ENVIRONMENTAL TOXICOLOGY CONSULTING SERVICES

SECTION OF ENVIRONMENTAL EPIDEMIOLOGY AND TOXICOLOGY
OFFICE OF PUBLIC HEALTH

RFP # 305PUR-DHHRFP-TOXICOLOGY-OPH
Proposal Due Date/Time: April 14, 2014 4:00 pm CST

Release Date: March 3, 2014
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Glossary

Department or DHH: Department of Health and Hospitals

Must: Denotes a mandatory requirement

OPH: The Office of Public Health within DHH

Original: Denotes must be signed in ink

Redacted Proposal: The removal of confidential and/or proprietary information from one copy of the proposal for public records purposes.

SEET: The Section of Environmental Epidemiology and Toxicology within OPH

Shall: Denotes a mandatory requirement

Should, May, Can: Denote a preference, but not a mandatory requirement

Will: Denotes a mandatory requirement
I. GENERAL INFORMATION

A. Background

1. The mission of the Department of Health and Hospitals (DHH) is to protect and promote health and to ensure access to medical, preventive, and rehabilitative services for all citizens of the State of Louisiana. The Department of Health and Hospitals is dedicated to fulfilling its mission through direct provision of quality services, the development and stimulation of services of others, and the utilization of available resources in the most effective manner.

2. DHH is comprised of Medical Vendor Administration (Medicaid), Office for Citizens with Developmental Disabilities, Office of Behavioral Health, Office of Aging and Adult Services, and the Office of Public Health. Under the general supervision of the Secretary, these principal offices perform the primary functions and duties assigned to DHH.

3. DHH, in addition to encompassing the program offices, has an administrative office known as the Office of the Secretary, a financial office known as the Office of Management and Finance, and various bureaus and boards. The Office of the Secretary is responsible for establishing policy and administering operations, programs, and affairs.

4. Within the Office of Public Health (OPH) there are five Centers of Excellence: Center for Community Health, Center for Environmental Health Services, Center for Preventative Health, Center for Records and Statistics and the Center for Community Preparedness.

5. Since 1980, the Section of Environmental Epidemiology and Toxicology (SEET) under OPH's Center for Environmental Health Services has addressed morbidity and mortality associated with environmental chemicals. In recent years, there has been an increase in public awareness of the immediate and long-term health effects related to chemicals in the environment and, as a result, a greater demand for SEET to investigate these effects. SEET responds to these requests by:

- Identifying chemicals in the environment which are likely to cause adverse health effects;
- Evaluating the extent of human exposure to these chemicals and the resultant adverse health effects;
- Making recommendations for the prevention and reduction of exposure to hazardous chemicals; and
- Promoting a better public understanding of the health effects of chemicals in the environment.

As a public health program using an applied science approach, SEET investigates the health effects of chemical exposures in populations. It supports, collaborates, and participates in environmental health research. SEET is committed to reducing any known environmental threat to the public's health; it also provides information and data to the public to ensure better government policies and personal choices. Public health education efforts by SEET promote awareness of environmental health issues and are an integral part of its mission.
B. Purpose of RFP
1. The purpose of this RFP is to solicit proposals from qualified proposers to serve as a professional consultant and environmental toxicology advisor to DHH/OPH/SEET.

2. A contract is necessary to provide SEET staff with doctorate-level expertise in environmental and public health toxicology.

C. Invitation to Propose
DHH/OPH/SEET is inviting qualified proposers to submit proposals for services to provide professional environmental public health and toxicological consultation in accordance with the specifications and conditions set forth herein.

D. RFP Addenda
In the event it becomes necessary to revise any portion of the RFP for any reason, the Department shall post addenda, supplements, and/or amendments to all potential proposers known to have received the RFP. Additionally, all such supplements shall be posted at the following web address: http://wwwprd1.doa.louisiana.gov/OSP/LaPAC/pubMain.cfm
May also be posted at: http://new.dhh.louisiana.gov/index.cfm/newsroom/category/47

It is the responsibility of the proposer to check the DOA website for addenda to the RFP, if any.

II. ADMINISTRATIVE INFORMATION

A. RFP Coordinator
1. Requests for copies of the RFP and written questions or inquiries must be directed to the RFP coordinator listed below:

Mary Fuentes
Department of Health and Hospitals
Division of Contracts and Procurement Support
628 N 4th Street, 5th Floor
Baton Rouge, LA 70802
Email: Mary.Fuentes@LA.GOV
Fax: (225)342-9046

2. All communications relating to this RFP must be directed to the DHH RFP Coordinator person named above. All communications between Proposers and other DHH staff members concerning this RFP shall be strictly prohibited. Failure to comply with these requirements shall result in proposal disqualification.

3. This RFP is available in pdf at the following web links:
http://wwwprd1.doa.louisiana.gov/OSP/LaPAC/pubMain.cfm
http://new.dhh.louisiana.gov/index.cfm/newsroom/category/47
B. Proposer Inquiries
1. The Department will consider written inquiries regarding the requirements of the RFP or Scope of Services to be provided before the date specified in the Schedule of Events. To be considered, written inquiries and requests for clarification of the content of this RFP must be received at the above address or via the above fax number or email address by the date specified in the Schedule of Events. Any and all questions directed to the RFP coordinator will be deemed to require an official response and a copy of all questions and answers will be posted by the date specified in the Schedule of Events to the following web link: http://wwwprd1.doa.louisiana.gov/OSP/LaPAC/pubMain.cfm May also be posted at: http://new.dhh.louisiana.gov/index.cfm/newsroom/category/47

2. Action taken as a result of verbal discussion shall not be binding on the Department. Only written communication and clarification from the RFP Coordinator shall be considered binding.

C. Pre-Proposal Conference
Not required for this RFP

D. Schedule of Events
DHH reserves the right to deviate from this Schedule of Events

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III. SCOPE OF WORK

A. Project Overview
1. The contractor selected for this project will provide environmental toxicological consultation to SEET. SEET focuses on people and their environment, promotes human health and well-being, and fosters a safe and healthful environment. SEET is Louisiana’s state-wide public health program for hazardous chemicals and includes the following subprograms:
2. Health investigators take responsive action based on the best science and information to prevent and mitigate harmful exposures to chemicals and other related diseases. Staff study, identify and quantify exposures to environmental contaminants, conduct health risk assessments and issue risk communications; provide medical evaluation and surveillance for adverse health effects and provide health guidance on levels of exposure to contaminants.

3. There is considerable concern about the contribution of environmental hazards to the development of disease in Louisiana and resulting demand for accurate, accessible environmental health information. SEET responds to those concerns by:
   a. Providing information on indoor air quality contaminants (e.g. mold, formaldehyde, foreign drywall) through telephone consultations, environmental educational material development, and targeted outreach (e.g. air quality in schools)
   b. Addressing requests from the public, government agencies, and the state legislature (e.g. SCR 92-Livonia, HCR 188-Lafarge/Gert Town, HCR 185-foreign drywall) to investigate individual case reports of toxic exposures and conduct disease cluster investigations (e.g. cancer, respiratory, neurological, and reproductive diseases) and/or health studies (e.g. Mississippi Roach Killer, Mossville, Grand Bois)
   c. Evaluating data on hazardous substances (Comprehensive Environmental Response Compensation and Liability Act (CERCLA), non-CERCLA substances) at hazardous waste sites to determine the potential health effects (e.g. Post-Katrina evaluation of Superfund sites)
   d. Coordinating with federal and state counterparts to estimate risk of exposure to chemicals with health-based national standards and those without established national standards
   e. Evaluating contaminants in locally-caught seafood and, when warranted, issuing health advisories to warn the public and/or making recommendations to reduce exposures to contaminated seafood
   f. Evaluating the public health threat of emergency events involving hazardous chemicals and notifying regional staff, affected communities, hospitals, and physicians about the event and the chemicals involved
   g. Tracking environmentally-related reportable diseases- exposure to pesticides, mercury, lead, arsenic, cadmium, and carbon monoxide
   h. Tracking fatalities, injuries and exposures (e.g. lead, asbestos) among workers
   i. Tracking fatalities, injuries and exposures experienced by employees, first responders, and the public during emergency events (e.g. Benzene release near Baton Rouge, Hurricane Katrina/Rita)
   j. Developing and distributing evidence-based prevention messages for dissemination to at-risk populations, schools, healthcare providers, and communities
   k. Partnering with local, state and federal governments, non-profit and faith-based organizations to ensure that the public is informed about environmental health risks
4. The contractor will be responsible for the review and interpretation of the environmental and public health data and the preparation of responses to community or agency requests for assessment of environmental public health, toxicology, or risk assessment issues.°

B. Deliverables

1. Programmatic Requirements
   The contractor selected for this project will:
   a. Assist in developing and planning investigations and surveys which target reported health effects from toxic substances, evaluate the public health and environmental data generated from these investigations and surveys, and prepare recommendations for preventative measures to be taken.
   b. Review environmental data generated from monitoring activities and programs and prepare recommendations and reports within 30 days of receiving the data.
   c. Review cancer mortality and incidence data and other health outcome data from areas where environmental concerns are reported and prepare recommendations and reports within 30 days of receiving the data.
   d. Interpret data, respond to incidents, and prepare recommendations regarding pesticide exposure within 30 days of receiving the data.
   e. Attend selected public meetings for the presentation of public health data on environmental health issues.
   f. Review public health assessments prepared by SEET staff for environmental toxicology content and validity within 60 days of receiving the data.
   g. Prepare responses and/or recommendations to community or agency requests for assessment of environmental health, toxicology, or risk assessment issues within 30 days of receiving the request.
   h. Complete other tasks related to environmental public health assessment as assigned by the Environmental Health Scientist Managers or the SEET Section Chief.

2. Record Keeping Requirements
   The contractor shall submit detailed quarterly invoices that document tasks and time spent on each task. Surveys, consultations, reports, etc and all supporting data and other documentation should be maintained by the contractor for a minimum of 3 years beyond the end of the contract term.

3. Operations Requirements
   The contractor shall work with SEET staff on selected projects and be available to SEET during Governor-declared State of Emergency. The contractor selected for this project will be required to travel within the State for occasional meetings (approximately 12 per year), site visits (approximately 6 per year), and public presentations (approximately 6 per year).

4. Staffing Requirements/Qualifications
   a. The contractor shall possess a Doctorate (PhD) in Toxicology from an accredited college or university
   b. The contractor shall be a Diplomat of the American Board of Toxicology (DABT).
   c. The contractor should have at least 10 years of post-graduate work experience in the field of environmental public health.
   d. The contractor must be available to report in person to SEET’s New Orleans office (1450 Poydras, New Orleans, LA) or Baton Rouge Office (628 N. Fourth St., Baton Rouge, LA) to routinely meet with SEET staff, and within twenty-four hours upon request.
5. Reporting Requirements
The contractor selected for this project will meet with Environmental Health Scientist Managers and SEET Section Chief once each month to provide a status update on project(s).

C. Liquidated Damages
1. In the event the Contractor fails to meet the performance standards specified within the contract, the liquidated damages defined below may be assessed. If assessed, the liquidated damages will be used to reduce the Department’s payments to the Contractor or if the liquidated damages exceed amounts due from the Department, the Contractor will be required to make cash payments for the amount in excess. The Department may also delay the assessment of liquidated damages if it is in the best interest of the Department to do so. The Department may give notice to the Contractor of a failure to meet performance standards but delay the assessment of liquidated damages in order to give the Contractor an opportunity to remedy the deficiency; if the Contractor subsequently fails to remedy the deficiency to the satisfaction of the Department, DHH may reassert the assessment of liquidated damages, even following contract termination.
   a. Late submission of any required report - $50 per working day, per report.
   b. Failure to fill vacant contractually required key staff positions within 90 days - $500 per working day from 91st day of vacancy until filled with an employee approved by the Department.
   c. Failure to maintain all client files and perform all file updates according to the requirements in the contract, as evidenced in client files when reviewed during monitoring site visit - $100 per client.
   d. Late submission of invoices beginning 10 business days after the stated due date - $50 per working day per invoice.
   e. Failure to report to SEET’s office within twenty-four hours of receiving a request - $50 per day.

2. The decision to impose liquidated damages may include consideration of some or all of the following factors:
   a. The duration of the violation;
   b. Whether the violation (or one that is substantially similar) has previously occurred;
   c. The Contractor’s history of compliance;
   d. The severity of the violation and whether it imposes an immediate threat to the health or safety of the consumers;
   e. The “good faith” exercised by the Contractor in attempting to stay in compliance.

D. Fraud and Abuse
1. The Contractor shall have internal controls and policies and procedures in place that are designed to prevent, detect, and report known or suspected fraud and abuse activities.

2. Such policies and procedures must be in accordance with state and federal regulations. Contractor shall have adequate staffing and resources to investigate unusual incidents and develop and implement corrective action plans to assist the Contractor in preventing and detecting potential fraud and abuse activities.
E. Technical Requirements
The Contractor must maintain hardware and software compatible with current DHH requirements which are as follows:

- The contractor is responsible for procuring and maintaining hardware and software resources which are sufficient to successfully perform the services detailed in this RFP.
- The contractor should adhere to state and federal regulations and guidelines as well as industry standards and best practices for systems or functions required to support the requirements of this RFP.
- The contractor shall clearly identify any systems or portions of systems outlined in the proposal which are considered to be proprietary in nature.
- Unless explicitly stated to the contrary, the contractor is responsible for all expenses required to obtain access to DHH systems or resources which are relevant to successful completion of the requirements of this RFP. The contractor is also responsible for expenses required for DHH to obtain access to the Contractor’s systems or resources which are relevant to the successful completion of the requirements of this RFP. Such expenses are inclusive of hardware, software, network infrastructure and any licensing costs.
- Any confidential information must be encrypted to FIPS 140-2 standards when at rest or in transit.
- Contractor owned resources must be compliant with industry standard physical and procedural safeguards (NIST SP 800-114, NIST SP 800-66, NIST 800-53A, ISO 17788, etc.) for confidential information (HITECH, HIPAA part 164).
- Any contractor use of flash drives or external hard drives for storage of DHH data must first receive written approval from the Department and upon such approval shall adhere to FIPS 140-2 hardware level encryption standards.
- All contractor utilized computers and devices must:
  - Be protected by industry standard virus protection software which is automatically updated on a regular schedule.
  - Have installed all security patches which are relevant to the applicable operating system and any other system software.
  - Have encryption protection enabled at the Operating System level.

F. Subcontracting
The contractor shall not contract with any other party for furnishing any of the work and professional services required by the contract without the express prior written approval of the Department.

G. Insurance Requirements
Insurance shall be placed with insurers with an A.M. Best’s rating of no less than A-: VI. This rating requirement shall be waived for Workers’ Compensation coverage only.

1. Contractor’s Insurance
The Contractor shall not commence work under this contract until it has obtained all insurance required herein, including but not limited to Automobile Liability Insurance, Workers’ Compensation Insurance and General Liability Insurance. Certificates of Insurance, fully executed by officers of the Insurance Company shall be filed with the Department for approval. The Contractor shall not allow any subcontractor to commence work on subcontract until all similar insurance required for the subcontractor has been obtained and approved. If so requested, the Contractor shall also submit copies of insurance policies for inspection and approval of the Department before work is commenced. Said policies shall not be canceled, permitted to expire, or be changed without thirty (30) days’ written notice in advance to the Department and consented to by the Department in writing and the policies shall so provide.
2. **Workers’ Compensation Insurance**
   Before any work is commenced, the Contractor shall obtain and maintain during the life of the contract, Workers’ Compensation Insurance for all of the Contractor’s employees employed to provide services under the contract. In case any work is sublet, the Contractor shall require the subcontractor similarly to provide Workers’ Compensation Insurance for all the latter’s employees, unless such employees are covered by the protection afforded by the Contractor. In case any class of employees engaged in work under the contract at the site of the project is not protected under the Workers’ Compensation Statute, the Contractor shall provide for any such employees, and shall further provide or cause any and all subcontractors to provide Employer’s Liability Insurance for the protection of such employees not protected by the Workers’ Compensation Statute.

3. **Commercial General Liability Insurance**
   The Contractor shall maintain during the life of the contract such Commercial General Liability Insurance which shall protect Contractor, the Department, and any subcontractor during the performance of work covered by the contract from claims or damages for personal injury, including accidental death, as well as for claims for property damages, which may arise from operations under the contract, whether such operations be by the Contractor or by a subcontractor, or by anyone directly or indirectly employed by either of them, or in such a manner as to impose liability to the Department. Such insurance shall name the Department as additional insured for claims arising from or as the result of the operations of the Contractor or its subcontractors. In the absence of specific regulations, the amount of coverage shall be as follows: Commercial General Liability Insurance, including bodily injury, property damage and contractual liability, with combined single limits of $1,000,000.

4. **Insurance Covering Special Hazards**
   Special hazards as determined by the Department shall be covered by rider or riders in the Commercial General Liability Insurance Policy or policies herein elsewhere required to be furnished by the Contractor, or by separate policies of insurance in the amounts as defined in any Special Conditions of the contract included therewith.

5. **Licensed and Non-Licensed Motor Vehicles**
   The Contractor shall maintain during the life of the contract, Automobile Liability Insurance in an amount not less than combined single limits of $1,000,000 per occurrence for bodily injury/property damage. Such insurance shall cover the use of any non-licensed motor vehicles engaged in operations within the terms of the contract on the site of the work to be performed thereunder, unless such coverage is included in insurance elsewhere specified.

H. **Resources Available to Contractor**
   OPH/SEET will provide a contract monitor who will be responsible for primary oversight of the contract. This individual will schedule meetings to discuss progress of activities and problems identified.

I. **Contract Monitor**
   All work performed by the contractor will be monitored by the contract monitor or designee:
   **Dianne Dugas**
   Department of Health and Hospitals
   Office of Public Health
   Section of Environmental Epidemiology and Toxicology
   1450 Poydras Street, Suite 1640, New Orleans, LA 70112
J. Term of Contract
   The contract shall commence on or near the date approximated in the Schedule of Events. The term of this contract is for the period 3 years. With all proper approvals and concurrence with the successful contractor, agency may also exercise an option to extend for up to twenty-four (24) additional months at the same rates, terms and conditions of the initial contract term. Subsequent to the extension of the contract beyond the initial 36 month term, prior approval by the Joint Legislative Committee on the Budget (JLCB) or other approval authorized by law shall be obtained. Such written evidence of JLCB approval shall be submitted, along with the contract amendment to the Office of Contractual Review (OCR) to extend contract terms beyond the initial 3 year term. No contract/amendment shall be valid, nor shall the state be bound by the contract/amendment, until it has first been executed by the head of the using agency, or his designee, the contractor and has been approved in writing by the director of the Office of Contractual Review. Total contract term, with extensions, shall not exceed five (5) years.

   The continuation of this contract is contingent upon the appropriation of funds by the legislature to fulfill the requirements of the contract.

K. Payment Terms
   The contractor shall submit deliverables in accordance with established timelines and shall submit itemized invoices quarterly or as defined in the contract terms. Payment of invoices is subject to approval of the Contract Monitor Dianne Dugas or approval of designated authority. Payment shall be at an hourly rate. Travel and all other expenses will be included in the hourly rate. Continuation of payment is dependent upon available funding.

IV. PROPOSALS

A. General Information
   This section outlines the provisions which govern determination of compliance of each proposer’s response to the RFP. The Department shall determine, at its sole discretion, whether or not the requirements have been reasonably met. Omissions of required information shall be grounds for rejection of the proposal by the Department.

B. Contact After Solicitation Deadline
   After the date for receipt of proposals, no proposer-initiated contact relative to the solicitation will be allowed between the proposers and DHH until an award is made.

C. Code of Ethics
   Proposers are responsible for determining that there will be no conflict or violation of the Ethics Code if their company is awarded the contract. The Louisiana Board of Ethics is the only entity which can officially rule on ethics issues. Notwithstanding, any potential conflict of interest that is known or should reasonably be known by a proposer as it relates to the RFP shall be immediately reported to the Department by proposer.

D. Rejection and Cancellation
   Issuance of this solicitation does not constitute a commitment by DHH to award a contract or contracts or to enter into a contract after an award has been made. The Department reserves the right to take any of the following actions that it determines to be in its best interest:

   1. Reject all proposals received in response to this solicitation;
   2. Cancel this RFP; or
3. Cancel or decline to enter into a contract with the successful proposer at any time after the award is made and before the contract receives final approval from the Division of Administration, Office of Contractual Review.

In accordance with the provisions of R.S. 39:2192, in awarding contracts after August 15, 2010, any public entity is authorized to reject a proposal or bid from, or not award the contract to, a business in which any individual with an ownership interest of five percent or more, has been convicted of, or has entered a plea of guilty or nolo contendere to any state felony or equivalent federal felony crime committed in the solicitation or execution of a contract or bid awarded under the following provisions of the Louisiana Revised Statutes of 1950 governing public contracts: Title 38, Chapter 10 (public contracts); Title 39, Chapter 16 (professional, personal, consulting, and social services procurement); or Title 39, Chapter 17 (Louisiana Procurement Code).

E. Award without Discussion
The Secretary of DHH reserves the right to make an award without presentations by proposers or further discussion of proposals received.

F. Assignments
Any assignment, pledge, joint venture, hypothecation of right or responsibility to any person, firm or corporation should be fully explained and detailed in the proposal. Information as to the experience and qualifications of proposed subcontractors or joint ventures should be included in the proposal. In addition, written commitments from any subcontractors or joint ventures should be included as part of the proposal. All assignments must be approved of by the Department.

G. Determination of Responsibility
Determination of the proposer’s responsibility relating to this RFP shall be made according to the standards set forth in LAC 34: 136. The State must find that the selected proposer:
1. Has adequate financial resources for performance, or has the ability to obtain such resources as required during performance;
2. Has the necessary experience, organization, technical qualifications, skills, and facilities, or has the ability to obtain them;
3. Is able to comply with the proposed or required time of delivery or performance schedule;
   Has a satisfactory record of integrity, judgment, and performance; and
4. Is otherwise qualified and eligible to receive an award under applicable laws and regulations.
5. Proposers should ensure that their proposals contain sufficient information for the State to make its determination by presenting acceptable evidence of the above to perform the contracted services.

H. Proposal and Contract Preparation Costs
The proposer assumes sole responsibility for any and all costs and incidental expenses associated with the preparation and reproduction of any proposal submitted in response to this RFP. The proposer to which the contract is awarded assumes sole responsibility for any and all costs and incidental expenses that it may incur in connection with: (1) the preparation, drafting or negotiation of the final contract; or (2) any activities that the proposer may undertake in preparation for, or in anticipation or expectation of, the performance of its work under the contract before the contract receives final approval from the Division of Administration, Office of Contractual Review. The proposer shall not include these costs or any portion thereof in the proposed contract cost. The proposer is fully responsible for all preparation costs associated therewith even if an award is made but subsequently terminated by the Department.
I. **Errors and Omissions**
The Department reserves the right to make corrections due to minor errors of proposer identified in proposals by the Department or the proposer. The Department, at its option, has the right to request clarification or additional information from proposer.

J. **Ownership of Proposal**
All proposals become the property of the Department and will not be returned to the proposer. The Department retains the right to use any and all ideas or adaptations of ideas contained in any proposal received in response to this solicitation. Selection or rejection of the offer will not affect this right. Once a contract is awarded, all proposals will become subject to the Louisiana Public Records Act.

K. **Procurement Library/Resources Available To Proposer**
Relevant material related to this RFP will be posted at the following web address:
http://dhh.louisiana.gov/index.cfm/page/558/n/284

L. **Proposal Submission**
1. All proposals must be received by the due date and time indicated on the Schedule of Events. Proposals received after the due date and time will not be considered. It is the sole responsibility of each proposer to assure that its proposal is delivered at the specified location prior to the deadline. Proposals which, for any reason, are not so delivered will not be considered.

2. Proposer **shall** submit one (1) original hard copy (*The Certification Statement must have original signature signed in ink*) and should submit one (1) electronic copy (cd or flash drive) of the entire proposal and six (6) hard copies of the proposal. Proposer may provide one electronic copy of the Redacted (cd or flash drive). No facsimile or emailed proposals will be accepted. The cost proposal and financial statements shall be submitted separately from the technical proposal; however, for mailing purposes, all packages may be shipped in one container.

3. Proposals must be submitted via U.S. mail, courier or hand delivered to:
   **If courier mail or hand delivered:**
   Mary Fuentes  
   Department of Health and Hospitals  
   Division of Contracts and Procurement Support  
   628 N 4th Street, 5th Floor  
   Baton Rouge, LA 70802

   **If delivered via US Mail:**
   Mary Fuentes  
   Department of Health and Hospitals  
   Division of Contracts and Procurement Support  
   P.O. Box 1526  
   Baton Rouge, LA 70821-1526

M. **Proprietary and/or Confidential Information**
Pursuant to the Louisiana Public Records Act (La. R.S. 44:1 et. seq.), all public proceedings, records, contracts, and other public documents relating to this RFP shall be open to public inspection. Proposers should refer to the Louisiana Public Records Act for further clarification, including protections sought for proprietary and/or trade secret information. Proposers are reminded that cost proposals will not be considered confidential under any circumstance and
that protections for technical proposals must be claimed by the proposer at the time of submission of its technical proposal.

N. Proposal Format
1. An item-by-item response to the Request for Proposals is requested.

2. There is no intent to limit the content of the proposals, and proposers may include any additional information deemed pertinent. Emphasis should be on simple, straightforward and concise statements of the proposer's ability to satisfy the requirements of the RFP.

O. Requested Proposal Outline:
- Introduction/Administrative Data
- Work Plan/Project Execution
- Personnel Qualifications
- Additional Information
- Financial Condition
- Cost and Pricing Analysis

P. Proposal Content

1. **Timeliness**
Proposals should include information that will assist the Department in determining the level of quality and timeliness that may be expected. The Department shall determine, at its sole discretion, whether or not the RFP provisions have been reasonably met. The proposal should describe the background and capabilities of the proposer, give details on how the services will be provided, and shall include a breakdown of proposed costs. Work samples may be included as part of the proposal.

2. **Assume Complete Responsibility**
Proposals should address how the proposer intends to assume complete responsibility for timely performance of all contractual responsibilities in accordance with federal and state laws, regulations, policies, and procedures.

3. **Approach**
Proposals should define proposer’s functional approach in providing services and identify the tasks necessary to meet the RFP requirements of the provision of services, as outlined in Section II.

4. **Introduction/Administrative Data**
   a. The introductory section should contain summary information about the proposer's organization, if applicable. This section should state proposer's knowledge and understanding of the needs and objectives of DHH/OPH/SEET as related to the scope of this RFP. It should further cite its ability to satisfy provisions of the Request for Proposal.
   b. This introductory section should include a description of how the proposer's organizational components communicate and work together in both an administrative and functional capacity from the top down. This section should contain a brief summary setting out the proposer's management philosophy including, but not limited to, the role of Quality Control, Professional Practices, Supervision, Distribution of Work and Communication Systems. This section should include an organizational chart displaying the proposer's overall structure.
   c. This section should also include the following information:
i. Location of Active Office with Full Time Personnel, include all office locations (address) with full time personnel;
ii. Name and address of principal officer, if proposer is a company or corporation;
iii. Name and address for purpose of issuing checks and/or drafts;
iv. For corporations, a statement listing name(s) and address(es) of principal owners who hold five percent interest or more in the corporation;
v. If out-of-state proposer, give name and address of local representative; if none, so state;
vi. If any of the proposer’s personnel named is a current or former Louisiana state employee, indicate the Agency where employed, position, title, termination date, and social security number;
vii. If the proposer was engaged by DHH within the past twenty-four (24) months, indicate the contract number and/or any other information available to identify the engagement; if not, so state; and
viii. Proposer's state and federal tax identification numbers.
ix. Veteran/Hudson Initiative: Proposer should demonstrate participation in Veteran Initiative and Hudson Initiative Small Entrepreneurships or explanation if not applicable. (See Attachment I)

d. The following information must be included in the proposal:
i. Certification Statement: The proposer must sign and submit the attached Certification Statement (See Attachment I).

5. Work Plan/Project Execution
The proposer should articulate an understanding of, and ability to effectively implement services as outlined within Section II of the RFP. In this section the proposer should state the approach it intends to use in achieving each objective of the project as outlined, including a project work plan and schedule for implementation. In particular, the proposer should:

a. Provide a written explanation of the organizational structures of both operations and program administration, and how those structures will support service implementation. Individual components should include plans for supervision, training, technical assistance, as well as collaboration as appropriate.

b. Provide a strategic overview including all elements to be provided.

c. Demonstrate an ability to hire staff with the necessary experience and skill set that will enable them to effectively meet the needs of consumers served.

d. Demonstrate an understanding of, and ability to implement, the various types of organizational strategies to be integrated within the day to day operations, which are critical in organizing their functioning and maximizing productivity.

e. Demonstrate knowledge of services to be provided and effective strategies to achieve objectives and effective service delivery.

f. Describe approach and strategy for project oversight and management.

g. Articulate the need for, and the ability to implement, a plan for continuous quality improvement; this includes (but is not limited to) reviewing the quality of services provided and staff productivity.

h. Demonstrate an understanding of and ability to implement data collection as needed.
i. Explain processes that will be implemented in order to complete all tasks and phases of the project in a timely manner, as outlined within Section II.

j. Articulate the ability to develop and implement an All Hazards Response plan in the event of an emergency event.

k. Refer to specific documents and reports that can be produced as a result of completing tasks, to achieve the requested deliverables.

l. Identify all assumptions or constraints on tasks.

m. Discuss what flexibility exists within the work plan to address unanticipated problems which might develop during the contract period.

n. If the proposer intends to subcontract for portions of the work, include specific designations of the tasks to be performed by the subcontractor.

o. Document procedures to protect the confidentiality of records in DHH databases, including records in databases that may be transmitted electronically via e-mail or the Internet.

6. **Relevant Corporate Experience**
   a. The proposal should indicate the proposer's firm has a record of prior successful experience in the implementation of the services sought through this RFP. Proposers should include statements specifying the extent of responsibility on prior projects and a description of the projects scope and similarity to the projects outlined in this RFP. All experience under this section should be in sufficient detail to allow an adequate evaluation by the Department. The proposer should have, within the last 24 months implemented a similar type project. Proposers should give at least two customer references for projects implemented in at least the last 24 months. References shall include the name, email address and telephone number of each contact person.

b. In this section, a statement of the proposer's involvement in litigation that could affect this work should be included. If no such litigation exists, proposer should so state.

7. **Personnel Qualifications**
   a. The purpose of this section is to evaluate the relevant experience, resources, and qualifications of the proposed staff to be assigned to this project. The experience of proposer's personnel in implementing similar services to those to be provided under this RFP will be evaluated. The adequacy of personnel for the proposed project team will be evaluated on the basis of project tasks assigned, allocation of staff, professional skill mix, and level of involvement of personnel.

b. Proposers should state job responsibilities, workload and lines of supervision. An organizational chart identifying individuals and their job titles and major job duties should be included. The organizational chart should show lines of responsibility and authority.

c. Job descriptions, including the percentage of time allocated to the project and the number of personnel should be included and should indicate minimum education, training, experience, special skills and other qualifications for each staff position as well as specific job duties identified in the proposal. Job descriptions should indicate if the position will be filled by a sub-contractor.
d. Key personnel and the percentage of time directly assigned to the project should be identified.

e. Résumés of all known personnel should be included. Resumes of proposed personnel should include, but not be limited to:
   - Experience with proposer,
   - Previous experience in projects of similar scope and size.
   - Educational background, certifications, licenses, special skills, etc.

8. **Additional Information**
   As an appendix to its proposal, if available, proposers should provide copies of any policies and procedures manuals applicable to this contract, inclusive of organizational standards or ethical standards. This appendix should also include a copy of proposer's All Hazards Response Plan, if available.

9. **Financial Condition**
   a. The proposer’s financial solvency will be evaluated. The proposer’s ability to demonstrate adequate financial resources for performance of the contract or the ability to obtain such resources as required during performance under this contract will be considered.

   b. Proposal shall include for each of the last three (3) years, copies of financial statements, preferably audited, including at least a balance sheet and profit and loss statement, or other appropriate documentation which would demonstrate to the Department the proposer's financial resources sufficient to conduct the project.

10. **Cost and Pricing Analysis**
   a. Proposer shall specify costs for performance of tasks. Proposal shall include all anticipated costs of successful implementation of all deliverables outlined. An item by item breakdown of costs shall be included in the proposal.

   b. Proposers shall submit the breakdown in a similar format to the attached cost template form (See Attachment V) for each year of the contract to demonstrate how cost was determined.

   c. Proposer shall submit an hourly rate for environmental public health consultant services to include all anticipated costs of successful implementation of all deliverables outlined. The hourly rate for each year of the contract will be multiplied by 400 hours per year to determine the total proposal cost.

Q. **Independent Assurances**
   1. The State of Louisiana Department of Health and Hospitals Office of Public Health will also require the Contractor and/or subcontractors, if performing a key internal control, to submit to an independent SSAE 16 SOC 1 and/or type II audit of its internal controls and other financial and performance audits from outside companies to assure both the financial viability of the (outsourced) program and the operational viability, including the policies and procedures placed into operation. The audit firm will conduct tests and render an independent opinion on the operating effectiveness of the controls and procedures. When required by the state the contractor shall be required to provide a quality control plan, such as third party Quality Assurance (QA), Independent Verification and Validation (IV &V), and other internal project/program reviews and audits.
2. These audits will require the Contractor to provide any assistance, records access, information system access, staff access, and space access to the party selected to perform the independent audit. The audit firm will submit to the State Agency and/or Contractor a final report on controls placed in operations for the project and includes a detailed description of the audit firm’s tests of the operating effectiveness of controls.

3. The Contractor shall supply the Department with an exact copy of the report within thirty (30) calendar days of completion. When required by Office of Public Health, such audits may be performed annually during the term of the contract. The Contractor shall agree to implement recommendations as suggested by the audits within three months of report issuance at no cost to the State. If cost of the audit is to be borne by the Contractor, it was included in the response to the RFP.

V. EVALUATION AND SELECTION

A. Evaluation Criteria
The following criteria will be used to evaluate proposals:
1. Evaluations will be conducted by a Proposal Review Committee.

2. Evaluations of the financial statements will be conducted by a member of the DHH Office of the Secretary Division of Fiscal Management

3. Scoring will be based on a possible total of 100 points and the proposal with the highest total score will be recommended for award.

4. Cost Evaluation:
   a. The proposer with the lowest total cost for all three years and shall receive 25 points. Other proposers shall receive points for cost based upon the following formula:

   \[
   CPS = \left( \frac{LPC}{PC} \right) \times 25
   \]

   \[ \text{CPS} = \text{Cost Proposal Score} \]
   \[ \text{LPC} = \text{Lowest Proposal Cost of all proposers} \]
   \[ \text{PC} = \text{Individual Proposal Cost} \]

   b. The assignment of the 25 points based on the above formula will be calculated by a member of the DHH Contracts Office staff.

5. Evaluation Criteria and Assigned Weights:

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<thead>
<tr>
<th>Evaluation Criteria</th>
<th>Assigned Weight</th>
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<tbody>
<tr>
<td>Introduction/Understanding of RFP</td>
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<tr>
<td>Work Plan/Project Execution</td>
<td>25</td>
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<tr>
<td>Personnel Qualification</td>
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<td>Financial Condition</td>
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<tr>
<td>Cost</td>
<td>25</td>
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<tr>
<td>Veteran and Hudson Initiatives</td>
<td>10</td>
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<tr>
<td>Total</td>
<td>100</td>
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B. On Site Presentation/Demonstration
Not required for this RFP
C. Evaluation Team
The evaluation of proposals will be accomplished by an evaluation team, to be designated by the Department, which will determine the proposal most advantageous to the Department, taking into consideration cost and the other evaluation factors set forth in the RFP.

D. Administrative and Mandatory Screening
All proposals will be reviewed to determine compliance with administrative and mandatory requirements as specified in the RFP. Proposals that are not in compliance will be excluded from further consideration.

E. Clarification of Proposals
The Department reserves the right to seek clarification of any proposal for the purpose of identifying and eliminating minor irregularities or informalities, including resolving inadequate proposal content, or contradictory statements in a proposer's proposal.

F. Announcement of Award
Subject to the provisions of Paragraph IV.D above, the Department will award the contract to the proposer with the highest graded proposal and deemed to be in the best interest of the Department. All proposers will be notified of the contract award. The Department will notify the successful proposer and proceed to negotiate contract terms. Mandatory requirements established by the Department and/or the Evaluation Team are not subject to negotiation.

VI. CONTRACTUAL INFORMATION

A. The contract between DHH and the Contractor shall include the standard DHH contract form (CF-1/Attachment II) including a negotiated scope of work, the RFP its amendments and addenda, and the Contractor's proposal. The attached CF-1 contains basic information and general terms and conditions of the contract to be awarded.

B. Mutual Obligations and Responsibilities: The state requires that the mutual obligations and responsibilities of DHH and the successful proposer be recorded in a written contract. While final wording will be resolved at contract time, the intent of the provisions will not be altered and will include all provisions as specified in the attached CF-1.

C. Retainage
The Department shall secure a retainage of 10% from all billings under the contract as surety for performance. On successful completion of contract deliverables, the retainage amount may be released on an annual basis. Within ninety (90) days of the termination of the contract, if the contractor has performed the contract services to the satisfaction of the Department and all invoices appear to be correct, the Department shall release all retained amounts to the contractor.

D. In addition, to terms of the CF-1 and supplements, the following will be incorporated into the contract awarded through this RFP:
1. Personnel Assignments: The Contractor’s key personnel assigned to this contract may not be replaced without the written consent of the Department. Such consent shall not be unreasonably withheld or delayed provided an equally qualified replacement is offered. Key personnel for these purposes will be determined during contract negotiation.

2. Force Majeure: The contractor and the Department are excused from performance under contract for any period they may be prevented from performance by an Act of God, strike, war, civil disturbance, epidemic or court order.
3. Order of Precedence: The contract shall, to the extent possible, be construed to give effect to all provisions contained therein; however, where provisions conflict, the intent of the parties shall be determined by giving first priority to provisions of the contract excluding the RFP and the proposal; second priority to the provisions of the RFP and its amendments and addenda; and third priority to the provisions of the proposal.

4. Entire Agreement: This contract, together with the RFP and its amendments and addenda issued thereto by the Department, the proposal submitted by the contractor in response to the Department's RFP, and any exhibits specifically incorporated herein by reference constitute the entire agreement between the parties with respect to the subject matter.

5. Board Resolution/Signature Authority: The contractor, if a corporation, shall secure and attach to the contract a formal Board Resolution indicating the signatory to the contract is a corporate representative and authorized to sign said contract.

6. Warranty to Comply with State and Federal Regulations: The contractor shall warrant that it shall comply with all state and federal regulations as they exist at the time of the contract or as subsequently amended.

7. Warranty of Removal of Conflict of Interest: The contractor shall warrant that it, its officers, and employees have no interest and shall not acquire any interest, direct or indirect, which conflicts in any manner or degree with the performance of services hereunder. The contractor shall periodically inquire of its officers and employees concerning such conflicts, and shall inform the Department promptly of any potential conflict. The contractor shall warrant that it shall remove any conflict of interest prior to signing the contract.

8. If the contractor is a corporation, the following requirements must be met prior to execution of the contract:
   a. If a for-profit corporation whose stock is not publicly traded-the contractor must file a Disclosure of Ownership form with the Louisiana Secretary of State.
   b. If the contractor is a corporation not incorporated under the laws of the State of Louisiana-the contractor must obtain a Certificate of Authority pursuant to R.S. 12:301-302 from the Louisiana Secretary of State.
   c. The contractor must provide written assurance to the Department from contractor's legal counsel that the contractor is not prohibited by its articles of incorporation, bylaws or the laws under which it is incorporated from performing the services required under the contract.

Attachments:
I. Veteran and Hudson Initiatives
II. Certification Statement
III. DHH Standard Contract Form (CF-1)
IV. HIPAA BAA
V. Cost Template
VI. Section of Environmental Epidemiology and Toxicology Program Information
Veteran-Owned And Service-Connected Small Entrepreneurships (Veteran Initiatives) And Louisiana Imitative For Small Entrepreneurships (Hudson Initiative) Programs

Participation of Veteran Initiative and Hudson Initiative small entrepreneurships will be scored as part of the technical evaluation.

The State of Louisiana Veteran and Hudson Initiatives are designed to provide additional opportunities for Louisiana-based small entrepreneurships (sometimes referred to as LaVet’s and SE’s respectively) to participate in contracting and procurement with the state. A certified Veteran-Owned and Service-Connected Disabled Veteran-Owned small entrepreneurship (LaVet) and a Louisiana Initiative for Small Entrepreneurships (Hudson Initiative) small entrepreneurship are businesses that have been certified by the Louisiana Department of Economic Development. All eligible vendors are encouraged to become certified. Qualification requirements and online certification are available at https://smallbiz.louisianaforward.com/index_2.asp.

Ten percent (10%) of the total evaluation points on this RFP are reserved for proposers who are themselves a certified Veteran or Hudson Initiative small entrepreneurship or who will engage the participation of one or more certified Veteran or Hudson Initiatives small entrepreneurships as subcontractors.

Reserved points shall be added to the applicable proposers’ evaluation score as follows:

**Proposer Status and Reserved Points**

- Proposer is a certified small entrepreneurship: Full amount of the reserved points
- Proposer is not a certified small entrepreneurship but has engaged one or more certified small entrepreneurships to participate as subcontractors or distributors. Points will be allocated based on the following criteria:
  - the number of certified small entrepreneurships to be utilized
  - the experience and qualifications of the certified small entrepreneurship(s)
  - the anticipated earnings to accrue to the certified small entrepreneurship(s)

If a proposer is not a certified small entrepreneurship as described herein, but plans to use certified small entrepreneurship(s), proposer shall include in their proposal the names of their certified Veteran Initiative or Hudson Initiative small entrepreneurship subcontractor(s), a description of the work each will perform, and the dollar value of each subcontract.

During the term of the contract and at expiration, the Contractor will also be required to report Veteran-Owned and Service-Connected Disabled Veteran-Owned and Hudson Initiative small entrepreneurship subcontractor or distributor participation and the dollar amount of each.


A current list of certified Veteran-Owned and Service-Connected Disabled Veteran-Owned and Hudson Initiative small entrepreneurships may be obtained from the Louisiana Economic Development Certification System at https://smallbiz.louisianaforward.com/index_2.asp. Additionally, a list of Hudson and Veteran Initiative small entrepreneurships, which have been certified by the Louisiana Department of Economic Development and who have opted to register in the State of Louisiana LaGov Supplier Portal https://lagoverpvendor.doa.louisiana.gov/irj/portal/anonymous?guest_user=self_reg may be accessed from the State of Louisiana Procurement and Contract (LaPAC) Network http://wwwprd1.doa.louisiana.gov/osp/lapac/vendor/srchven.cfm. When using this site, determine the search criteria (i.e. alphabetized list of all certified vendors, by commodities, etc.) and select SmallE, VSE, or DVSE.

REV 12/1/22
CERTIFICATION STATEMENT

The undersigned hereby acknowledges she/he has read and understands all requirements and specifications of the Request for Proposals (RFP), including attachments.

OFFICIAL CONTACT: The State requests that the Proposer designate one person to receive all documents and the method in which the documents are best delivered. Identify the Contact name and fill in the information below: (Print Clearly)

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<th>Date</th>
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<td>Official Contact Name</td>
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<td>Fax Number with Area Code</td>
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<td>Telephone Number</td>
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<td>Street Address</td>
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<td>City, State, and Zip</td>
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Proposer certifies that the above information is true and grants permission to the Department to contact the above named person or otherwise verify the information I have provided.

By its submission of this proposal and authorized signature below, proposer certifies that:
1. The information contained in its response to this RFP is accurate;
2. Proposer complies with each of the mandatory requirements listed in the RFP and will meet or exceed the functional and technical requirements specified therein;
3. Proposer accepts the procedures, evaluation criteria, mandatory contract terms and conditions, and all other administrative requirements set forth in this RFP.
4. Proposer’s technical and cost proposals are valid for at least 90 days from the date of proposer’s signature below;
5. Proposer understands that if selected as the successful Proposer, he/she will have _14_ calendar days from the date of delivery of initial contract in which to complete contract negotiations, if any, and execute the final contract document. The Department has the option to waive this deadline if actions or inactions by the Department cause the delay.
6. Proposer certifies, by signing and submitting a proposal for $25,000 or more, that their company, any subcontractors, or principals are not suspended or debarred by the General Services Administration (GSA) in accordance with the requirements in OMB Circular A-133. (A list of parties who have been suspended or debarred can be viewed via the internet at https://www.sam.gov).

Authorized Signature:

Original Signature Only: Electronic or Photocopy Signature will not be accepted.

Print Name:

Title:
Attachment III

CONTRACT BETWEEN STATE OF LOUISIANA
DEPARTMENT OF HEALTH AND HOSPITALS

AND

FOR

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<tbody>
<tr>
<td>1) Contractor (Legal Name if Corporation)</td>
<td>2) Street Address</td>
<td>3) Telephone Number</td>
<td>4) Mailing Address (if different)</td>
<td>5) Federal Employer Tax ID# or Social Security # (11 digits)</td>
<td>6) Parish(es) Served</td>
<td>7) License or Certification #</td>
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<td>8) Contractor Status</td>
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City and State Zip Code

9) **Brief Description Of Services To Be Provided:**
Include description of work to be performed and objectives to be met; description of reports or other deliverables and dates to be received (when applicable). In a consulting service, a resume of key contract personnel performing duties under the terms of the contract and amount of effort each will provide under terms of contract should be attached.

10) **Effective Date**

11) **Termination Date**

12) This contract may be terminated by either party upon giving thirty (30) days advance written notice to the other party with or without cause but in no case shall continue beyond the specified termination date.

13) **Maximum Contract Amount**

14) **Terms of Payment**
If progress and/or completion of services are provided to the satisfaction of the initiating Office/Facility, payments are to be made as follows: (stipulate rate or standard of payment, billing intervals, invoicing provisions, etc.). Contractor obligated to submit final invoices to Agency within fifteen (15) days after termination of contract.

**PAYMENT WILL BE MADE ONLY UPON APPROVAL OF:**

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</table>

15) **Special or Additional Provisions which are incorporated herein, if any (IF NECESSARY, ATTACH SEPARATE SHEET AND REFERENCE):**
During the performance of this agreement, the Contractor hereby agrees to the following terms and conditions:

1. Contractor hereby agrees to adhere as applicable to the mandates dictated by Titles VI and VII of the Civil Rights Act of 1964, as amended; the Vietnam Era Veterans' Readjustment Assistance Act of 1974; Americans with Disabilities Act of 1990 as amended; the Rehabilitation Act of 1973 as amended; Sec. 202 of Executive Order 11246 as amended, and all applicable requirements imposed by or pursuant to the regulations of the U. S. Department of Health and Human Services. Contractor agrees not to discriminate in the rendering of services to and/or employment of individuals because of race, color, religion, sex, age, national origin, handicap, political beliefs, disabled veteran, veteran status, or any other non-merit factor.

2. Contractor shall abide by the laws and regulations concerning confidentially which safeguard information and the patient/client confidentiality. Information obtained shall not be used in any manner except as necessary for the proper discharge of Contractor’s obligations. (The Contractor shall establish, subject to review and approval of the Department, confidentiality rules and facility access procedures.)

3. The State Legislative Auditor, Office of the Governor, Division of Administration, and Department Auditors or those designated by the Department shall have the option of auditing all accounts pertaining to this contract during the contract and for a three year period following final payment. Contractor grants to the State of Louisiana, through the Office of the Legislative Auditor, Division of Health and Hospitals, and Inspector General's Office, Federal Government and/or other such officially designated body the right to inspect and review all books and records pertaining to services rendered under this contract, and further agrees to guidelines for fiscal administration as may be promulgated by the Department. Records will be made available during normal working hours.

Contractor shall comply with federal and state laws and/or DHH Policy requiring an audit of the Contractor’s operation as a whole or of specific program activities. Audit reports shall be sent within thirty (30) days after the completion of the audit, but no later than six (6) months after the end of the audit period. If an audit is performed within the contract period, for any period, four (4) copies of the audit report shall be sent to the Department of Health and Hospitals, Attention: Division of Fiscal Management, P.O. Box 91117, Baton Rouge, LA 70821-3797 and one (1) copy of the audit shall be sent to the originating DHH Office.

4. Contractor agrees to retain all books, records and other documents relevant to the contract and funds expended thereunder for at least four (4) years after final payment or as prescribed in 45 CFR 74:53 (b) whichever is longer. Contractor shall make available to the Department such records within thirty (30) days of the Department's written request and shall deliver such records to the Department's central office in Baton Rouge, Louisiana, all without expense to the Department. Contractor shall allow the Department to inspect, audit or copy records at the contractor's site, without expense to the Department.

5. Contractor shall not assign any interest in this contract and shall not transfer any interest in the same (whether by assignment or novation), without written consent of the Department thereto, provided, however, that claims for money due or to become due to Contractor from the Department under this contract may be assigned to a bank, trust company or other financial institution without advanced approval. Notice of any such assignment or transfer shall be promptly furnished to the Department and the Division of Administration, Office of Contractual Review.

6. Contractor hereby agrees that the responsibility for payment of taxes from the funds received under this contract shall be Contractor's. The contractor assumes responsibility for its personnel providing services hereunder and shall make all deductions for withholding taxes, and contributions for unemployment compensation funds, and shall maintain, at Contractor’s expense, all necessary insurance for its employees, including but not limited to automobile insurance, workers’ compensation and general liability insurance.

7. Contractor shall obtain and maintain during the contract term all necessary insurance including automobile insurance, workers’ compensation insurance, and general liability insurance. The required insurances shall protect the Contractor, the Department of Health and Hospitals, and the State of Louisiana from all claims related to Contractor's performance of this contract. Certificates of Insurance shall be filed with the
Department for approval. Said policies shall not be canceled, permitted to expire, or be changed without thirty (30) days advance written notice to the Department. Commercial General Liability Insurance shall provide protection during the performance of work covered by the contract from claims or damages for personal injury, including accidental death, as well as claims for property damages, with combined single limits prescribed by the Department.

8. In cases where travel and related expenses are required to be identified separate from the fee for services, such costs shall be in accordance with State Travel Regulations. The contract contains a maximum compensation which shall be inclusive of all charges including fees and travel expenses.

9. No funds provided herein shall be used to urge any elector to vote for or against any candidate or proposition on an election ballot nor shall such funds be used to lobby for or against any proposition or matter having the effect of law being considered by the legislature or any local governing authority. This provision shall not prevent the normal dissemination of factual information relative to a proposition or any election ballot or a proposition or matter having the effect of law being considered by the legislature or any local governing authority. Contracts with individuals shall be exempt from this provision.

10. Should contractor become an employee of the classified or unclassified service of the State of Louisiana during the effective period of the contract, Contractor must notify his/her appointing authority of any existing contract with State of Louisiana and notify the contracting office of any additional state employment. This is applicable only to contracts with individuals.

11. All non-third party software and source code, records, reports, documents and other material delivered or transmitted to Contractor by State shall remain the property of State, and shall be returned by Contractor to State, at Contractor's expense, at termination or expiration of this contract. All non-third party software and source code, records, reports, documents, or other material related to this contract and/or obtained or prepared by Contractor in connection with the performance of the services contracted for herein shall become the property of State, and shall be returned by Contractor to State, at Contractor's expense, at termination or expiration of this contract.

12. Contractor shall not enter into any subcontract for work or services contemplated under this contract without obtaining prior written approval of the Department. Any subcontracts approved by the Department shall be subject to conditions and provisions as the Department may deem necessary; provided, however, that notwithstanding the foregoing, unless otherwise provided in this contract, such prior written approval shall not be required for the purchase by the contractor of supplies and services which are incidental but necessary for the performance of the work required under this contract. No subcontract shall relieve the Contractor of the responsibility for the performance of contractual obligations described herein.

13. No person and no entity providing services pursuant to this contract on behalf of contractor or any subcontractor is prohibited from providing such services by the provisions of R.S. 1113 as amended in the 2008 Regular Session of the Louisiana Legislature.

14. No claim for services furnished or requested for reimbursement by Contractor, not provided for in this contract, shall be allowed by the Department. In the event the Department determines that certain costs which have been reimbursed to Contractor pursuant to this or previous contracts are not allowable, the Department shall have the right to set off and withhold said amounts from any amount due the Contractor under this contract for costs that are allowable.

15. This contract is subject to and conditioned upon the availability and appropriation of Federal and/or State funds; and no liability or obligation for payment will develop between the parties until the contract has been approved by required authorities of the Department; and, if contract exceeds $20,000, the Director of the Office of Contractual Review, Division of Administration in accordance with La. R.S. 39:1502.

16. The continuation of this contract is contingent upon the appropriation of funds from the legislature to fulfill the requirements of the contract. If the Legislature fails to appropriate sufficient monies to provide for the continuation of the contract, or if such appropriation is reduced by the veto of the Governor or by any means provided in the appropriations act to prevent the total appropriation for the year from exceeding revenues for that year, or for any other lawful purpose, and the effect of such reduction is to provide insufficient
monies for the continuation of the contract, the contract shall terminate on the date of the beginning of the first fiscal year for which funds are not appropriated.

17. Any alteration, variation, modification, or waiver of provisions of this contract shall be valid only when reduced to writing, as an amendment duly signed, and approved by required authorities of the Department; and, if contract exceeds $20,000, approved by the Director of the Office of Contractual Review, Division of Administration. Budget revisions approved by both parties in cost reimbursement contracts do not require an amendment if the revision only involves the realignment of monies between originally approved cost categories.

18. Any contract disputes will be interpreted under applicable Louisiana laws and regulations in Louisiana administrative tribunals or district courts as appropriate.

19. Contractor will warrant all materials, products and/or services produced hereunder will not infringe upon or violate any patent, copyright, trade secret, or other proprietary right of any third party. In the event of any such claim by any third party against DHH, the Department shall promptly notify Contractor in writing and Contractor shall defend such claim in DHH’s name, but at Contractor’s expense and shall indemnify and hold harmless DHH against any loss, expense or liability arising out of such claim, whether or not such claim is successful. This provision is not applicable to contracts with physicians, psychiatrists, psychologists or other allied health providers solely for medical services.

20. Any equipment purchased under this contract remains the property of the Contractor for the period of this contract and future continuing contracts for the provision of the same services. Contractor must submit vendor invoice with reimbursement request. For the purpose of this contract, equipment is defined as any tangible, durable property having a useful life of at least (1) year and acquisition cost of $1000.00 or more. The contractor has the responsibility to submit to the Contract Monitor an inventory list of DHH equipment items when acquired under the contract and any additions to the listing as they occur. Contractor will submit an updated, complete inventory list on a quarterly basis to the Contract Monitor. Contractor agrees that upon termination of contracted services, the equipment purchased under this contract reverts to the Department. Contractor agrees to deliver any such equipment to the Department within 30 days of termination of services.

21. Contractor agrees to protect, indemnify and hold harmless the State of Louisiana, DHH, from all claims for damages, costs, expenses and attorney fees arising in contract or tort from this contract or from any acts or omissions of Contractor’s agents, employees, officers or clients, including premises liability and including any claim based on any theory of strict liability. This provision does not apply to actions or omissions for which LA R.S. 40:1299.39 provides malpractice coverage to the contractor, nor claims related to treatment and performance of evaluations of persons when such persons cause harm to third parties (R.S. 13:5108.1(E)). Further it does not apply to premises liability when the services are being performed on premises owned and operated by DHH.

22. Any provision of this contract is severable if that provision is in violation of the laws of the State of Louisiana or the United States, or becomes inoperative due to changes in State and Federal law, or applicable State or Federal regulations.

23. Contractor agrees that the current contract supersedes all previous contracts, negotiations, and all other communications between the parties with respect to the subject matter of the current contract.
THIS CONTRACT CONTAINS OR HAS ATTACHED HERETO ALL THE TERMS AND CONDITIONS AGREED UPON BY THE CONTRACTING PARTIES. IN WITNESS THEREOF, THIS CONTRACT IS SIGNED ON THE DATE INDICATED BELOW.

| SIGNATURE    | DATE      | SIGNATURE    | DATE      | STATE OF LOUISIANA  
|--------------|-----------|--------------|-----------| DEPARTMENT OF HEALTH AND HOSPITALS |
| NAME         |           | NAME         |           | Secretary, Department of Health and Hospitals or Designee |
| TITLE        |           | TITLE        |           | |
| SIGNATURE    | DATE      | SIGNATURE    | DATE      | |
| NAME         |           | NAME         |           | |
| TITLE        |           | TITLE        |           | |
HIPAA Business Associate Addendum

This HIPAA Business Associate Addendum is hereby made a part of this contract in its entirety as Attachment ___ to the contract.

1. The Louisiana Department of Health and Hospitals ("DHH") is a Covered Entity, as that term is defined herein, because it functions as a health plan and as a health care provider that transmits health information in electronic form.

2. Contractor is a Business Associate of DHH, as that term is defined herein, because contractor either: (a) creates, receives, maintains, or transmits PHI for or on behalf of DHH; or (b) provides legal, actuarial, accounting, consulting, data aggregation, management, administrative, accreditation, or financial services for DHH involving the disclosure of PHI.

3. Definitions: As used in this addendum –
   A. The term “HIPAA Rules” refers to the federal regulations known as the HIPAA Privacy, Security, Enforcement, and Breach Notification Rules, found at 45 C.F.R. Parts 160 and 164, which were originally promulgated by the U.S. Department of Health and Human Services (DHHS) pursuant to the Health Insurance Portability and Accountability Act ("HIPAA") of 1996 and were subsequently amended pursuant to the Health Information Technology for Economic and Clinical Health ("HITECH") Act of the American Recovery and Reinvestment Act of 2009.
   C. The term “security incident” has the same meaning as set forth in 45 C.F.R. § 164.304.
   D. The terms “breach” and “unsecured protected health information” (“unsecured PHI”) have the same meaning as set forth in 45 C.F.R. § 164.402.

4. Contractor and its agents, employees and subcontractors shall comply with all applicable requirements of the HIPAA Rules and shall maintain the confidentiality of all PHI obtained by them pursuant to this contract and addendum as required by the HIPAA Rules and by this contract and addendum.

5. Contractor shall use or disclose PHI solely: (a) for meeting its obligations under the contract; or (b) as required by law, rule or regulation (including the HIPAA Rules) or as otherwise required or permitted by this contract and addendum.

6. Contractor shall implement and utilize all appropriate safeguards to prevent any use or disclosure of PHI not required or permitted by this contract and addendum, including administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of the electronic protected health information that it creates, receives, maintains, or transmits on behalf of DHH.

7. In accordance with 45 C.F.R. § 164.502(e)(1)(ii) and (if applicable) § 164.308(b)(2), contractor shall ensure that any agents, employees, subcontractors or others that create, receive, maintain, or transmit PHI on behalf of contractor agree to the same restrictions, conditions and requirements that apply to contractor with respect to such information, and it shall ensure that they implement reasonable and appropriate safeguards to protect such information. Contractor shall take all reasonable steps to ensure that its agents’, employees’ or subcontractors’ actions or omissions do not cause contractor to violate this contract and addendum.

8. Contractor shall, within three (3) days of becoming aware of any use or disclosure of PHI, other than as permitted by this contract and addendum, report such disclosure in writing to the person(s) named in section 14 (Terms of Payment), page 1 of the CF-1. Disclosures which must be reported by contractor include, but are not limited to, any security incident, any breach of unsecured PHI, and any “breach of the security system” as defined in the Louisiana Database Security Breach Notification Law, La.R.S. 51:3071 et seq. At the option of DHH, any harm or damage resulting from any use or disclosure which violates this contract and addendum shall be mitigated, to the extent practicable, either: (a) by contractor at its own expense; or (b) by DHH, in which case contractor shall reimburse DHH for all expenses that DHH is required to incur in undertaking such mitigation activities.
9. To the extent that contractor is to carry out one or more of DHH’s obligations under 45 C.F.R. Part 164, Subpart E, contractor shall comply with the requirements of Subpart E that apply to DHH in the performance of such obligation(s).

10. Contractor shall make available such information in its possession which is required for DHH to provide an accounting of disclosures in accordance with 45 CFR § 164.528. In the event that a request for accounting is made directly to contractor, contractor shall forward such request to DHH within two (2) days of such receipt. Contractor shall implement an appropriate record keeping process to enable it to comply with the requirements of this provision. Contractor shall maintain data on all disclosures of PHI for which accounting is required by 45 CFR § 164.528 for at least six (6) years after the date of the last such disclosure.

11. Contractor shall make PHI available to DHH upon request in accordance with 45 CFR § 164.524.

12. Contractor shall make PHI available to DHH upon request for amendment and shall incorporate any amendments to PHI in accordance with 45 CFR § 164.526.

13. Contractor shall make its internal practices, books, and records relating to the use and disclosure of PHI received from or created or received by contractor on behalf of DHH available to the Secretary of the U. S. DHHS for purposes of determining DHH’s compliance with the HIPAA Rules.

14. Contractor shall indemnify and hold DHH harmless from and against any and all liabilities, claims for damages, costs, expenses and attorneys’ fees resulting from any violation of this addendum by contractor or by its agents, employees or subcontractors, without regard to any limitation or exclusion of damages provision otherwise set forth in the contract.

15. The parties agree that the legal relationship between DHH and contractor is strictly an independent contractor relationship. Nothing in this contract and addendum shall be deemed to create a joint venture, agency, partnership, or employer-employee relationship between DHH and contractor.

16. Notwithstanding any other provision of the contract, DHH shall have the right to terminate the contract immediately if DHH determines that contractor has violated any provision of the HIPAA Rules or any material term of this addendum.

17. At the termination of the contract, or upon request of DHH, whichever occurs first, contractor shall return or destroy (at the option of DHH) all PHI received or created by contractor that contractor still maintains in any form and retain no copies of such information; or if such return or destruction is not feasible, contractor shall extend the confidentiality protections of the contract to the information and limit further uses and disclosure to those purposes that make the return or destruction of the information infeasible.
Cost Template

Proposers must complete a cost proposal in the following format to be considered for award. If it is not completed, the Proposer will be disqualified from consideration.

**Instructions:**
Proposer shall submit an all-inclusive hourly rate for environmental public health consultant services to include all anticipated costs of successful implementation of all deliverables outlined. The hourly rate for the three years of the contract will be multiplied by 400 hours per year to determine the total proposal cost.

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<th>Year</th>
<th>Hourly Rate</th>
<th>Hours</th>
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<th>Total Cost For 3 Year Project</th>
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Section of Environmental Epidemiology and Toxicology

Environmental Emergency Event Initial Screening, Response and Surveillance

ABOUT THE PROGRAM
On average, the Section of Environmental Epidemiology and Toxicology (SEET) staff receives 30-50 reports per day (approximately 12,000 per year) from the Louisiana State Police (LSP) and the National Response Center (NRC). These reports contain information on chemical releases and other potentially hazardous events within the state.

WHO WE SERVE
The Environmental Emergency Event Initial Screening, Response and Surveillance Program serves all Louisiana residents and visitors which includes sensitive subpopulations such as women of childbearing age, children, the elderly, immuno-compromised, and those with respiratory or other chronic health conditions.

SERVICES PROVIDED
SEET staff review the reports from the NRC and the LSP and provide the nine LDHH regions of the state with copies of all the LSP and NRC reports specific to their region. If follow-up public health action is necessary, the program can provide an emergency response packet consisting of information about the event, the chemical(s) of concern, health effects and medical management, and map(s) of the area, which display the incident location, points of interest, hospitals, schools, day care centers, nursing homes, and current contact information. A Material Safety Data Sheet may also be sent, once all necessary information is provided. Events are monitored to determine the need for follow-up public health investigations.

Number of Contracts: 1

HOT BUTTON ISSUES
Please list any news-making, hot-button or stakeholder issues that have occurred in the last three years.

- Pearl River Fish Kill (alert was received and sent out on Monday, Aug 15, 2011)
- Explosion in New Iberia (alert was received and sent out on Tuesday, Jun 14, 2011)
- ExxonMobil Naphtha release (alert was received and sent out on Thursday, Jun 14, 2012)
- Shintech Chlorine release (alert was received and sent out on Tuesday, Jun 19, 2012)
- Explosion in Geismar (alert was received and sent out on Thursday, Jun 13, 2013)
- West Baton Rouge Butadiene Release (alert was received and sent out on Monday, Aug 12, 2013)
- Lawtell Train Derailments (alert was received and sent out on Sunday, Aug 4, 2013)

MANDATES AND REPORTING REQUIREMENTS
National Toxic Substance Incidents Surveillance and Prevention (NTSIP) Grant Award Number: 1U61TS000128; Funding Source: CDC/Agency for Toxic Substances and Disease Registry (ATSDR); Project Period: 9/30/2009 – 9/29/2013; Deliverables: Screen all Louisiana State Police and National Response Center email notifications and forward to appropriate LDHH regional staff; enter initially qualifying events into the NTSIP database within 48 hours, with completion of fixed-facility...
events within 2 months, and completion of transportation events within 3 months; GIS Mapping:
map chemical facilities in the area; develop partnerships with other agencies; wastewater project;
Green Chemistry / Inherently Safer Technology Clearinghouse Website

Public Health Emergency Preparedness Grant award number: 2U9OTP61700511; Funding source:
CDC; Project Period: 8/10/2011-8/9/2012 (renewed annually); Deliverables: Screen all Louisiana State
Police and National Response Center email notifications and forward to appropriate LDHH regional
staff; provide, as requested, an emergency response packet consisting of information about the
event, the chemical(s) of concern (materials safety data sheets), health effects and medical
management, and map(s) of the area, which display the incident location, points of interest,
hospitals, schools, daycare centers, nursing homes, and current contact information to regional staff
and health care facilities in impacted areas.

Reporting Requirements: Qualifying events must be entered into the NTSIP database within
48 hours.

IMPACT: OUTCOMES AND PERFORMANCE INDICATORS

Measure:
Releases Reported to the National Response Center by State
2012: Nationally Ranked 2\textsuperscript{nd} (2119 Reports)
2011: Nationally Ranked 2\textsuperscript{nd} (1925 Reports)
2010: Nationally Ranked 2\textsuperscript{nd} (2064 Reports)
2009: Nationally Ranked 2\textsuperscript{nd} (2443 Reports)
2008: Nationally Ranked 2\textsuperscript{nd} (2537 Reports)

List key tracked outcomes and performance indicators related to the program.
- Number LSP and NRC reports screened and entered into NTSIP database
- Number of maps produced

MAJOR STAKEHOLDERS

Community Partners (List key community partners and their location)
- Poison Control Center, Louisiana State University, Shreveport, La.

Contractors
- Allison Koehler

Collaborating Programs
- Louisiana State Police
- National Response Center
- LA Department of Environmental Quality (LDEQ)
- US Centers for Disease Control (CDC)

RESOURCES FOR CLIENTS/PATIENTS

Data and Informational resources available for:
Pesticide Surveillance

ABOUT THE PROGRAM
The Pesticide Surveillance Program protects public health by investigating and tracking pesticide exposures occurring throughout the state. Case reports of pesticide exposure are received from the Louisiana Department of Agriculture and Forestry (LDAF), Poison Control Center calls, physician reports, and laboratory data.

WHO WE SERVE
The Pesticide Surveillance Program serves all Louisiana residents and visitors which includes sensitive subpopulations such as women of childbearing age, children, the elderly, immunocompromised, and those with respiratory or other chronic health conditions.

SERVICES PROVIDED
- Review health and exposure information for cases of pesticide exposure.
- Compile state statistics for pesticide exposure.
- Make recommendations to prevent and/or reduce pesticide exposure.
- Provide follow up assessment and surveillance for environmental emergency events.

Number of Contracts: 1

HOT BUTTON ISSUES
Please list any news-making, hot-button or stakeholder issues that have occurred in the last three years.
- Bed bugs: collaborated with the Louisiana Bed Bug Task Force to address the emerging bed bug issue
- Moth balls: investigated incidents of improper use of moth balls in two schools

MANDATES AND REPORTING REQUIREMENTS
Health-related Pesticide Incident Reports (HRPIR)funding source: Louisiana Department of Agriculture and Forestry.
Project Period: 10/1/2012-9/30/2013 (renewed annually).
Deliverables: Evaluation of health-related pesticide incidents referred by LDAF.

Reporting Requirements:
- Annual Report of HRPIRs

Pesticide Surveillance Grant award number: X8-83498001-0; Funding source: EPA; Project Period: 6/1/2011-5/31/2016; Deliverables: Expand occupational surveillance to identify and classify pesticide poisoning cases and describe workers at high risk for exposures; conduct in-depth investigations of pesticide-related events; develop outreach strategies and interventions targeting high risk occupations and industries, pesticide hazards, and adversely impacted low income and minority communities; disseminate surveillance findings and trends on occupational pesticide exposures.
Reporting Requirements:
- Quarterly Progress Reports
- Final Project Report
IMPACT: OUTCOMES AND PERFORMANCE INDICATORS
List key tracked outcomes and performance indicators related to the program.
- Number of reported pesticide exposures

DATA AND SYSTEMS
System Used: SPIDER (SENSOR Pesticide Incident Data Entry & Reporting)
Collects: Data on acute pesticide exposure events, including case information (name, demographics), location and type of exposure, pesticide product information (active ingredient, formulation, etc), health effects, healthcare utilization, etc.
Linked to: De-identified data annually submitted to CDC’s National Institute for Occupational Safety and Health for inclusion in a nationally, aggregated dataset

MAJOR STAKEHOLDERS
Community Partners (List key community partners and their location)
- Louisiana State University School of Public Health, New Orleans, LA
- Tulane University School of Public Health, New Orleans, LA
- Louisiana Poison Control Center, Shreveport, LA
- City of New Orleans Mosquito and Termite Control Board

Contractors
- Louisiana Public Health Institute

Collaborating Programs
- LA Department of Agriculture and Forestry (LDAF)
- LSU Ag Center Research and Extension (LSU Ag)
- CDC/National Institute for Occupational Safety and Health (NIOSH)
- US Environmental Protection Agency (EPA)
- LDHH Office of Public Health Sanitarian Services/Vector Control

RESOURCES FOR CLIENTS/PATIENTS
Data and Informational resources available for:
- DHH Pesticide Surveillance Program http://dhh.louisiana.gov/index.cfm/page/836
- LDAF Pesticide and Environmental Programs http://www.ldaf.state.la.us/portal/Offices/AgriculturalEnvironmentalSciences/PesticideEnvironmentalPrograms/PesticideProgram/tabid/368/Default.aspx
- CDC/NIOSH Pesticide Illness and Injury Surveillance http://www.cdc.gov/niosh/topics/pesticides/
- EPA Pesticide Programs http://www.epa.gov/pesticides
Health/Fish Consumption Advisories

ABOUT THE PROGRAM
The Health/Fish Consumption Advisories Program makes recommendations for the issuance of seafood consumption and other advisories. Risk analyses are conducted and may result in the issuance of public health advisories. The primary goal of the Program is to allow the greatest use of the state's natural resources while still protecting the public's health. State environmental regulatory agencies collaborating with the program include the Louisiana Department of Environmental Quality (LDEQ), Louisiana Department of Wildlife and Fisheries (LDWF) and the Louisiana Department of Agriculture and Forestry (LDAF). The program also conducts selected blood mercury screenings and seafood consumption surveys for targeted communities as resources permit.

WHO WE SERVE
The Health/Fish Consumption Advisories Program serves all Louisiana residents and visitors which includes sensitive subpopulations such as women of childbearing age, children, the elderly, immuno-compromised, and those with respiratory or other chronic health conditions.

SERVICES PROVIDED
- Evaluate fish-tissue and other sources of data.
- Issue fish consumption advisories.
- Conduct community outreach and education.
- Provides follow-up assessment and surveillance for environmental emergency events.

Number of Contracts: 1

HOT BUTTON ISSUES
Please list any news-making, hot-button or stakeholder issues that have occurred in the last three years.
- 2010 Gulf of Mexico BP Oil Spill

MANDATES AND REPORTING REQUIREMENTS
The Louisiana Department of Health and Hospitals, Environmental Quality, Wildlife and Fisheries, and Agriculture and Forestry have an interagency agreement to work together to protect the health of Louisiana residents and visitors by following the procedures described in the document entitled Protocol for Issuing Public Health Advisories for Chemical Contaminants in Recreationally Caught Fish and Shellfish.

Reporting Requirements: Not applicable

IMPACT: OUTCOMES AND PERFORMANCE INDICATORS
List key tracked outcomes and performance indicators related to the program.
- Number of seafood consumption advisories
- Number of seafood-related public inquiries
- Number of seafood datasets reviewed
- Number of Gulf Spill Monitoring samples reviewed
MAJOR STAKEHOLDERS

Community Partners (List key community partners and their location)
- Louisiana State University School of Public Health, New Orleans, LA
- Tulane University School of Public Health, New Orleans, LA
- Louisiana Audubon Council, Baton Rouge, LA

Contractors
- Dr. Tom Arnold, Louisiana Poison Control Center

Collaborating Programs
- LA Department of Environmental Quality (DEQ)
- LA Department of Wildlife and Fisheries (LDWF)
- LA Department of Agriculture and Forestry (DAF)
- DHH Office of Public Health, Sanitarian Services
- US Environmental Protection Agency (EPA)
- US Food and Drug Administration (FDA)

RESOURCES FOR CLIENTS/PATIENTS

Data and Informational resources available for:
- LDHH Health/Fish Consumption Advisory Program
  [http://dhh.louisiana.gov/index.cfm/page/564](http://dhh.louisiana.gov/index.cfm/page/564)
- EPA Fish Consumption Advisories Program
  [http://water.epa.gov/scitech/swguidance/fishshellfish/fishadvisories/index.cfm](http://water.epa.gov/scitech/swguidance/fishshellfish/fishadvisories/index.cfm)
- LDHH Gulf Oil Spill Resources [http://new.dhh.louisiana.gov/?shpid=5](http://new.dhh.louisiana.gov/?shpid=5)
- FDA Gulf of Mexico Oil Spill Update [http://www.fda.gov/Food/FoodSafety/Product-SpecificInformation/Seafood/ucm210970.htm](http://www.fda.gov/Food/FoodSafety/Product-SpecificInformation/Seafood/ucm210970.htm)

Public Health Assessment /Health Studies

ABOUT THE PROGRAM

The Public Health Assessment/Health Studies Program is funded under a cooperative agreement with the Centers for Disease Control and Prevention’s (CDC) Agency for Toxic Substances and Disease Registry (ATSDR). The primary goal of the program is to reduce exposures to hazardous substances and mitigate potential adverse health effects from such exposures. Program staff evaluate data from the National Priority List (NPL)/“Superfund” and other hazardous waste sites to determine the extent of and/or potential for exposure to site-related contaminants; conduct exposure investigations, health studies, and surveys to characterize health risks associated with chemicals in the environment; recommend actions to prevent, reduce, and/or eliminate exposure to chemical contaminants; and provide environmental health information to individuals, communities, and health care providers. Since its inception in 1988, the Program has assessed approximately 285 NPL and non-NPL hazardous waste sites in the form of public health assessments, health consultations, or technical assistance documents.
The Public Health Assessment/Health Studies Staff also investigate residents’ reports of environmentally-related disease cluster concerns such as cancer, reproductive disorders, neurological conditions, and respiratory diseases, all of which may require public health interventions.

The Program staff develops, publishes, distributes and communicates environmental health information to residents, schools, healthcare providers, and communities. The Program collaborates with local, state and federal governments and non-profit organizations to ensure the public is provided with audience specific environmental health information.

WHO WE SERVE

The Public Health Assessment/Health Studies Program serves all Louisiana residents and visitors which includes sensitive subpopulations such as women of childbearing age, children, the elderly, immunocompromised, and those with respiratory or other chronic health conditions.

SERVICES PROVIDED

- Evaluate and map data collected for hazardous waste sites to determine if contaminants pose a public health concern.
- Collaborate with state and federal environmental agencies and other stakeholders.
- Respond to residents’ requests for environmental health information and make referrals to other programs/agencies.
- Participate in community and professional events to listen to residents’ concerns and increase awareness about pressing environmental health topics.
- Collaborate with the key stakeholders including the U.S. Environmental Protection Agency, Region 6 Environmental Justice Program, the Louisiana Department of Environmental Quality and Louisiana State University School of Public Health programs (Louisiana Tumor Registry and the Louisiana Cancer Control Partnership) to address residents’ cancer concerns.
- Provide follow up assessment and surveillance for environmental emergency events.

Number of Contracts: 2

HOT BUTTON ISSUES

Please list any news-making, hot-button or stakeholder issues that have occurred in the last three years.

- Mossville (Calcasieu Parish) Community Public Health Assessment (2012)
- Devil’s Swamp (Proposed NPL/"Superfund" Site)
- Pearl River Fish Kill (2011)
- Gulf of Mexico BP Oil Spill (2010)
- Bayou Corne Sinkhole (2012)

MANDATES AND REPORTING REQUIREMENTS

Mandates (List any local, state or federal mandates that impact the operation of your program.)

- La. Revised Statues (RS) 36:258: perform functions which will improve the quality of life by protecting the general health of Louisiana’s citizens and to ensure environmental quality and pollution control.
RS 40:5 (general powers of jurisdiction) states that LDHH/SEET is given exclusive control over public health areas such as noxious odors and environmental quality and pollution control.

SCR92 (2008): Requests the Department of Health and Hospitals to investigate the high rates of cancer in Livonia.

HCR188 (2009): Urges and requests the Department of Health and Hospitals to study the health impacts of a concrete plant (LaFarge, Orleans Parish) located in a residential neighborhood.

ACT 666 (2003): Legislation to establish an Environmental Health Surveillance System (EHSS). The purpose of the EHSS shall be to establish ongoing surveillance of the environmental factors, including physical, chemical, biological, and social factors and diseases affecting the citizens of this state, with a focus on disease trends and research, such as disease clusters (cancer, respiratory, neurological, reproductive, etc).

ATSDR’s Partnership to Promote Localized Efforts to Reduce Environmental Exposure Program (APPLETREE) Grant Award Number: 1U61TS000611; Funding Source: CDC/ATSDR; Project Period: 04/01/2011 – 03/31/2014; Deliverables: Evaluate data from National Priority List (NPL)/Superfund and other hazardous waste sites to determine the extent of and/or potential for exposure to site-related contaminants; conduct exposure investigations, health studies, and surveys to characterize health risks associated with chemicals in the environment; recommend actions to prevent, reduce, and/or eliminate exposure to chemical contaminants; and provide environmental health information to individuals, communities, and health care providers.

Reporting Requirements:
- Complete a minimum of 12 health consultations annually
- Quarterly success story and updated work plan
- Annual mid-year progress report (non-competing continuation application)

IMPACT: OUTCOMES AND PERFORMANCE INDICATORS

Louisiana ranks 20th nationally, based on the total number of final NPL sites, and ranks 30th based on the total number of final NPL sites per capita.

List key tracked outcomes and performance indicators related to the program.
- Number of National Priority List /“Superfund” sites and hazardous waste sites
- Number of public health assessments
- Number of health consultations
- Number of technical assists
- Number of site-related outreach activities
- Number of disease cluster investigations
- Number of community and professional outreach events
- Number of program publications produced

MAJOR STAKEHOLDERS

Community Partners (List key community partners and their location)
- Louisiana State University School of Public Health (LA Tumor Registry & LA Cancer Control Partnership)
- Louisiana Department of Environmental Quality
- Dillard University Deep South Center for Environmental Justice
- U.S. Environmental Protection Agency, Region 6
Bayou Interfaith Shared Community Organization (BISCO)
Consumer Product Safety Commission (CPSC)

Contractors (List key contractors and their location)
- Dr. LuAnn White, PhD, DABT
  Tulane University School of Public Health and Tropical Medicine
- Dr. Elizabeth Fontham, PhD
  LSU School of Public Health

Collaborating Programs (List key programs the OPH program collaborates with and location)
- Childhood Lead Poisoning Prevention and Healthy Homes Program, Statewide
- Safe Drinking Water Program, Statewide
- DHH, Regional Medical Directors (all nine regions)

RESOURCES FOR CLIENTS/PATIENTS

Occupational Health & Injury Surveillance

ABOUT THE PROGRAM
The Occupational Health and Injury Surveillance (OHIS) Program began in 2005 and is funded by the United States Department of Health and Human Services; Centers for Disease Control and Prevention’s National Institute for Occupational Safety and Health (NIOSH). The primary goal of the Program is to promote the health, safety and quality of life of people working in Louisiana. Program staff collect, analyze, interpret and disseminate information about work-related injuries, illnesses, and hazards in Louisiana; educate workers, employers, and health care providers about occupational health and safety issues; use surveillance information to guide the development of prevention and outreach activities; and manage the statewide laboratory surveillance system for reportable chemical exposures (arsenic, cadmium, lead, mercury, and carbon monoxide) and conduct follow-up exposure investigations. Occupational health indicators include:
- Non-fatal injuries and illnesses reported by employers
- Work-related hospitalizations
- Fatal work-related injuries
- Amputations reported by employers
- Amputations identified in state workers' compensation systems
- Hospitalizations for work-related burns
- Musculoskeletal disorders reported by employers
- Carpal tunnel syndrome cases identified in state workers' compensation systems
- Pneumoconiosis hospitalizations
- Pneumoconiosis mortality
- Acute work-related pesticide poisonings reported to poison control centers
- Incidence of malignant mesothelioma
- Elevated blood lead levels among adults
- Workers employed in industries with high risk for occupational morbidity
▪ Workers employed in occupations with high risk for occupational morbidity
▪ Workers in occupations and industries with high risk for occupational mortality
▪ Occupational health and safety professionals
▪ OSHA enforcement activities
▪ Workers’ compensation awards
▪ Work-related low back disorder hospitalizations

WHO WE SERVE
The program focuses on Louisiana’s workforce (≥ 16 years of age) which includes approximately 1.9 million individuals.

SERVICES PROVIDED
▪ Compile statistics for worker-related conditions and exposures.
▪ Partner with occupational health stakeholders to share data and work to improve the health of workers in Louisiana.
▪ Collaborate with other DHH programs to track deaths and injuries/illnesses involving workers during and after an emergency event.

Number of Contracts: 3

HOT BUTTON ISSUES
Please list any news-making, hot-button or stakeholder issues that have occurred in the last three years.
▪ Surveillance of Workers during the BP Oil Spill (weekly reports on DHH’s website, NIOSH/Health Hazard Evaluation)
▪ Identified high exposure levels to lead in firing ranges
▪ Fatalities in the Construction Industry (Louisiana Morbidity Report)

MANDATES AND REPORTING REQUIREMENTS
Mandates (List any local, state or federal mandates that impact the operation of your program.)
▪ Louisiana Sanitary Code (Control of Disease/Disease Reporting Requirements) Lead, arsenic, cadmium, mercury, and carbon monoxide
▪ Occupational Health and Injury Surveillance Grant award number: 2U60OH008470; Funding Source: CDC/NIOSH; Funding Period: 07/01/2010 – 06/30/2015; Deliverables: Collect, analyze, and interpret surveillance data for the occupational health indicators; interact regularly with state partners and stakeholders to obtain input, identify occupational issues and to maintain pipelines to disseminate the findings of the surveillance system; develop new data sources and additional occupational health indicators that are relevant to Louisiana; assess the benefits and limitations of each data source and type with respect to data gaps and incomplete data, reliable denominators, consistency, and timeliness of data from each source; produce a state-wide annual report that provides trends, high risk occupations and industries, and identifies emerging issues in Louisiana; develop prevention strategies
and interventions using findings; participate in NIOSH meetings, conference calls and other activities.

- Adult Blood Lead Epidemiology and Surveillance Contract number: 214-2010-M-35484; Funding source: CDC/NIOSH; Project Period: 9/1/2012-8/31/2013; Deliverables: Provide laboratory-reported blood lead levels for adults to the CDC/NIOSH.

Reporting Requirements (List any state, federal or grant reporting requirements for the program.)

- Annual performance report
- Annual calculation & reporting of occupational health indicators
- Bi-Annual reporting of adult blood lead levels

**IMPACT: OUTCOMES AND PERFORMANCE INDICATORS**

The program tracks multiple occupational health indicators such as work-related fatalities, high risk occupations and industries, and adult lead poisoning. The indicators are posted on the Council of State & Territorial Epidemiologist’s website; national comparison rates are also included, when available.


List key tracked outcomes and performance indicators related to the program.

**Outcome:**

- Increased surveillance of occupational health conditions
- Improved collaboration among agencies/organizations involved with occupational health issues

**Performance:**

- Calculate and report on 20 occupational health indicators, and evaluate and track heavy metal and CO laboratory data.
- Produce reports and publications of surveillance findings and disseminate findings to local, state, and federal partners.

**DATA AND SYSTEMS**

System Used: LOTS (Louisiana Occupational Tracking System)

Collects: lab reports for heavy metal (arsenic, cadmium, lead, and mercury), carbon monoxide, and pesticide metabolites, including case information (age, sex, location, occupation, employer), test results (analyte, date collected, sample type), and exposure information (how/where did it occur)

Linked to: De-identified adult lead test results (>=16 years) shared with CDC’s Adult Blood Lead and Epidemiology Surveillance (ABLES) Program

**MAJOR STAKEHOLDERS**

Community Partners (List key community partners and their location)

- Louisiana State University School of Public Health (LA Tumor Registry) New Orleans, LA
- Louisiana Poison Control Center, Shreveport, LA
Contractors
- Louisiana Public Health Institute, New Orleans, LA
- Dr. Luann White, PhD, DABT
  Tulane School of Public Health, New Orleans, LA
- Dr. Elizabeth Fontham, PhD
  LSU School of Public Health, New Orleans, LA

Collaborating Programs (List key programs the OPH program collaborates with and location)
- DHH Office of Public Health (OPH)/Childhood Lead Poisoning Prevention and Health Home Program (Statewide)
- DHH OPH/HIV Program (Statewide)
- DHH OPH/Asthma Management and Prevention Program (Statewide)
- OSHA, Baton Rouge, LA
- Louisiana Workforce Commission, Baton Rouge, LA
- Bureau of Labor Statistics, Baton Rouge, LA
- CDC/NIOSH

RESOURCES FOR CLIENTS/PATIENTS
List any online, print, in-person or other available resources that provide clients or patients information or provide assistance and the online or physical location at which it can be accessed.
- DHH Heavy Metal & Carbon Monoxide Webpage: http://new.dhh.louisiana.gov/index.cfm/page/559
- CDC/ National Institute for Occupational Safety and Health (NIOSH) http://www.cdc.gov/niosh/

Environmental Public Health Tracking

ABOUT THE PROGRAM
In 2001, the US Congress appropriated funding to the Centers for Disease Control and Prevention (CDC) for the creation of the National Environmental Public Health Tracking (EPHT) Program. The Louisiana EPHT Program is a five year cooperative agreement with CDC to develop an environmental public health tracking network in Louisiana. The program fulfills the mandate of Louisiana Act 666 that requires the state to develop an Environmental Health Surveillance System to track physical, chemical, biological, and social factors that may play a role in the development of chronic diseases affecting the citizens of Louisiana.

WHO WE SERVE
The Environmental Public Health Tracking Program serves all Louisiana residents and visitors which includes sensitive subpopulations such as women of childbearing age, children, the elderly, immunocompromised, and those with respiratory or other chronic health conditions.
SERVICES PROVIDED

- Develop environmental public health indicators using CDC guidance
- Build a public and secure user interface on which to display Louisiana’s indicator data
- Provide query and mapping tools for EPHT network users
- Promote the use of the network
- Provide follow-up assessment and surveillance for environmental emergency events

Number of Contracts: 2

HOT BUTTON ISSUES

Please list any news-making, hot-button or stakeholder issues that have occurred in the last three years.

In May of 2013, the LA Environmental Public Health Tracking Network launched its functional portal which enables users to query data, create graphs, tables and maps and export reports and data. Data sets available on the queryable portal include asthma, heart attacks, childhood lead poisoning and carbon monoxide poisoning. The second generation of the portal is scheduled to be released in December of 2013 at which point all core indicators will be included. This includes: air and water quality, birth defects and birth outcomes and heat stress.

MANDATES AND REPORTING REQUIREMENTS

Environmental Public Health Tracking Network Grant award number: 5U38EH000621
Funding source: CDC National Center for Environmental Health
Project Period: 8/1/2009-7/31/2014

Deliverables: Develop an environmental public health tracking network (a web-based system that will combine health and environmental data, provide residents with information to address public health concerns, and educate the public about ways to protect themselves from diseases and chemicals of concern); develop a data warehouse and collaborative workspace within SharePoint to enable internal data sharing and reporting; develop Data Sharing Agreements (DSAs) with data partners which outline criteria for using, sharing and re-releasing data; Procure and process nationally consistent data and measures (NCDMs)and associated metadata for public display, mapping and reporting; submit aggregated datasets to the CDC for import into the national EPHT portal; establish a Technical Advisory Group (TAG) and Data Steering Committee.

ACT 666 (Louisiana, 2003): Legislation to establish an Environmental Health Surveillance System (EHSS). The purpose of the EHSS shall be to establish ongoing surveillance of the environmental factors, including physical, chemical, biological, and social factors and diseases affecting the citizens of this state, with a focus on disease trends and research, such as disease clusters (cancer, respiratory, neurological, reproductive, etc).

Reporting Requirements

- Interim and Annual Progress reports
- Quarterly Program Management Tool and Earned Value Management Reports
- Monthly Activity Reports
IMPACT: OUTCOMES AND PERFORMANCE INDICATORS

The objective of the EPHT program is to develop standardized indicators which will enable national and state comparisons. Core (required) indicators include:

- Asthma
- Heart Attacks
- Cancer
- Birth Defects
- Birth outcomes
- Childhood Lead Poisoning
- Carbon Monoxide Poisoning
- Heat Stress
- Air Quality
- Water Quality

List key tracked outcomes and performance indicators related to the program.
- Number of data sets processed, warehoused and shared on the network: 16

DATA AND SYSTEMS

System Used: LA Environmental Public Health Tracking (LEPHT) System
Collects: Data collected includes:

- Asthma
- Heart Attacks
- Cancer
- Birth Defects
- Birth Outcomes
- Childhood Lead Poisoning
- Carbon Monoxide Poisoning
- Heat Stress
- Air Quality
- Water Quality

Linked to: The LEPHT system is not linked to other programs within Louisiana. The system is part of a network which includes 24 other states and cities, as well as the US Centers for Disease Control and Prevention (CDC). The LEPHT program submits collected core datasets to the CDC on a semiannual basis. They in turn add the data to their EPHT system.

MAJOR STAKEHOLDERS

Community Partners (List key community partners and their location)

- Tulane University School of Public Health, New Orleans, LA
- Xavier University, New Orleans, LA
- Dillard University, New Orleans, LA
- City of New Orleans, Office of Environmental Affairs, New Orleans, LA
- Louisiana State University School of Public Health, New Orleans, LA
Contractors
- University of Louisiana at Lafayette
- George Frierson

Collaborating Programs
- LA Dept. of Health and Hospitals (DHH) Asthma Management and Prevention Program
- DHH Office of Information Technology
- DHH Birth Defects Monitoring Network
- DHH Maternal and Childhood Health Program
- DHH Safe Drinking Water Program
- DHH Childhood Lead Poisoning Prevention and Healthy Homes Program
- DHH SEET Occupational Health and Surveillance Program
- LA Department of Environmental Quality (DEQ)
- DHH Vital Records

RESOURCES FOR CLIENTS/PATIENTS
Please visit the following link in order to find data and informational materials relevant to the below services:  http://lepht.dhh.la.gov
- Asthma
- Heart Attacks
- Cancer
- Birth Defects
- Birth outcomes
- Childhood Lead Poisoning
- Carbon Monoxide Poisoning
- Heat Stress
- Air Quality
- Water Quality

Private Well Initiative

ABOUT THE PROGRAM
About 15 percent of the U.S. population relies on private wells for their drinking water (over 500,000 in Louisiana). Many studies have found unsafe levels of chemicals in private wells including radon, arsenic, uranium, manganese, fluoride, nitrates/nitrites, and bacteria. The Private Well Initiative (PWI), within the Section of Environmental Epidemiology and Toxicology (SEET), will collect a few water samples from private water wells and begin to build a database of water quality lab results from across the state. Using that data, and other data collected, the program will attempt to build a website that will provide information to private well owners.

WHO WE SERVE
The PWI serves all Louisiana residents who have access to private water wells not protected by the US EPA Safe Drinking Water Act, and used for personal and/or agricultural purposes.
SERVICES PROVIDED

- Identifying databases that characterize private wells and describe water quantity and quality in private wells.
  - Promoting access to these databases by public and environmental health practitioners.
- Collecting databases that characterize private wells and describe water quantity and quality in private wells.
  - Partnering with the Environmental Public Health Tracking Portal to make these databases available to public and environmental health practitioners.
- Coordinate the sampling and testing of 18 private water wells during FY 2014 and FY 2015
  - Use the information from these results (and other data collected), the program will attempt to build a website that will provide information to private well owners on what to have their well tested for.

Number of Contracts: 0

HOT BUTTON ISSUES

Please list any news-making, hot-button or stakeholder issues that have occurred in the last three years.

- Pearl River fish kill possibly contaminating local water wells
- Opening of the Morganza Spillway possibly contaminating local water wells
- Bayou Corne Sinkhole possibly contaminating local water wells

MANDATES AND REPORTING REQUIREMENTS

- Enhancing Capacity for Environmental and Public Health (PWI) Grant Award number: 1U38EH0000974
- Improving LA Capacity to Assess & Manage Risk with Wells (PWI) Grant Award number: 1U53EH001107
- Source of Funding: CDC / National Center for Environmental Health; Project Period: 07/01/2012 – 12/29/2013; 09/01/2013 – 08/31/2015
- Deliverables: Identify databases that characterize private wells and describe water quantity and quality in private wells
- Promote access to these databases by public and environmental health practitioners.
- Collect databases that characterize private wells and describe water quantity and quality in private wells and other unregulated drinking water sources
- Partnering with the Environmental Public Health Tracking Portal to make these databases available to public and environmental health practitioners.
- 18 private water well lab sample results, website that will provide information to private well owners

Reporting Requirements: Not applicable

IMPACT: OUTCOMES AND PERFORMANCE INDICATORS
Measure: Not applicable
List key tracked outcomes and performance indicators related to the program.
- Number of private water well databases accessed
- Website Hits
- Stakeholder Feedback

MAJOR STAKEHOLDERS

Community Partners (List key community partners and their location)
- Louisiana Rural Water Association, Kinder

Contractors
- None

Collaborating Programs
- LA Department of Environmental Quality (DEQ)
- LA Department of Natural Resources (DNR)
- DHH Office of Public Health, Engineering Services
- Centers for Disease Control and Prevention (CDC)
- United States Geological Survey
- Louisiana State University Agricultural Center

RESOURCES FOR CLIENTS/PATIENTS

Data and informational resources available for:
- CDC Private Well Initiative http://www.cdc.gov/nceh/hsb/cwh/pwi.htm

Indoor Environmental Air Quality

ABOUT THE PROGRAM

The Indoor Environmental Air Quality Program (IEAQP), within the Section of Environmental Epidemiology and Toxicology (SEET), provides scientific accurate information and consultations that promote positive public health decisions. SEET/IEAQP is the only agency program that responds to indoor environmental air quality concerns. SEET/IEAQP has established a toll-free phone line and can also receive email inquiries. Residents with indoor environmental issues can call or email to communicate directly with IEAQP staff. SEET/IEAQP staff then determines the nature of the inquiry and how to address it. Some IEAQP questions require that staff disseminate indoor environmental educational information. Other requests for IEAQP information may require referrals appropriate to the situation. Other forms of environmental education informational responses may involve topic of interest presentations to small groups or at public meetings and events in response to weather events such as: ‘Improving Indoor Air Quality in School Facilities’, ‘Indoor Air Quality in Daycare Centers’, ‘Environmental Indoor Air Quality in the Home’ and ‘What to throw Away versus What to Save after Flooding’.

WHO WE SERVE

The Indoor Environmental Air Quality Program serves all Louisiana residents and visitors which includes sensitive subpopulations such as children, the elderly, immunocompromised, and those with respiratory or other chronic health conditions.
SERVICES PROVIDED
- Address website IEAQ inquiries.
- Conduct IEAQ phone consultations.
- Conduct public school IEAQ walkthrough assessments.
- Conduct community outreach and education.
- Conduct selected investigations as determined by the State Health Officer
- Provide follow up assessment and surveillance for environmental emergency events.

HOT BUTTON ISSUES
Please list any news-making, hot-button or stakeholder issues that have occurred in the last three years.

- 2011 Flooding: Tropical Storm Lee
- 2012 Eastern New Orleans Marsh Fires
- 2012 Chinese Drywall Investigation
- 2012 New Orleans Pallas Hotel Implosion
- 2012 Flooding: Tropical Storm Isaac
- 2012 Bayou Corne Bubbling /Sink Hole

MANDATES AND REPORTING REQUIREMENTS
Mandates (List any local, state or federal mandates that impact the operation of your program.)
State Mandates:

- Mandate 1La. Revised Statues (RS) 36:258 to perform functions which will improve the quality of life by protecting the general health of Louisiana’s citizens and to ensure environmental quality and pollution control.

- Mandate 2 RS 40:5 (general powers of jurisdiction) states that LDHH/SEET is given exclusive control over public health areas such as noxious odors and environmental quality and pollution control.

- Mandate 3 RS 40:4 specifically mandates for public school protection relative to ventilation, heating and air conditioning and other similar factors affecting public health.

Reporting Requirements (List any state, federal or grant reporting requirements for the program.)
- Reporting requirement: Not applicable

IMPACT: OUTCOMES AND PERFORMANCE INDICATORS
List key tracked outcomes and performance indicators related to the program.
- Number of IEAQP Consultations
- Number of IEAQP Walkthrough Assessment Summaries
- Number of IEAQP Outreach activities

**DATA AND SYSTEMS**

System Used: Microsoft Access and Microsoft Excel databases

**MAJOR STAKEHOLDERS**

**Community Partners (List key community partners and their location)**
- Louisiana State University Agricultural Center, Baton Rouge
- Local Governments, various parishes, Louisiana

**Contractors (List key contractors and their location)**
- Dr. Luanne White, Tulane School of Public Health and Tropical Medicine

**Collaborating Programs (List key programs the OPH program collaborates with and location)**
- Louisiana Asthma Management and Prevention Program (LAMP)
- LDHH/OPH Infectious Epidemiology,
- LDHH/OPH Sanitarian Services,
- Louisiana Department of Environmental Quality (DEQ)

**RESOURCES FOR CLIENTS/PATIENTS**

List any online, print, in-person or other available resources that provide clients or patients information or provide assistance and the online or physical location at which it can be accessed.

**Publications:**
- Mold: What You Need to Know About Your Health and Your Property
- Creating a Healthy Home: A Field Guide for Cleanup of Flooded Homes
- Cleaning Up Mold After Flooding
- Post Cleanup and Rebuilding of Interiors: A Resident’s Guide to Flood-Damaged Property
- Coming Home: Steps to Stay Safe as You Return to Your Home
- Smoke and Air Quality and Health

**Phone Numbers:**
- Indoor Air Quality hotline phone number (225)342-8303 or Toll free (888)293-7020

**Website link:**
- Indoor Environmental Air Quality Program: