members continue under the same terms as if they were in paid status through CDHD. However, any out-of-pocket premiums normally incurred by the employee will be the employee’s responsibility to pay for the duration of the leave. If the employee’s insurance premium payment is more than 30 days late, coverage will be dropped unless an alternate payment schedule is agreed upon between the CDHD and the employee.

Change in status while on Paid Family and Medical Leave

If leave is denied after PFML has been taken, the employee must notify CDHD of the denial within three business days after receiving notification from the Employment Security Department. If payroll has not been completed for the month, the employee must use accrued leave to cover days of absence and/or leave without pay if approved by the Administrator. If payroll has already been completed, corrections will be made during the following month’s payroll. Any earned leave will be utilized, or the absence will be leave without pay. The Administrator may approve additional absences related to the original leave request, however the employee must use any available accrued leave prior to the use of leave without pay.

Returning from Paid Family and Medical Leave

Employees returning to work from PFML may be asked to provide a return-to-work verification from their medical provider, with any restrictions or limitations noted.

Employees who return from PFML generally will be restored to the same or equivalent job if they have worked for this employer for at least 12 months and have worked 1,250 hours in the 12 months before taking PFML (about 24 hours per week, on average). Otherwise, employees taking PFML are not guaranteed job reinstatement unless they qualify for such reinstatement under federal and/or state leave laws or other applicable laws.

FMLA Concurrent with PFML

Any time off for PFML purposes will run concurrently with FMLA, if applicable, with the exception of any leave for sickness or temporary disability because of pregnancy or childbirth, which is, in addition, to leave under PFML. Please reference the FMLA policy for eligibility requirements.

CDHD will not discriminate or retaliate against employees for requesting or taking paid leave. Employees who believe they have been discriminated against or retaliated against for these reasons should report it immediately to Human Resources.

You may go to www.paidleave.wa.gov for more information on the Paid Family and Medical Leave program.

9.12 Additional Types of Leave

Additional types of leave may be available, including Family Military Leave, Pregnancy Disability Leave, Civil Air Patrol Leave, Emergency Responder Leave and Leave Provisions for Victims of Domestic Violence, Sexual Assault and Stalking. Talk to HR if you have questions on types of leave available to you.

Glossary and Acronyms

ADA: Americans with Disabilities Act

CDHD property: is defined as all CDHD-owned or leased buildings and surrounding areas such as sidewalks, walkways, driveways, and parking lots under CDHD's ownership or control. This policy applies to all of CDHD-owned or leased vehicles and all vehicles that come onto CDHD property.

Dangerous Weapons: include firearms, explosives, knives, and other weapons, with the exception of work tools specifically authorized by the Health Administrator, including pocketknives carried by employees with the reasonable expectation of being useful in the workplace, that might be considered dangerous or that could cause harm. Employees are responsible for making sure that any item possessed by the employee is not prohibited by this policy.

Disability Definition: The ADA defines a person with a disability as a person who has a physical or mental impairment that substantially limits one or more major life activity. This includes people who have a record of such an impairment, even if they do not currently have a disability. It also includes individuals who do not have a disability but are regarded as having a disability. The ADA also makes it unlawful to discriminate against a person based on that person's association with a person with a disability.

FEMA: Federal Emergency Management Agency

FMLA: Federal Medical Leave Act

PFML: Paid Family Medical Leave Act of Washington

RCW: Revised Code of Washington

WAC: Washington Administrative Code

Working time: refers to the work time of the employee soliciting, collecting, circulating, or distributing as well as the employee to whom such action is directed. It does not include rest breaks, meal periods, or other times before or after work.

Working areas: includes all offices, reception areas, hallways, conference rooms, or other areas where business is conducted. It does not include break rooms or parking areas.

Acknowledgment of Receipt of Employee Manual

PLEASE SIGN AND RETURN THIS ACKNOWLEDGMENT TO HUMAN RESOURCES WITHIN ONE WEEK OF RECEIPT.

I acknowledge I have received a copy of the Chelan-Douglas Health District (CDHD) Employee Manual. I understand the Manual contains important information about CDHD's personnel policies, benefits, and obligations as an employee. I understand and agree that, as a condition of my employment, I am required to read and comply with the policies and information contained in this Manual. I further understand and agree that CDHD may change, rescind, or modify this Manual at their sole discretion, at any time, with or without prior notice.

I understand and agree I have no express or implied employment contract for any specified term with my employment with CDHD. Unless modified by a Collective Bargaining Agreement, I further understand my employment relationship is at-will, which means CDHD or I may terminate the employment relationship at any time, with or without notice, with or without cause, for any reason whatsoever not protected by law. CDHD does not promise that my employment relationship will continue for a set period or specific term, or that my employment relationship can be terminated only under particular circumstances. CDHD reserves the right to exercise its discretion to change my rate of pay, hours of work, benefits, and job duties, and to impose disciplinary action when warranted.

I understand and agree that during the period of my employment, no representative of CDHD has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to at-will employment and that any such agreement must be in writing and signed by the Health Administrator.

I further understand that this Manual supersedes and replaces any earlier personnel handbooks, Manuals, policies, practices, guidelines, written or oral descriptions of the terms or conditions of my employment, and any previous agreements, whether written or oral, express, or implied, relating to the subjects covered in this Manual.

Employee Printed Name: _____

Employee Signature: _____

Date: _____

**Exhibit A
Statement of Work
Contract Term: 2022-2024**

DOH Program Name or Title: DCHS - ELC COVID-19 Response -
Effective January 1, 2022

Local Health Jurisdiction Name: Chelan-Douglas Health District

Contract Number: CLH31004

SOW Type: Revision **Revision # (for this SOW)** 4

Period of Performance: January 1, 2022 through June 30, 2024

Funding Source <input checked="" type="checkbox"/> Federal Subrecipient <input type="checkbox"/> State <input type="checkbox"/> Other	Federal Compliance (check if applicable) <input checked="" type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development	Type of Payment <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
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Statement of Work Purpose: The purpose of this statement of work (SOW) is to provide supplemental funding for the LHJ to ensure adequate culturally and linguistically responsive testing, investigation and contract tracing resources to limit the spread of COVID-19.

Revision Purpose: Extend the Period of Performance and ELC EDE funding end date from 12/31/23 to 6/30/24 and adjust allocation.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period		Current Allocation	Allocation Change Decrease (-)	Total Allocation
				Start Date	End Date			
FFY19 ELC COVID ED ALLOCATION	1897129G	93.323	333.93.32	01/01/22	01/31/23	295,686	0	295,686
FFY20 ELC EDE LHJ ALLOCATION	1897140E	93.323	333.93.32	01/01/22	06/30/24	1,801,143	-726,515	1,074,628
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						2,096,829	-726,515	1,370,314

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Participate in public health emergency preparedness and response activities for COVID-19. This may include surveillance, epidemiology, laboratory capacity, infection control, mitigation, communications and or other preparedness and response activities for COVID-19.			
	Examples of key activities include:			
	<ul style="list-style-type: none"> • Incident management for the response • Testing • Case Investigation/Contact Tracing • Sustainable isolation and quarantine • Care coordination • Surge management 			

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
<ul style="list-style-type: none"> Data reporting <p>NOTE: The purpose of this agreement is to supplement existing funds for local health jurisdictions to carry out surveillance, epidemiology, case investigations and contact tracing, laboratory capacity, infection control, mitigation, communications, community engagement, and other public health preparedness and response activities for COVID-19.</p>				
DCHS COVID-19 Response				
1	Establish a budget plan and narrative to be submitted to the Department of Health (DOH) Contract Manager. DOH will send the “Budget narrative Template”, “Budget Guidance” and any other applicable documents that may be identified.	Submit the budget plan and narrative using the template provided.	Within 30 days of receiving any new award for DCHS COVID-19 Response tasks.	Reimbursement of actual costs incurred, not to exceed: \$295,686 FFY19 ELC
2	<p>1) LHJ Active monitoring activities. In partnership with WA DOH and neighboring Tribes, the LHJ must ensure adequate culturally and linguistically responsive testing, investigation and contact tracing resources to limit the spread disease. LHJs must conduct the following activities in accordance with the guidance to be provided by DOH.</p> <p>a. Allocate enough funding to ensure the following Contact Tracing and Case Investigation Support: Hire a minimum of 1.0 data entry FTE to assure system requirements for task 2.1.a.</p> <p>i. Contact tracing</p> <ol style="list-style-type: none"> Strive to maintain the capacity to conduct targeted investigations as appropriate. Have staff that reflect the demographic makeup of the jurisdiction and who can provide culturally and linguistically competent and responsive services. In addition, or alternatively, enter into an agreement(s) with Tribal, community-based and/or culturally-specific organizations to provide such services. DOH centralized investigations will count towards this minimum. Ensure all contact tracing staff are trained in accordance with DOH investigative guidelines and data entry protocols. Coordinate with Tribal partners in conducting contact tracing for Tribal members. Ensure contact tracing and case investigations activities meet DOH case and Contact Tracing Metrics. (Metrics to be determined 	<p>Data collected and reported into DOH systems daily.</p> <p>Enter all contact tracing data in CREST following guidance from-DOH.</p>	<p>Enter performance metrics daily into DOH identified systems</p> <p>Quarterly performance reporting updates</p>	<p>COVID ED LHJ ALLOCATION Funding (MI 1897129G) Funding end date 1/31/23</p> <p>\$1,801,143 \$1,074,628 FFY20 ELC EDE LHJ ALLOCATION Funding (MI 1897120E) Funding end date 6/30/2024 12/31/2023</p>

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<p>collaboratively by DOH, LHJs and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics.</p> <p>ii. Case investigation</p> <ol style="list-style-type: none"> 1. Strive to maintain the capacity to conduct targeted investigations as appropriate. 2. Enter all case investigation and outbreak data in WDRS following DOH guidance. <ol style="list-style-type: none"> a) Strive to enter all case investigation and outbreak data into CREST as directed by DOH. b) Ensure all staff designated to utilize WDRS have access and are trained in the system. c) Include if new positive cases are tied to a known existing positive case or indicate community spread. d) Conduct targeted case investigation and monitor outbreaks. e) Coordinate with Tribal partners in conducting case investigations for tribal members. 3. Ensure contact tracing and case investigation activities meet DOH Case and Contact Tracing Metrics. (Metrics to be determined collaboratively by DOH, LHJs, and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics. <p>b. Testing</p> <ol style="list-style-type: none"> i. Work with partners and Tribes to ensure testing is available to every person within the jurisdiction meeting current DOH criteria for testing and other local testing needs. ii. Work with partners and Tribes to ensure testing is provided in a culturally and linguistically responsive manner with an emphasis on making testing available to disproportionately impacted communities and as a part of the jurisdiction’s contact tracing strategy. iii. Maintain a current list of entities providing COVID-19 testing and at what volume. Provide 	<p>Enter all case investigation data in WDRS following guidance from-DOH.</p> <p>Maintain a current list of entities providing COVID-19 testing and at what volume. Provide reports to DOH Contract manager</p>		

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<p>reports to DOH on testing locations and volume as requested.</p> <p>c. Surveillance FTE support at a minimum of .5 FTE Epidemiologist to support daily reporting needs below.</p> <p>i. Ensure all COVID positive lab test results from LHJ are entered in to WDRS by 1) entering data directly in to WDRS, 2) sending test results to DOH to enter, or 3) working with DOH and entities conducting tests to implement an electronic method for test result submission.</p> <p>ii. Maintain records of all COVID negative lab test results from the LHJ and enter into WDRS when resources permit or send test results to DOH.</p> <p>iii. Collaborate with Tribes to ensure Tribal entities with appropriate public health authority have read/write access to WDRS and CREST to ensure that all COVID lab results from their jurisdictions are entered in WDRS or shared with the LHJ or DOH for entry.</p> <p>d. Tribal Support. Ensure alignment of contact tracing and support for patients and family by coordinating with local tribes if a patient identified as American Indian/Alaska Native and/or a member of a WA tribe.</p> <p>e. Support Infection Prevention and control for high-risk populations</p> <p>i. Migrant and seasonal farmworker support. Partner with farmers, agriculture sector and farmworker service organizations to develop and execute plans for testing, quarantine and isolation, and social service needs for migrant and seasonal farmworkers.</p> <p>ii. Congregate care facilities: In collaboration with the state licensing agency (DSHS), support infection prevention assessments, testing. Infection control and isolation and quarantine protocols in congregate care facilities.</p> <p>iii. High risk businesses or community-based operations. In collaboration with state licensing agencies and Labor and Industries, partner with food processing and manufacturing businesses to</p>	<p>on testing locations and volume as requested.</p> <p>Ensure all COVID positive test results are entered into WDRS within 2 days of receipt</p> <p>Quarterly performance updates related to culturally and linguistic competency and responsiveness, tribal support, infection prevention and control for high-risk populations, community education and regional active monitoring activities. Performance update should include status of all projects listed.</p>		

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<p>ensure adequate practices to prevent COVID-19 exposure, conduct testing and respond to outbreaks.</p> <ul style="list-style-type: none"> iv. Healthcare: Support infection prevention and control assessments, testing, cohorting, and isolation procedures. Provide educational resources to a variety of healthcare setting types (e.g., nursing homes, hospitals, dental, dialysis). v. Non-healthcare settings that house vulnerable populations: In collaboration with state corrections agency (DOC) and other state partners, support testing, infection control, isolation and quarantine and social services and wraparound supports for individuals living or temporarily residing in congregate living settings, including detention centers, prisons, jails, transition housing, homeless shelters, and other vulnerable populations. vi. Schools: In collaboration with OSPI and local health jurisdictions, support infection prevention and control and outbreak response in K-12 and university school settings. <p>f. Ensure adequate resources are directed towards H2A housing facilities within communities, fishing industries and long-term care facilities to prevent and control disease transmission. Funds can be used to hire support staff, provide incentives or facility-based funding for onsite infection prevention efforts, etc.</p> <p>g. Community education. Work with Tribes and partners to provide culturally and linguistically responsive community outreach and education related to COVID-19.</p> <p>h. Establish sustainable isolation and quarantine (I&Q) measures in accordance with WAC 246-100-045 (Conditions and principles for isolation or quarantine).</p> <ul style="list-style-type: none"> i. Have at least one (1) location for conducting I&Q operations identified and confirmed. This location should be sufficient for supporting I&Q services that are adequate for the population for your 	<p>Quarterly performance updates to include name, address and capacity of identified location that can support isolation and quarantine, and confirmation of appropriate planning and coordination as required.</p>		

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<p>jurisdiction and have an ability to expand if needed. This can be through contract/formal agreement; alternatively, the jurisdiction may establish with an adjacent jurisdiction a formal agreement to provide the isolation and quarantine capacity adequate to the population for your jurisdiction with the ability to expand.</p> <ul style="list-style-type: none"> ii. Maintain ongoing census data for isolation and quarantine for your population. iii. Planning must incorporate transfer or receipt of people requiring I&Q support to and from adjacent jurisdictions or state facilities in the event of localized increased need. iv. Planning must incorporate indicators for activating and surging to meet demand and describe the process for coordinating requests for state I&Q support, either through mobile teams or the state facility. 	<p>Report census numbers to include historic total by month and monthly total for current quarter to date</p>		

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the [DOH Finance SharePoint](#) site. Questions related to this SOW, or any other finance-related inquiry, may be sent to finance@doh.wa.gov.

Federal Funding Accountability and Transparency Act (FFATA)

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

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Unique Entity Identifier (UEI) generated by SAM.gov.

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Program Specific Requirements

All work will be performed in accordance with the revised and approved project plans to be submitted to DOH.

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

CDC Funding Regulations and Policies

<https://www.cdc.gov/grants/documents/General-Terms-and-Conditions-Non-Research-Awards.pdf>

Monitoring Visits (frequency, type)

The DOH program contact may conduct monitoring visits during the life of this project. The type, duration, and timing of visit will be determined and scheduled in cooperation with the subawardee. The DOH Fiscal Monitoring Unit may conduct fiscal monitoring site visits during the life of this project

Special Billing Requirements:

Payment: Upon approval of deliverables and receipt of an invoice voucher, DOH will reimburse for actual allowable costs incurred. Billings for services on a monthly fraction of the budget will not be accepted or approved.

Submission of Invoice Vouchers: The LHJ shall submit correct monthly A19-1A invoice vouchers for amounts billable under this statement of work to DOH by the 25th of the following month or on a frequency no less often than quarterly.

Other: Required activities, deliverables, and funding is for the entire project period: January 2021 through specified date above. Unspent funds and tasks not completed by December 31, 2021 were reauthorized for work in this new consolidated contract term beginning January 1, 2022. It is the LHJ's responsibility to assure that the unspent funding amount carried forward to this statement of work does not exceed the remaining available balance from the 2018-2021 contract.

**Exhibit A
Statement of Work
Contract Term: 2022-2024**

DOH Program Name or Title: Office of Immunization-Regional Representatives - Effective July 1, 2023

Local Health Jurisdiction Name: Chelan-Douglas Health District

Contract Number: CLH31004

SOW Type: Revision **Revision # (for this SOW)** 3

Funding Source	Federal Compliance (check if applicable)	Type of Payment
<input checked="" type="checkbox"/> Federal Subrecipient	<input checked="" type="checkbox"/> FFATA (Transparency Act)	<input checked="" type="checkbox"/> Reimbursement
<input type="checkbox"/> State	<input type="checkbox"/> Research & Development	<input type="checkbox"/> Fixed Price
<input type="checkbox"/> Other		

Period of Performance: July 1, 2023 through June 30, 2024

Statement of Work Purpose: The purpose of this statement of work is to define required Childhood Vaccine Program (CVP) activities for regional representatives.

Revision Purpose: The purpose of this revision is to add to Program Specific Requirements.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period		Current Allocation	Allocation Change None	Total Allocation
				Start Date	End Date			
FFY24 CDC IQIP Regional Rep	74310244	93.268	333.93.26	07/01/23	06/30/24	44,000	0	44,000
						0	0	0
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						44,000	0	44,000

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
Perform as the regional representative for Region Seven (Chelan County, Douglas County, Grant County, Okanogan County) conducting activities in accordance with state and federal requirements for the Childhood Vaccine Program (CVP) and Immunization Quality Improvement for Providers as directed by the state administrators of the program.				
1	Enroll new health care providers into the Childhood Vaccine Program (CVP). Conduct an enrollment site visit to all new providers, and gather information needed to complete program enrollment. All visits must be conducted in person in accordance with CVP Operations Guide.	a) Provider Agreement New Enrollment Packet with original or electronic signature – DOH 348-022 b) New Enrollment Training Guide (CVP SharePoint Site) c) Information Sharing Agreement with original signature - DOH 348-576. This document must be mailed to DOH.	Within ten (10) days after the date of the provider enrollment visit	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
2	Facilitate vaccine transfer/removal for providers who merge with existing health care organizations or who discontinue participating in the Childhood Program, when requested by DOH. Transfers must be approved by DOH and performed in accordance with CDC and CVP guidelines.	Submit completed Provider Disenrollment form DOH 348-423 when facilitating the transfer/removal of vaccine for providers who merge or dis-enroll from the Childhood Vaccine Program.	Within ten (10) days of vaccine transfer or removal	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
3	<p>Conduct Unannounced Vaccine Storage and Handling (USH) visits at 5% of enrolled health care provider sites within the assigned region. Sites may be selected by DOH or by using the DOH USH Visit Planning List. All visits must be conducted in person in accordance with the CVP Operations Guide.</p> <ul style="list-style-type: none"> ▪ Complete Unannounced Vaccine Storage and Handling visit follow-up to assure providers resolve all follow-up actions identified during the initial visit. Follow-up actions may include another physical visit or verification by email, fax, or mail that follow-up actions were completed. Documentation for each follow-up action must be appropriately entered into PEAR. 	<p>a) Enter responses from the Storage and Handling Reviewer Guide into the Provider Education, Assessment, and Reporting (PEAR) online system for each unannounced storage and handling visit. Follow all corrective action and follow-up guidance provided by PEAR and the Childhood Vaccine Program for each incorrect response.</p> <p>b) Upload the signed Acknowledgement of Receipt form to the visit in PEAR.</p> <p>c) Enter resolved site visit follow-up actions and upload applicable s documentation into PEAR</p>	<p>a) Online at the time of the visit or within five (5) business days of the site visit if online access was not possible even with equipment intended for access.</p> <p>b) Within five (5) business days of the site visit.</p> <p>c) Within five (5) business days of receiving the document(s) follow-up action was completed.</p>	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
4	<p>Complete the CVP Compliance Visit Project Schedule to ensure providers receive a site visit within 24 months of previous site visit and/or 12 months from new enrollment visit.</p> <p>Conduct Compliance Site Visits at enrolled health care provider site within the assigned region using the DOH Provider Selection Protocol. All visits must be conducted in person in accordance with CVP Operations Guide.</p> <p>Complete Compliance Site Visit follow-up to assure providers resolve all corrective actions identified during the initial visit. Follow-up actions may include another physical visit or verification by email, fax, or mail that follow-up actions were completed. Documentation for each Site Visit follow-up action must be appropriately entered into PEAR.</p>	<p>a) Submit completed CVP Compliance Visit Project Schedule to DOH</p> <p>b) Enter responses from the Compliance Site Visit Reviewer Guide into the Provider Education, Assessment, and Reporting (PEAR) online system for each compliance site visit. Follow all corrective action and follow-up guidance provided by PEAR and the Childhood Vaccine Program for each incorrect response.</p> <p>c) Upload the signed Acknowledgement of Receipt form, Chart Review Worksheet, and Billing Practices Form to the site visit in PEAR.</p>	<p>a) By July 31</p> <p>b) Online at the time of the Compliance Site Visit or within five (5) business days of the site visit if online access was not possible even with equipment intended for access.</p> <p>c) Within five (5) business days of the site visit.</p> <p>d) Within five (5) business days of</p>	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	All CVP reviewers are required to have at least one (1) observational visit conducted by DOH Office of Immunization staff or their designee annually.	<ul style="list-style-type: none"> d) Enter resolved site visit follow-up actions and upload applicable documentation in PEAR. e) Respond to requests from DOH to schedule observation visit. 	<ul style="list-style-type: none"> receiving the document(s) follow-up action was completed. e) Within 5 business days of DOH request. 	
5	<p><u>IQIP (Immunization Quality Improvement for Providers)</u></p> <p>Complete Project Management Scheduling Tool</p> <p>Complete initial IQIP (Immunization Quality Improvement for Providers) visits with 25% of eligible enrolled health care providers within the assigned region by June 15, 2024. A minimum of 30% of total visits assigned per region must be initiated within the first half Project year and take place in person or via webinar and in accordance with the Immunization Quality Improvement for Providers Guide on IQIP SharePoint/Basecamp site.</p> <p>Continue following up with provider sites at two (2,) six (6), and twelve (12) months after initial IQIP visit. Perform an assessment at six (6) months of initial visit. Follow-up visits must take place in person, webinar, or by telephone and in accordance with the Immunization Quality Improvement for Provider’s Guide.</p> <p>All IQIP reviewers are required to have at least one (1) observational visit conducted by DOH Office of Immunization staff or their designee. The observational visit will occur within four (4) months of the annual/ initial training.</p>	<ul style="list-style-type: none"> a) Copy of project management plan (template will be provided) b) Enter all initial IQIP visit details into the IQIP Online Tool for each visit conducted. c) Enter IQIP follow-up visit details in the IQIP Online Tool for all follow-up. <p>Complete and submit IQIP visit evaluation survey</p>	<ul style="list-style-type: none"> a) Within five (5) business days of the IQIP Annual Training b) Within five (5) business days of visit c) Within five (5) business days of contact 	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.

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Federal Funding Accountability and Transparency Act (FFATA) (Applies to federal grant awards.)

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

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Unique Entity Identifier (UEI) generated by SAM.gov.

Information about the LHJ and this statement of work will be made available on USASpending.gov by DOH as required by P.L. 109-282.

Program Specific Requirements

- *Tasks in this statement of work may not be subcontracted without prior written approval from the Office of Immunizations.*
- *Regional Representatives must have access to a digital data logger with current certificate of calibration and qualified pack outs or portable storage units for the purposes of transporting vaccine at appropriate temperatures when needed (see definitions in the DOH Vaccine Management Plan).*
- *Regional consultants will limit use of Immunization Information System (IIS) user accounts to view the data needed to conduct site visits with enrolled sites, and DOH reserves the right to limit regional consultant IIS access if used for unauthorized purposes, including but not limited to, editing, or approving Childhood Vaccine Program provider agreements or vaccine-related requests.*

Unallowable Costs:

There are limitations from the funding source on allowable costs for this contract. If the contractor is unsure if a cost is allowable, they should contact the contract manager for approval of the cost prior to making the purchase or charge.

- Advertising costs (e.g., conventions, displays, exhibits, meetings, memorabilia, gifts, souvenirs)
- Alcoholic beverages
- Building, purchases, construction, capital improvements
- Clinical care (non-immunization services)
- Entertainment costs
- Fundraising Cost
- Goods and services for personal use
- Honoraria
- Independent Research
- Land acquisition
- Legislative/lobbying activities
- Interest on loans for the acquisition and/or modernization of an existing building
- Payment of a bad debt, collection of improper payments
- Promotional and/or incentive materials (e.g., plaques, clothing, and commemorative items such as pens, mugs/cups, folders/folios, lanyards, magnets, conference bags)
- Purchase of food/meals (unless part of required travel per diem costs)
- Vehicle Purchase

**Exhibit A
Statement of Work
Contract Term: 2022-2024**

DOH Program Name or Title: Office of Drinking Water Group B Programs -
Effective January 1, 2022

Local Health Jurisdiction Name: Chelan-Douglas Health District

Contract Number: CLH31004

SOW Type: Revision **Revision # (for this SOW)** 2

Period of Performance: January 1, 2022 through June 30, 2024

Funding Source <input type="checkbox"/> Federal <Select One> <input checked="" type="checkbox"/> State <input type="checkbox"/> Other	Federal Compliance (check if applicable) <input type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development	Type of Payment <input type="checkbox"/> Reimbursement <input checked="" type="checkbox"/> Fixed Price
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Statement of Work Purpose: The purpose of this statement of work (SOW) is to provide financial support to LHJs implementing local Group B water systems programs.

Revision Purpose: The purpose of this revision is to extend the period of performance from 06/30/23 to 06/30/24 and provide additional financial support from 01/01/24 through 06/30/24 to LHJs implementing local Group B water systems programs.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period		Current Allocation	Allocation Change Increase (+)	Total Allocation
				Start Date	End Date			
GFS Group B (FO-E)	24240103	N/A	334.04.90	01/01/22	06/30/22	6,469	0	6,469
GFS Group B (FO-E)	24240104	N/A	334.04.90	01/01/23	06/30/23	6,469	0	6,469
SFY1 GFS - Group B	24110843	N/A	334.04.90	01/01/24	06/30/24	0	6,309	6,309
						0	0	0
						0	0	0
						0	0	0
						0	0	0
TOTALS						12,938	6,309	19,247

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Implement a PARTIAL Group B water system program. Reference DOH JPR #CLH20428-0	An executed joint plan of responsibility (JPR) with DOH identifying responsibilities of a PARTIAL Group B program.	January 1, 2023 2022 thru June 30, 2023-2024	Lump sum payment (See Special Billing Requirements)

DOH Program and Fiscal Contact Information for all ConCon SOWs can be found on the [DOH Finance SharePoint](#) site. Questions related to this SOW, or any other finance-related inquiry, may be sent to finance@doh.wa.gov.

Program Specific Requirements

Special Billing Requirements:

For January 1, 2022 – June 30, 2022, LHJ shall submit one invoice not later than June 30, 2022 and payment cannot exceed a maximum cumulative fee of \$6,469.

For January 1, 2023 – June 30, 2023, LHJ shall submit one invoice not later than June 30, 2023 and payment cannot exceed a maximum cumulative fee of \$6,469.

For January 1, 2024 – June 30, 2024, LHJ shall submit one invoice not later than June 30, 2024 and payment cannot exceed a maximum cumulative fee of \$6,309.

**Exhibit A
Statement of Work
Contract Term: 2022-2024**

DOH Program Name or Title: WIC Nutrition Program - Effective January 1, 2022

Local Health Jurisdiction Name: Chelan-Douglas Health District
Contract Number: CLH31004

SOW Type: Revision **Revision # (for this SOW)** 10

Period of Performance: January 1, 2022 through December 31, 2024

Funding Source	Federal Compliance (check if applicable)	Type of Payment
<input checked="" type="checkbox"/> Federal Subrecipient	<input checked="" type="checkbox"/> FFATA (Transparency Act)	<input checked="" type="checkbox"/> Reimbursement
<input type="checkbox"/> State	<input type="checkbox"/> Research & Development	<input type="checkbox"/> Fixed Price
<input type="checkbox"/> Other		

Statement of Work Purpose: The purpose is to provide Women, Infants, and Children (WIC) Nutrition Program services by following WIC federal regulations, WIC state office policies and procedures, WIC directives, and other rules. Refer to the Program Specific Requirements section of this document.

Revision Purpose: To add FFY24 USDA WIC CLIENT SVS CONTRACTS funds, add deliverable due dates, and update Billing Requirements.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period		Current Allocation	Allocation Change Increase (+)	Total Allocation
				Start Date	End Date			
FFY22 USDA WIC CLIENT SVS CONTRACTS	76101234	10.557	333.10.55	01/01/22	09/30/22	143,973	0	143,973
FFY23 USDA WIC CLIENT SVS CONTRACTS	76101244	10.557	333.10.55	10/01/22	09/30/23	187,941	0	187,941
FFY22 USDA FMNP PROG MGMT	76540237	10.572	333.10.57	05/01/22	09/30/22	381	0	381
FFY22 USDA WIC NUTRITION ED	76101236	10.557	333.10.55	01/01/22	09/30/22	2,500	0	2,500
FFY23 USDA WIC PROG MGMT CSS	76101242	10.557	333.10.55	01/01/23	09/30/23	1,600	0	1,600
FFY24 USDA WIC CLIENT SVS CONTRACTS	7610124B	10.557	333.10.55	10/01/23	09/30/24	186,672	5,693	192,365
FFY23 USDA FMNP MGMT	76540248	10.572	333.10.57	06/01/23	09/30/23	399	0	399
FFY25 USDA WIC CLIENT SVS CONTRACTS	76101251	10.557	333.10.55	10/01/24	12/31/24	46,362	0	46,362
						0	0	0
						0	0	0
TOTALS						569,828	5,693	575,521

Task #	Activity	Deliverables/Outcomes	Due Date/ Time Frame	Payment Information and/or Amount
1	WIC Nutrition Program			See "Billing Requirements" below.
1.1	Maintain authorized participating caseload at 100% based on quarterly average as determined from monthly caseload management reports generated at state WIC office. The Department of Health (Department) State WIC Nutrition Program has the option of reducing authorized participating caseload and corresponding funding when: 1. Unanticipated funding situations occur.	Outcomes based on monthly participation data from state WIC caseload management reports.	Authorized participating caseload for January 2022 through December 2024 = <u>585</u> Revised authorized participating caseload for	

Task #	Activity	Deliverables/Outcomes	Due Date/ Time Frame	Payment Information and/or Amount
	2. Reallocations are necessary to redistribute caseload statewide. 3. Caseload declines.		October 2022 through December 2024 = <u>605</u> Revised authorized participating caseload for January 2023 through December 2024 = <u>625</u> Revised authorized caseload for October 2023 through December 2024 = <u>645</u>	
1.2	Submit the annual Nutrition Services Plan for each year of the contract.	Nutrition Services Plan	First year due 9/30/22 Second year due 9/30/23 <i>Third year due 9/30/2024</i>	Payment withheld if not received by due date.
1.3	Submit the annual Nutrition Services Expenditure Report for each year of the contract.	Nutrition Services Expenditure Report	11/30/22 11/30/23 <i>11/30/2024</i>	Payment withheld if not received by due date.
1.4	Tell participants about other health services in the agency. If needed, develop written agreements with other health care agencies and refer participants to these services.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.5	Provide nutrition education services to participants and caregivers in accordance with federal and state requirements.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.6	Issue WIC benefits while assuring adequate WIC card security and reconciliation.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.7	Collect data, maintain records, and submit reports to effectively enforce the non-discrimination laws (Refer to Civil Rights Assurances below).	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.8a	Submit entire WIC and Breastfeeding Peer Counseling Budget Workbook for each year of the contract	Budget Workbook	First year due 9/30/22 Second year due 9/30/23 <i>Third year due 9/30/24</i>	
1.8b	Submit Rev-Exp Report spreadsheet from the WIC Budget Workbook monthly with A-19	Revenue and Expense Report and A-19	First year due monthly through December 31, 2022 Second year due monthly through December 31, 2023 <i>Third year due monthly through December 31, 2024</i>	

Task #	Activity	Deliverables/Outcomes	Due Date/ Time Frame	Payment Information and/or Amount
2	Breastfeeding Promotion			See “Billing Requirements” below.
2.1	Provide breastfeeding promotion activities in accordance with federal and state requirements.	Status report of chosen activities in Nutrition Services Plan. Documentation must be available for review by WIC monitor staff.	First year due 11/30/22 Second year due 11/30/23 <i>Third year due 11/30/2024</i> Biennial WIC Monitor	
2.2	Work with community partners to improve practices that affect breastfeeding. Choose one or more of the following projects: <ul style="list-style-type: none"> ▪ Provide staff, health care providers and community partners virtual breastfeeding training resources. ▪ Work with employers who likely employ low-income people to create worksite environments that support breastfeeding. ▪ Work with birthing hospitals to improve maternity care practices that affect WIC participant breastfeeding rates. ▪ Provide participants access to lactation consultants. Other projects will need pre-approval from the State WIC Office	Status report of chosen activities in Nutrition Services Plan. Documentation must be available for review by WIC monitor staff.	First year due 8/30/22 Second year due 8/30/23 <i>Third year due 11/30/2024</i> Biennial WIC Monitor	
3	Farmers Market Nutrition Program (FMNP)			See “Billing Requirements” below.
3.1	Distribute all Farmers Market Nutrition Program checks to eligible WIC participants between June and September 30 of current year.	Send completed readable copy of FMNP check registers to State WIC office on a weekly basis following FMNP procedures. Documentation must be available for review by WIC monitor staff.	Weekly June-Sept. 2022 and June-Sept. 2023 All sent by Oct. 1, 2022, Oct. 1, 2023, <i>and Oct 1, 2024</i> Biennial WIC Monitor	

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Federal Funding Accountability and Transparency Act (FFATA) (Applies to federal grant awards.)

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To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Unique Entity Identifier (UEI) generated by SAM.gov.

Information about the LHJ and this statement of work will be made available on [USASpending.gov](#) by DOH as required by P.L. 109-282.

Program Specific Requirements

Program Manual, Handbook, Policy References:

The LHJ shall be responsible for providing services according to rules, regulations and other information contained in the following:

- WIC Federal Regulations, USDA, and FNS 7CFR Part 246.
- Washington State WIC Nutrition Program Policy and Procedure Manual
- Office of Management and Budget, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, 2 CFR 200
- Farmers Market Nutrition Program Federal Regulations, USDA, FNS 7CFR Part 248
- Other directives issued during the term of the contract

Staffing Requirements:

The LHJ shall:

- Use Competent Professional Authority staff, as defined by WIC policy, to determine participant eligibility, prescribe an appropriate food package and offer nutrition education based on the participants' needs.
- Use a Registered Dietitian (RD) or other qualified nutritionist to provide nutrition services to high risk participants, to include development of a high-risk care plan. The RD is also responsible for quality assurance of WIC nutrition services. See WIC Policy for qualifications for a Registered Dietitian and other qualified nutritionist.
- Assign a qualified person to be the Breastfeeding Coordinator to organize and direct local agency efforts to meet federal and state policies regarding breastfeeding promotion and support. The Breastfeeding Coordinator must be an International Board-Certified Lactation Consultant or attend an intensive lactation management course, or other state approved training.

Restrictions on Funds (i.e., disallowed expenses or activities, indirect costs, etc.):

The LHJ shall follow the instructions found in the Policy and Procedure Manual under WIC Allowable Costs and 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

Special References:

What is the WIC program?

1. The WIC program in the state of Washington is administered by the Department of Health.
2. The WIC program is a federally funded program established in 1972 by an amendment to the Child Nutrition Act of 1966. The purpose of the program is to provide nutrition and health assessment; nutrition education; nutritious food; breastfeeding counseling; and referral services to pregnant, breastfeeding, and postpartum women, infants, and young children in specific risk categories.
3. Federal regulations governing the WIC program (7 CFR Part 246) require implementation of standards and procedures to guide the state's administration of the WIC program. These regulations define the rights, responsibilities, and legal procedures of WIC employees, participants, persons acting on behalf of a participant, and retailers. They are designed to promote:
 - a. High quality nutrition services;
 - b. Consistent application of policies and procedures for eligibility determination;
 - c. Consistent application of policies and procedures for food benefit issuance and delivery; and
 - d. WIC program compliance.
4. The WIC program implements policies and procedures stated in program manuals, handbooks, contracts, forms, and other program documents approved by the USDA Food and Nutrition Service.
5. The WIC program may impose sanctions against WIC participants for not following WIC program rules stated on the WIC rights and responsibilities.
6. The WIC program may impose monetary penalties against persons who misuse WIC benefits or WIC food but who are not WIC participants.

Monitoring Visits:

Program and fiscal monitoring are done on a biennial (every two years) basis and are conducted onsite.

The LHJ must maintain on file and have available for review, audit and evaluation:

- All criteria used for certification, including information on income, nutrition risk eligibility and referrals
- Program requirements

- Nutrition education
- All financial records

Assurances/Certifications:

1. Computer Equipment Loaned by the Department of Health WIC Nutrition Program

In order to perform WIC program activities, the Department requires computer equipment, such as computers, signature pads, document scanners, card readers and printers to be in local WIC clinics or to be transported to mobile clinics. This equipment (“Loaned Equipment”) is owned by the Department and loaned to the local agency (Contractor). The Loaned Equipment is supported by the Department. This equipment shall be used for WIC business only or according to WIC Policy and Procedures.

An inventory of Loaned Equipment is kept by the Department. Each time Loaned Equipment is changed, the parties shall complete the Equipment Transfer Form and the Department updates the inventory. A copy of the Transfer Form will be provided to the contractor. Copies of the updated inventory list may be requested at any time.

The LHJ agrees to:

- Defend, protect and hold harmless the Department or any of its employees from any claims, suits or actions arising from the use of this Loaned Equipment.
- Assume responsibility for any loss or damage from abnormal wear or use, or from inappropriate storage or transportation. The Department may enforce this by:
 - Requiring reimbursement from the LHJ of the value of the Loaned Equipment at the time of the loss or damage.
 - Requiring the LHJ to replace the Loaned Equipment with equipment of the same type, manufacturer, and capabilities (as pre-approved by the Department), or
 - Assertion of a lien against the Contractor's property.
- Notify the Department immediately of any damage to Loaned Equipment.
- Notify the Department prior to moving or replacing any Loaned Equipment.

The Department recommends Contractors carry insurance against possible loss or theft.

2. Civil Rights Assurance

- The LHJ shall perform all services and duties necessary to comply with federal law in accordance with the following Civil Rights Assurance.
- “The Program applicant hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.); all provisions required by the implementing regulations of the Department of Agriculture; Department of Justice Enforcement Guidelines, 28 CFR 50.3 and 42; and FNS directives and guidelines, to the effect that, no person shall, on the ground of race, color, national origin, sex, age or handicap, be excluded from participation in, be denied benefits of, or otherwise be subject to discrimination under any program or activity for which the Program applicant receives Federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.
- “By accepting this assurance, the Program applicant agrees to compile data, maintain records and submit reports as required, to permit effective enforcement of the nondiscrimination laws and permit authorized USDA personnel during normal working hours to review such records, books and accounts as needed to ascertain compliance with the nondiscrimination laws. If there are any violations of this assurance, the Department of Agriculture, Food and Nutrition Service, shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the Program applicant, its successors, transferees, and assignees, as long as it receives assistance or retains possession of any assistance from the Department. The person or persons whose signatures appear on the contract are authorized to sign this assurance on behalf of the Program applicant.”

3. 2CFR 200

The LHJ shall comply with all the fiscal and operations requirements prescribed by the state agency as directed by Federal WIC Regulations (7CFR part 246.6), 2CFR part 200, the debarment and suspension requirements of 2CFR part 200.213, if applicable, the lobbying restrictions of 2CFR part 200.245, and FNS guidelines and instructions and shall provide on a timely basis to the state agency all required information regarding fiscal and program information.

Billing Requirements:

1. Definitions

Contract Period: January 1, 2022 - December 31, 2024

Contract Budget Period: The time period for which the funding is budgeted.

- There are four federal budget periods
January 1, 2022 through September 30, 2022;
October 1, 2022 through September 30, 2023;
October 1, 2023 through September 30, 2024;
October 1, 2024 through December 31, 2024.

2. Billing Information:

- Billings are submitted on an A-19-1A invoice. These invoices are provided by the Department in the WIC Budget Workbook and include accounting codes for different budget categories.
- A-19s are submitted monthly and must be received by the Department within ~~60~~ 30 days following the close of each calendar month. Additional A-19s may be submitted at any time, but must be received within ~~90~~ 60 days of the close of the federal budget period.
- Funds are allocated by budget categories and by federal budget periods (refer to the budget spreadsheet).
- Funds are encumbered or spent only during the budget period; no carry forward from previous time periods or borrowing from future time periods is allowed.
- Payments are limited to the amounts allocated for the budget period for each budget category.
- Billings are based on actual costs for completed activities. Advance payments are not allowed. Back up documentation must be retained by the LHJ and available for inspection by the Department or other appropriate authorities.
- Payments will be made only for WIC approved expenditures. Refer to the Washington State WIC Nutrition Program Policy and Procedure Manual Volume 2, Chapter 4 – Allowable Costs and 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.
- If billing for indirect costs, a Cost Allocation Plan or Federal Indirect Cost Agreement must be submitted prior to payment.

Special Instructions:

The LHJ shall:

- Maintain complete, accurate, and current accounting of all local, state, and federal program funds received and expended.
- Provide, as necessary, a single audit in accordance with the provisions of 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. This circular requires all recipients and sub-recipients of federal funds to have a single audit performed should they spend \$750,000 or more of federal grants or awards from all sources. Contractors spending less than \$750,000 in federal grants or awards may also be subject to audit.
- Use Breastfeeding Peer Counseling (BFPC) Program funds only to support the peer counseling program. Once the program is established and peer counselors are trained, the majority of the salary costs must be paid to peer counselors to provide direct services to WIC participants. For a list of allowable costs see Volume 2, Chapter 4 – Allowable Costs. The priority use of BFPC funds is to hire and train peer counselors to provide breastfeeding peer counseling services to WIC participants.

SPECIAL REQUIREMENTS			
Contract Funding Period	Time Period special requirement funds are available	Amount	Special Requirement Description
January 2022 to September 2024	January 2022 to September 2022	\$1,050	Added in the USDA WIC Client Services Contracts category to cover training and travel expenses for all local WIC staff to participate in WIC-related trainings.
January 2022 - September 2022	January 2022 - September 2022	\$2,500	Added in the USDA WIC Nutrition Education category to fund staff time, conference registration and travel expenses for one WIC-funded staff to attend the 2022 NWA Biennial Nutrition Education and Breastfeeding Conference in Orlando, Florida on September 6 to 9, 2022.
January 2023 - September 2023	January 2023 - September 2023	\$1,600	This funding is for all WIC staff to participate in WIC-related training. Added in the USDA WIC Client Services Contracts category to cover training registrations, travel expenses, staff time to participate in training (salary/benefits or contractor), and other approved WIC training expenses.

October 2023 - September 2024	October 2023 - September 2024	\$3,000	This funding is for all WIC staff to participate in WIC-related training. Added in the USDA WIC Client Services Contracts category to cover training registrations, travel expenses, staff time to participate in training (salary/benefits for part-time or contractors), and other approved WIC training expenses.
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Other:

Any program requirements that are not followed may be subject to corrective action and may result in monetary fines or repayment of funds.



PERTUSSIS RESPONSE SITUATION REPORT

Incident: PERTUSSIS 2024
Report #:1

Operational Period:
Thursday, 03/07/2024 to
Wednesday 03/14/2024

Published: Thursday, March 14, 2024

CURRENT INCIDENT OBJECTIVES

1. Continue increased surveillance efforts for pertussis cases within the Chelan-Douglas Health District jurisdiction.
2. Classify cases using established protocols and definitions while conducting investigations.
3. Prioritize safety of students, staff and the general public by limiting exposures and ensuring access to medical countermeasures.
4. Conduct ongoing communications with agency staff and external partners to provide accurate and updated information regarding current pertussis outbreak.

OPERATIONAL PERIOD SUMMARY

- Identified the need for Incident Command to mobilize needed resources.
- Daily Operational briefings to discuss response strategy and tactics.
- Case investigations by Chelan-Douglas Health District case investigation team to identify, mitigate and track the spread of pertussis.
- Ongoing consultation with Washington State Department of Health Communicable Disease experts.
- Provided local healthcare partners a situational update on the pertussis situation.

OUTBREAK MONITORING STATUS

Please note: This is an evolving situation and data may not reflect current numbers

Data as of 12 PM 3/13/2024

- 2 active outbreaks* linked to schools K-12
- 1 possible outbreak linked to a school K-12. Investigation is in progress.

(*Washington State Department of Health defines an outbreak as 2 or more cases clustered in time and space.)

COMMUNICATIONS

- Issued News Release 2024-07: [Pertussis Outbreak Update](#)
- Issued Chelan-Douglas Health District Provider Letter on March 11, 2024
- Drafted Chelan-Douglas Health District Pertussis Sample Letter for Schools in English and Spanish
- *Stay Healthy, Stop Germs* flyer for childcare and schools in English and Spanish
- Responded to media inquiries regarding the pertussis outbreak

GENERAL SITUATION

Updated 03-13-2024

Table 1. TABLE W/CASE SUMMARY FOR SCHOOL 1, SCHOOL 2, COMMUNITY AND TOTALS

Figure 1. SCHOOL 1 EPI HISTOGRAM BY DAY

Figure 2. SCHOOL 2 EPI HISTOGRAM BY DAY

Table 1. Case totals by group, including schools and general community cases. Case counts include all cases classified as confirmed or probable. *Limited data available.

Group	Total Cases (confirmed + probable)	New Cases in Last 7 Days
School 1	16	1
School 2	8	8
School 3	*	*
Community	2	1
TOTAL	26	10

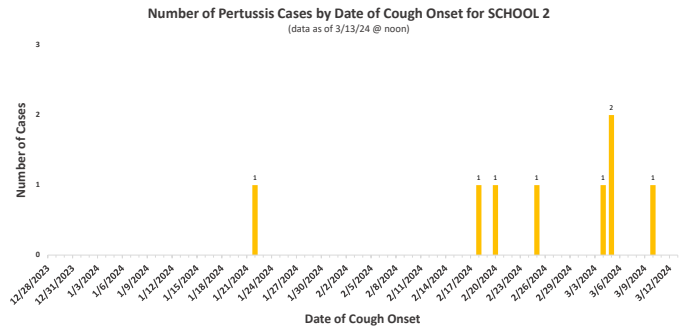


Table 2. Case totals by age group, including all cases classified as confirmed and probable at schools and in the community.

Age Group	Total Cases (confirmed + probable)
< 1 yr	0
1-6 yrs	0
7-10 yrs	3
11-19 yrs	19
20+ yrs	4
TOTAL	26

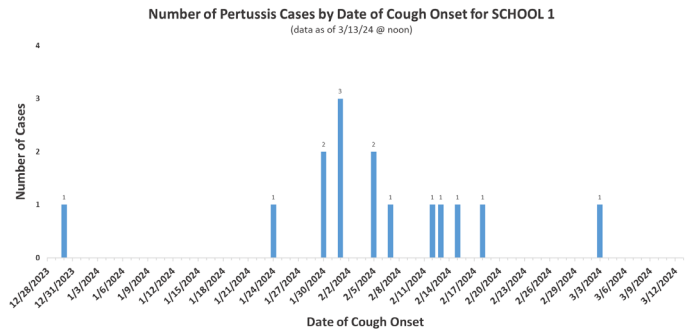


Table 3. Vaccination status for all cases, including confirmed and probable cases at schools and in the community.

Vaccination Status	Total Cases (confirmed + probable)
Vaccinated	17
Past Due	3
Unvaccinated	3
Unknown	3
TOTAL	26

