

**DIVISION OF PUBLIC HEALTH  
DPH CONTRACT 24193  
AMENDMENT 5**

The Department of Health Services, on behalf of the Division of Public Health and Pierce County Health Department agree to amend their original agreement for the program(s) titled Cities Readiness Initiative (155190) as follows:

**REVISION:** SECTION 4. TERM OF AGREEMENT

The period of this agreement is changed from January 1, 2014 through December 31, 2014 to October 1, 2013 through September 30, 2015.

**REVISION:** SECTION 5. SERVICES

Additional projects to be completed as detailed in attached Exhibit(s).

**REVISION:** SECTION 34.A.2

Insert: "The due date of the final fiscal report for Profile 155671 shall be sixty (60) days after the Grant Agreement Period ending date. Expenses incurred during the Grant Agreement period on Profile 155671, but reported later than sixty (60) days after the period ending date, will not be recognized, allowed or reimbursed under the terms of this Grant Agreement."

Adjustment will be made to the Community Aids Reporting System (CARS) based on the information in the table below.

Agency #	Agency Type	Profile #	Current Contract Level	Contract Change Amount	New Contract Level	Contract Period
47	530	155190	\$0	\$18234	\$18234	7/1/14-6/30/15
47	530	155671	\$0	\$7000	\$7000	7/1/14-6/29/15

All other terms and conditions of the original agreement remain unchanged.

\_\_\_\_\_  
GRANTEE's Authorized Representative  
Name:  
Title:

\_\_\_\_\_  
Date

\_\_\_\_\_  
GRANTOR's Authorized Representative  
Chuck J. Warzecha  
Administrator / Deputy Administrator, Division of Public Health  
Department of Health Services

\_\_\_\_\_  
Date

**Local Public Health Cities Readiness Initiative Contract Objectives  
July 1, 2014 – June 30, 2015**

**Cities Readiness Initiative (CRI)**

The following objectives and deliverables pertain only to the public health agencies in these counties; Kenosha, Milwaukee, Ozaukee, Pierce, Racine, St Croix, Washington and Waukesha.

**Objectives**

Continue to develop and implement medical countermeasure dispensing functions that should be part of a jurisdiction's all-hazards planning. The Jurisdictions plan should have the ability to be operationalized to support any large-scale public health event requiring a medical countermeasure response. As part of their response to public health emergencies, these jurisdictions must be able to provide medical countermeasures to 100% of their identified population within 48 hours after the federal decision to do so.

**Deliverables**

By May 1, 2015, complete three different drills from the Cities Readiness Initiative suite of 5 drills and enter the data into the DCARS, the CDC's online data collection system:

- Staff notification, acknowledgement, and assembly
- Site activation, acknowledgement, and assembly
- Facility set-up
- Pick list generation
- Dispensing throughput
- RealOpt modeling (as a substitute for dispensing throughput)

Please note this does not include completing the same drill three separate times. DPH will forward the URL and password for DCARS, the CDC online data collection system, when CDC releases it.

By May 1, 2015, complete all CDC Cities Readiness Initiative required assessments, technical assistance reviews, and metrics with either the CDC State Project Officer or the State SNS/CRI Coordinator.

By June 30, 2015, post to the PCA Portal the jurisdictions improvement plan from a mass dispensing exercise. For Jurisdictions that are part of the Milwaukee Cities Readiness Initiative, participate in the full-scale distribution and dispensing exercise, and post a jurisdictional improvement plan no later than 60 days from the end of the exercise. Participation can be opening a Point of Dispensing (POD), staffing a POD in another jurisdiction, being on the design team, being a controller or evaluator.