

**DIVISION OF PUBLIC HEALTH  
DPH CONTRACT 27502  
AMENDMENT #7**

The Department of Health Services, on behalf of the Division of Public Health and Wood County Health Department agree to amend their original agreement for the program(s) titled Preventive Health and Health Services (PPHS) (Profile 159220) as follows:

**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 159220 shall be sixty (60) days after the Grant Agreement Period ending date. Expenses incurred during the Grant Agreement period on Profile 159220, 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	Funding Period
71	630	159220	\$0	\$8178	\$8178	10/1/14-8/31/16

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

## Contract Objective Details - Intermediate

**Contract #:** 27502

**Agency:** Wood County Health Department

**Contract Year:** 2015

**Program:** Preventive Health and Health Services  
Block Grant

**Objective #:** 1 of 2

**Objective Value:** \$7,178

### Objective: Primary Details

#### Objective Statement (Template Objective)

Template Objective 11

Community Health Improvement Processes and Plans: By August 31, 2016 Wood County Health Department will complete a community health assessment or a community health improvement plan with measurable objectives.

**Deliverable Due Date:** 09/30/2016

#### Contract Deliverable (Evidence)

A report entered into an electronic data collection tool that briefly describes:

1. Evidenced-Based strategies implemented and outcomes measured.
2. Challenges or barriers to success.
3. Strategies to overcome barriers or challenges.
4. If Prevention funded activities were used to obtain additional funding, donations or in-kind contributions.

#### Programs Providing Funds for this Objective

Preventive Health and Health Services Block Grant: \$7,178

#### Agency Funds for this Objective:

#### Data Source for Measurement

Agency report to be entered into an electronic data collection tool to be provided by the WI Division of Public Health.

#### Baseline for Measurement

This will be the first time all the health system partners will be creating one comprehensive CHNA/CHIP. This is not the first CHNA/CHIP for the Wood County Health Department. Our current CHIP is dated 2013-2018, however all partners agreed on this collaborative model to meet hospital timeline requirements.

#### Input Activities

The CHNA/CHIP is an evidence-based process and numerous tools will be used to meet this objectives including Resource for Improving Community Health put together through the CHIPP Infrastructure Project  
<http://www.walhdab.org/?page=customsitemodels>.

## Contract Objective Details - Intermediate

**Contract #:** 27502

**Agency:** Wood County Health Department

**Contract Year:** 2015

**Program:** Preventive Health and Health Services  
Block Grant

**Objective #:** 1 of 2

**Objective Value:** \$7,178

### Objective: Risk Profile

**Percent of Objective Accomplished**

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	------

**Corresponding Percentage Recoupment**

--	--	--	--	--	--	--	--	--	--	--	--	--

**Corresponding Potential Recoupment Amounts**

--	--	--	--	--	--	--	--	--	--	--	--	--

**Definition of Percent Accomplished**

--

**Conditions of Eligibility for an Incentive**

--

## Contract Objective Details - Intermediate

**Contract #:** 27502

**Agency:** Wood County Health Department

**Contract Year:** 2015

**Program:** Preventive Health and Health Services  
Block Grant

**Objective #:** 2 of 2

**Objective Value:** \$1,000

### Objective: Primary Details

#### Objective Statement (Template Objective)

Template Objective 10

National Public Health Standards - Required: By August 31, 2016, Wood County Health Department will conduct one activity to meet or sustain National Public Health Performance Standards (i.e. pursue accreditation readiness) by conducting a formal review of the agency strategic plan to evaluate strategies that have been successfully met and develop additional strategies over a 1-2 year timeframe.

**Deliverable Due Date:** 09/30/2016

#### Contract Deliverable (Evidence)

A report entered into an electronic data collection tool that briefly describes:

1. Evidenced-based strategies implemented and outcomes measured.
2. Challenges or barriers to success.
3. Strategies to overcome barriers or challenges.
4. If Prevention funded activities were used to obtain additional funding, donations or in-kind contributions.

#### Programs Providing Funds for this Objective

Preventive Health and Health Services Block Grant: \$1,000

#### Agency Funds for this Objective:

#### Data Source for Measurement

Agency report to be entered into an electronic data collection tool to be provided by the WI Division of Public Health.

#### Baseline for Measurement

Our new strategic plan was launched in October 2015. Our current strategies have a 1-2 year horizon. We will review the plan to evaluate strategies that have been successfully met and develop additional strategies over a 1-2 year timeframe.

#### Input Activities

CDC requires Preventive Health and Health Services Block Grant funds to be used on evidence-based strategies, best practices or promising practices. Describe the strategies/practices to be used and identify the associated web links as available. Potential links to strategies for this objective can be found on the 2014-2016 Preventive Health and Health Services Block Grant Program Boundary Statement.

Agencies will conduct one of the following activities to prepare for voluntary accreditation:

- Develop an agency Strategic Plan.
- Develop an agency Performance Management Plan.
- Develop an agency Quality Improvement Plan.
- Conduct a Quality Improvement project.
- Develop a Workforce Development Plan.
- Develop processes, a database, and/or record-keeping systems to meet public health accreditation documentation standards.
- Completing an agency accreditation self-analysis against the PHAB standards, measures and required documentation that identifies the agency's strengths, opportunities for improvement and plans for addressing gaps.
- Develop, update, and/or revise agency policies and procedures.

(see next page)

## Contract Objective Details - Intermediate

**Contract #:** 27502

**Agency:** Wood County Health Department

**Contract Year:** 2015

**Program:** Preventive Health and Health Services  
Block Grant

**Objective #:** 2 of 2

**Objective Value:** \$1,000

(NOTE: If an agency wants to develop, update, and/or revise agency policies and procedures The Preventive Health and Health Services Grant Coordinator will be involved in the negotiations.)

Accredited agencies will conduct one of the following activities to sustain existing efforts:

- Implement goals, objectives, and/or strategies outlined in their Strategic Plan.
- Implement goals, objectives, and/or strategies outlined in their Performance Management Plan.
- Implement a Quality Improvement Plan.
- Implement the Workforce Development Plan.
- Develop, update, and/or revise agency policies and procedures.

(NOTE: If an agency wants to develop, update, and/or revise agency plans, policies and procedures The Preventive Health and Health Services Grant Coordinator will be involved in the negotiations.)

## Contract Objective Details - Intermediate

**Contract #:** 27502

**Agency:** Wood County Health Department

**Contract Year:** 2015

**Program:** Preventive Health and Health Services  
Block Grant

**Objective #:** 2 of 2

**Objective Value:** \$1,000

### Objective: Risk Profile

**Percent of Objective Accomplished**

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	------

**Corresponding Percentage Recoupment**

--	--	--	--	--	--	--	--	--	--	--	--	--

**Corresponding Potential Recoupment Amounts**

--	--	--	--	--	--	--	--	--	--	--	--	--

**Definition of Percent Accomplished**

--

**Conditions of Eligibility for an Incentive**

--