



**GEORGIA DEPARTMENT
OF COMMUNITY HEALTH**

**STATE OFFICE OF RURAL HEALTH
REQUEST FOR GRANT APPLICATION**

**EMERGENCY DEPARTMENT UPGRADE
(ED UPGRADE)
FOR BEHAVIORAL HEALTH PATIENTS**

**DEPARTMENT OF COMMUNITY HEALTH GRANT FUNDING
IS SUBJECT TO AVAILABILITY AND IS AWARDED
AT THE DISCRETION OF THE DEPARTMENT COMMISSIONER**

**RELEASE DATE: TUESDAY, FEBRUARY 11, 2020
CLOSING DATE, MONDAY, APRIL 13, 2020**

**POINT OF CONTACT: JOANNE MITCHELL, GRANTS MANAGER
GEORGIA DEPARTMENT OF COMMUNITY HEALTH
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The Georgia Department of Community Health (“DCH”) has the responsibility of insuring over two million people in the State of Georgia; maximizing the State’s health care purchasing power; coordinating health planning for State agencies; and proposing cost-effective solutions for reducing the number of uninsured individuals. Within DCH, the State Office of Rural Health (“SORH”) serves Georgians by improving access to health care in rural and underserved areas designed to improve health status and reduce health disparities.

I. BACKGROUND

The Joint Commission Journal on Quality and Patient Safety 2018 concludes that the estimated number of hospital inpatient suicides in the United States ranges from 48.5 to 64.9 per year. Analysis of inpatient suicide methods suggests that hospital prevention efforts should be primarily focused on mitigating risks associated with hanging.

The Centers for Medicare and Medicaid Services (CMS) has announced the development of a clarification of Ligature Risk Policy identifying the need for increased direction, clarity, and guidance regarding the definition of what constitutes a ligature risk and other safety risks involving the care of patients, especially those requiring psychiatric care.

CMS notes that a hospital’s Patient’s Rights Condition of Participation (CoP), (42 C.F.R. §482.13(c)(2)) provides all patients with the right to a safe environment and patients with suicidal ideation or other psychiatric disorders are particularly vulnerable.

The focus for a ligature resistant or ligature free environment pertains to psychiatric hospitals or psychiatric units within a hospital. These facility types must take every precaution to minimize patient safety risks in accordance to national standards and guidelines. CMS states that the presence of unmitigated ligature risks in a psychiatric hospital or psychiatric unit of a hospital is an immediate jeopardy situation. This also includes any location where patients at risk of suicide are identified especially hospital emergency departments.

Psychiatric patients requiring medical care in a non-psychiatric and unlocked setting must be protected when demonstrating suicidal ideation or threat of harm to self or others. Although all risks cannot be eliminated, hospitals are expected to demonstrate how they identify patients at risk of harm to self or others and steps they are taking to minimize those risks in accordance with nationally recognized standards and guidelines. Safety measures to ensure these patients identified as being at risk are protected in a non-psychiatric and unlocked setting may include:

- 1:1 monitoring with continuous visual observation or video monitoring, if appropriate;
- Removal of sharp objects;
- Removal of equipment that can be used as a weapon or to inflict harm;
- Securing personal belongings; and
- Removal of any other item(s) that may contribute to harmful behavior.

Potential risks include but are not limited to those from ligatures, sharp objects, harmful substances, access to medications, easily breakable windows, readily accessible light fixtures, plastic bags (for suffocation), oxygen tubing, staff-call cords, electrical equipment cords, and others. Staff must mitigate the risks for medical supplies and equipment required for the provision of patient care and unable to be removed from the patient care setting.

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II. PROGRAM OVERVIEW

- A. The Emergency Department Upgrade (ED Upgrade) for Behavioral Health Patients grant provides funding for small rural hospitals in counties with populations less than 35,000 to make upgrades to emergency departments for compliance with the CMS CoP Ligature Risk Interpretive Guidelines. Selected Applicants will be required to contribute matching funds to supplement emergency department upgrade implementation plans in accordance to CMS Interpretive Guidelines 42 C.F.R.§482.13(c)(2). This funding is intended to off-set costs of achieving Ligature Risk compliance for behavioral health patients presenting in emergency departments.

The selected Applicants' commitment to the efficient and effective implementation of the Ligature Risk upgrades for the Emergency Department has the potential to:

- 1) Provide protection for a patient's emotional health and safety as well as his or her physical safety;
 - 2) Provide a safe environment with respect, dignity and comfort for those in crisis;
 - 3) Mitigate risk of potential suicide or self-harm;
 - 4) Mitigate risk of potential harm to employees or volunteers providing services directly or indirectly from patients exhibiting violent behaviors;
 - 5) Improve the overall quality of care for behavioral health patients presenting at emergency departments;
 - 6) Protect behavioral health patients' emotional health and safety as well as his or her physical safety;
 - 7) Reduce the number of hospital inpatient suicides; and
 - 8) Improve patient/family satisfaction.
- B. Through the ED Upgrade grant, selected hospitals will devise a plan of action to comply with the CMS Clarification of Ligature Risk Interpretive Guidelines including, but not limited to:
- 1) Identifying patients at risk;
 - 2) Provision of locked versus unlocked psychiatric units;
 - 3) Identifying and mitigating environmental safety risks;
 - 4) Provision of staff education and training; and
 - 5) Implementing internal survey procedures.
- C. Selected hospitals will be required to:
- 1) Monitor and report quarterly to the SORH, on the progress being made toward ligature resistant compliance; and
 - 2) Produce a final report to SORH detailing the upgrades made in the emergency department.
- D. Grant funding provided by the SORH is intended to partially defray the costs of initiating the ED Upgrade project. Selected Applicants are expected to contribute to the costs of initiation of their specific project and must sustain future compliance independently of the ED

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Upgrade funds. The term of the grant agreement with SORH will begin upon the execution of the grant agreement through June 30, 2021.

III. ANTICIPATED AWARD AMOUNT

Awards of \$50,000.00 each will be made to five (5) selected Applicants for the implementation of an ED Upgrade project. The selected Applicants will be required to produce matching funds in the amount of \$25,000.00. All Request for Grant Applications (RFGAs) will be reviewed and evaluated based on a competitive grant award process.

IV. ELIGIBILITY TO APPLY FOR GRANT FUNDING

In order to be eligible for consideration of award, the Applicant must:

- a) Be a rural hospital in a county with a population of less than 35,000;
- b) Provide matching funds in the amount of \$25,000.00;
- c) Be in good standing to conduct business with SORH. "Good Standing" is regarded as having complied with all grant obligations, while not being subject to any form of sanction, suspension or disciplinary censure.
<https://www.sam.gov/SAM/>, <http://doas.ga.gov/assets/State%20Purchasing/State%20Suspended%20and%20Debarred%20Suppliers/State%20of%20Georgia%20Suspended%20Debarred%20Suppliers%20March%202018.pdf>). This list is not all inclusive; and
- d) Operate a 24-hour Emergency Department.

V. PROGRAM DELIVERABLES

Applicant must be capable of meeting each of the deliverables below:

- a) Demonstrate on-going commitment of administrative, nursing and physician leadership support for the program;
- b) Maintain adequate staffing in the Emergency Department to provide optimal patient care;
- c) Provide funding to support continued compliance with any revision for the CMS Conditions of Participation regarding ligature risk as relative to behavioral health patients;
- d) Provide quarterly reports of progress made toward compliance and one final report with a detailed outcome of how the funds were utilized.

VI. SUBMISSION GUIDELINES

A. APPLICATION SUBMISSION

All documents MUST be submitted electronically to RFGA.EmergDepartUpgrade@dch.ga.gov and MUST BE RECEIVED by **3:00 PM, MONDAY, APRIL 13, 2020**. If the application is incomplete or non-responsive to submission requirements, it will not be considered for the review process. The Applicant will be notified by e-mail if the application did not meet submission requirements.

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The following is a list of the required documents to be submitted electronically in response to the RFGA for the ED Upgrade Grant:

1. Project Abstract
2. Project Narrative
3. Organizational Narrative
4. Budget Worksheet and Budget Justification
5. Appendix A: DCH Grant Application Form
6. Appendix B: Ethics Statement (*Signature Page must be submitted*)
7. Appendix C: Ethics in Procurement Policy (*Signature Page must be submitted*)
8. Appendix D: Budget Worksheet (Budget Justification **MUST** accompany this appendix)
9. Appendix E: Project Work Plan Template
10. Appendix F: Project Timeline Template

A checklist of the required documents above will be returned to the Applicant certifying that the application has been received by DCH.

Timely and complete submissions are the responsibility of the Applicant. All applications must be received via the e-mail address RFGA.EmergDepartUpgrade@dch.ga.gov, by no later than **Monday, April 13, 2020, 3:00pm, closing date**. Applications may be submitted prior to the closing date and time of **Monday, April 13, 2020, 3:00pm**, however all submissions are final.

ALL LATE APPLICATIONS WILL BE CONSIDERED NON-RESPONSIVE AND INELIGIBLE FOR CONSIDERATION. PLEASE ALLOW AMPLE TIME TO SUBMIT APPLICATIONS PRIOR TO SUBMISSION DEADLINE.

Deadline for Submission of Questions

Questions must be submitted electronically to RFGA.EmergDepartUpgrade@dch.ga.gov by **Thursday, February 20, 2020 at 3:00PM**. Responses to questions will be posted on the **DCH** website at www.dch.georgia.gov/grant-announcements, **SFY20 Grant Announcements** on **Thursday, February 27, 2020**.

Deadline for Submission of Applications

APPLICATIONS MUST BE RECEIVED BY Monday, April 13, 2020, by 3:00pm.

In addition, the following factors may affect the funding decisions:

**Availability of funds
Relevance to program priorities**

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B. SUBMISSION FORMAT

The application **MUST** be submitted in the following format or the application will be considered non-responsive and will not be submitted for the review process:

1. Microsoft Word 2016 or older version.
2. Font Size: 12 point unreduced (Arial or Times New Roman).
3. Page Size: 8.5 by 11 inches.
4. Page Margin Size: One inch.
5. **Project Abstract** should be double spaced and shall not exceed 1 page.
6. **Project Narrative:**
 - a. The Project Narrative should be double spaced.
 - b. The Project Narrative shall not exceed a maximum of 8 pages.
7. **Organizational Narrative:**
 - a. The Organizational Narrative should be double spaced.
 - b. The Organizational Narrative shall not exceed a maximum of 2 pages.
8. **Budget Worksheet and Budget Justification:**
 - a. The Budget Worksheet must be completed on Appendix E and in Microsoft Excel 2016 or older version.
 - b. The Budget Justification is limited to a maximum of 1 page. The spacing should be doubled spaced.
9. **Number and Label** all pages; not to exceed the maximum number of pages where applicable
10. **Headers** should identify each section and **Footers** should include: the name of the organization and page numbers.

VII. REQUIRED SELECTION CRITERIA

Upon successful completion of the application review, an evaluation committee will convene to evaluate the merits of each proposal. The top five highest Applicant scores will be awarded funding. The proposal will be evaluated based upon the Applicants that meet the threshold of 850 points to include the following:

A. PROJECT ABSTRACT (50 PTS)

A Project Abstract is required for all applications. The Project Abstract must contain a summary of the proposed activity suitable for dissemination to the public. It should contain a description of the project and a statement of objectives and methods to be implemented and sustained to achieve grant project goals. This abstract must not include any proprietary/confidential information.

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B. PROJECT NARRATIVE (850 PTS)

The Project Narrative should provide a comprehensive framework of all aspects of the ED Upgrade for Behavioral Health Patients proposal and describe how each component of the proposal will be carried out. It should be succinct, self-explanatory, and well organized. The Project Narrative must include the following components:

Introduction (50PTS)

Briefly describe the purpose of the proposed project, and how the ED Upgrades will benefit your rural community and behavioral health patients.

Administrative Support (150PTS)

Provide affirmation of administrative commitment for the program to include a formal letter of support containing signatures of executive level leadership, such as Chief Executive Officer, Chief Financial Officer, Chief Medical Officer, Chief Nursing Officer, and Hospital Board Members.

Emergency Department Unit Staffing Plan (150PTS)

Describe the current emergency department capacity and staffing plan, and provide an overview of any additional staff, continuing education programs, oversight, etc., that will be added as part of the ED Upgrade project.

Project Details and Implementation Plan (300PTS)

This component should clearly describe the Applicant's project plan of action to mitigate ligature risk in the emergency department in accordance with the Interpretive Guidelines for Action of CMS Conditions of Participation (42 C.F.R.§482.13 (c)(2)), which establishes the rights of all patients to receive care in a safe setting providing protection for the patient's emotional health and safety as well as his or her physical safety. Action plans may include but are not limited, to methods used to identify patients who are at risk for harming themselves or others, identifying environmental safety risks for such patients, provision of environmental safety education and training for employees (those directly employed and those providing services under contract) and volunteers. Respect, dignity, and comfort are also components of an emotionally safe environment. The care and safety of psychiatric patients at risk of harm to themselves or others, and the staff providing care should be the primary focus of the project.

Funding and Sustainability (200PTS)

Describe how funding will be utilized for the ED Upgrade project identifying the source(es) of non-grant funded or matching contributions to support both start up and subsequent years of sustainability for a period of *no less than* three years.

C. ORGANIZATIONAL NARRATIVE (50 PTS)

The Applicant will provide:

1. A brief history of the hospital, major accomplishments, any relevant experience and established relationships that may be important to carrying out the requirements of the grant.
2. Information on the individual who will serve as the project director (or interim) and who will be responsible for project monitoring and ensuring the Grant activities are carried out.

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3. An organizational chart that illustrates the hierarchy of roles and responsibilities of the hospital as it pertains to the staff/team affiliated with the Grant project.

D. BUDGET WORKSHEET AND BUDGET JUSTIFICATION (50 PTS)

1. All anticipated expenses and funding sources directly related to this project, including in-kind contributions should be calculated and included on the Budget Worksheet (Appendix D).
2. A concise narrative labeled Budget Justification must follow the Budget Worksheet. The Budget worksheet and budget forms will not be counted toward the narrative page limit. Describe the financial resources needed over the duration of the project period and include the matching fund amount requested for this Grant as well as funds from other sources, including organizations, institutions, etc. Describe any in-kind sources of support.
3. Indirect cost - Indirect costs represent the expenses of doing business that are not readily identified within the budget submission (Appendix D). Indirect costs are necessary for the general operation of the organization and the facilitation of the activities required by the Grant. For the purpose of providing the most efficient and effective use of Grant dollars, DCH limits the application of indirect costs to 10% percent.

VIII. APPENDICES

All appendices are required. Some appendices include a Signature Page(s). Carefully read, sign, and adhere to these forms prior to responding to any parts of the Department of Community Health Request for Grant Applications (RFGA). Failure to do so could result in the disqualification of your application at any time during the application process. Included Appendices are as follows:

- A. DCH Grant Application Form;
- B. Statement of Ethics (*Signature Page must be submitted*);
- C. Ethics in Procurement Policy (*Signature Page must be submitted*);
- D. Budget Worksheet (*Budget Justification **MUST** accompany this appendix*);
- E. Project Work Plan Template; and
- F. Project Timeline Template.

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APPENDIX A

DCH GRANT APPLICATION FORM

GEORGIA DEPARTMENT OF COMMUNITY HEALTH STATE OFFICE OF RURAL HEALTH DCH GRANT APPLICATION FORM Please provide complete contact information for a minimum of three (3) officers within the organization. Mailing Address <u>MAY NOT</u> be a post office box.			
Name of Grant: ED UPGRADE GRANT			
Applicant Organization:			
Legal Name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Federal ID Number:		State Tax ID Number	
DIRECTOR OF APPLICANT ORGANIZATION			
Name/Title			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
FISCAL MANAGEMENT OFFICER OF APPLICANT ORGANIZATION			
Name/Title			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
OPERATING ORGANIZATION (If Different from Applicant's Organization)			
Name/Title:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
CONTACT PERSON FOR OPERATING ORGANIZATION (If Different from Director of Applicant's Organization)			
Name/Title:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
CONTACT PERSON FOR FURTHER INFORMATION ON APPLICATION (If Different from Contact Person for Operating Organization)			
Name/Title:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	

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GEORGIA DEPARTMENT OF COMMUNITY HEALTH STATE OFFICE OF RURAL HEALTH DCH GRANT APPLICATION FORM <i>Please provide complete contact information of three (3) offices within the organization Mailing address MAY NOT be a post office box.</i>		
Amount Requested:	Type of Organization: <input type="checkbox"/> Hospital	
I CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND THAT I HAVE SUBMITTED THIS APPLICATION ON BEHALF OF THE APPLICANT'S ORGANIZATION.		
SIGNATURE:	TITLE:	DATE:

APPENDIX B

STATEMENT OF ETHICS

PREAMBLE

The Department of Community Health has embraced a mission to improve the health of all Georgians through health benefits, systems development, and education. In accomplishing this mission, DCH employees must work diligently and conscientiously to support the goals of improving health care delivery and health outcomes of the people we serve, empowering health care consumers to make the best decisions about their health and health care coverage and ensuring the stability and continued availability of health care programs for the future. Ultimately, the mission and goals of the organization hinge on each employee's commitment to strong business and personal ethics. This Statement of Ethics requires that each employee:

- Promote fairness, equality, and impartiality in providing services to clients
- Safeguard and protect the privacy and confidentiality of clients' health information, in keeping with the public trust and mandates of law
- Treat clients and co-workers with respect, compassion, and dignity
- Demonstrate diligence, competence, and integrity in the performance of assigned duties
- Commit to the fulfillment of the organizational mission, goals, and objectives
- Be responsible for employee conduct and report ethics violations to the DCH Inspector General and to the DCH Ethics Officer
- Engage in carrying out DCH's mission in a professional manner
- Foster an environment that motivates DCH employees and vendors to comply with the Statement of Ethics
- Comply with the Code of Ethics set forth in O.C.G.A. Section 45-10-1 et seq.

Not only should DCH employees comply with this Statement of Ethics, but DCH expects that each vendor, contractor, and subcontractor will abide by the same requirements and guidelines delineated. Moreover, it is important that employees and members of any advisory committee or commission of DCH acknowledge the Statement of Ethics.

Ethical Guidelines

1. Code of Conduct

All employees of DCH are expected to maintain and exercise at all times the highest moral and ethical standards in carrying out their responsibilities and functions. Employees must conduct themselves in a manner that prevents all forms of impropriety, including placement of self-interest above public interest, partiality, prejudice, threats, favoritism and undue influence. There will be no reprisal or retaliation against any employee for questioning or reporting possible ethical issues.

2. Equal Employment

The Department is committed to maintaining a diverse workforce and embraces a personnel management program which affords equal opportunities for employment and advancement based on objective criteria. DCH will provide recruitment, hiring, training, promotion, and other conditions of employment without regard to race, color, age, sex, religion, disability, nationality, origin, pregnancy, or other protected bases. The Department expects employees to support its commitment to equal employment. The failure of any employee to comply with the equal employment requirements provided in DCH Policy #21 may result in disciplinary action, up to and including termination.

3. Harassment

DCH will foster a work environment free of harassment and will not tolerate harassment based on sex (with or without sexual conduct), race, color, religion, national origin, age, disability, protected activity (*i.e.*, opposition to prohibited discrimination or participation in a complaint process) or other protected bases from *anyone* in the workplace: supervisors, co-workers, or vendors. The Department strongly urges employees to report to the Human Resources Section any incident in which he or she is subject to harassment. Additionally, any employee who witnesses another employee being subjected to harassment should report the incident to the Human Resources Section. If DCH determines that an employee has engaged in harassment, the employee shall be subject to disciplinary action, up to and including termination, depending on the severity of the offense.

4. Appropriate Use of DCH Property

Employees should only use DCH property and facilities for DCH business and not for any type of personal gain. The use of DCH property and facilities, other than that prescribed by departmental policy, is not allowed. Furthermore, the use of DCH property and facilities for any purpose which is unlawful under the laws of the United States, or any state thereof, is strictly prohibited. Employees who divert state property or resources for personal gain will be required to reimburse the Department and will be subject to the appropriate disciplinary action, up to and including, termination.

5. Secure Workplace

DCH is committed to maintaining a safe, healthy work environment for its employees. Accordingly, it is DCH's expectation that employees refrain from being under the influence of alcohol or drugs in the workplace because such conduct poses a threat to the employee, as well as others present in the workplace. Additionally, DCH has a zero-tolerance policy regarding violence in the workplace. Specifically, DCH will not condone the threat of, or actual assault or attack upon, a client, vendor, or other employee. If an employee engages in violent behavior which results in an assault of another person, he or she will be immediately terminated.

6. Political Activities

Although the DCH recognizes that employees may have an interest in participating in political activities and desires to preserve employees' rights in participating in the political process, employees must be aware of certain allowances and prohibitions associated with particular political activities. DCH encourages employees to familiarize themselves with DCH Policy #416 to gain understanding about those instances when a political activity is disallowed and/or approval of such activity is warranted.

7. Confidentiality

DCH has a dual mandate in terms of confidentiality and privacy. Foremost, as a state agency, DCH must comply with the Georgia Open Records Act and Open Meetings Act. The general rule that is captured by those laws is that all business of the agency is open to the public view upon request. The exceptions to the general rule are found in various federal and state laws. In order to protect the individuals' health information that is vital to the delivery of and payment for health care services, DCH sets high standards of staff conduct related to confidentiality and privacy. Those standards are reinforced through continuous workforce training, vendor contract provisions, policies and procedures, and web-based resources.

8. Conflicts of Interest

Employees should always strive to avoid situations which constitute a conflict of interest or lend to the perception that a conflict of interest exists. Specifically, employees must avoid engaging in any business with the DCH which results in personal financial gain. Similarly, employees must encourage family members to avoid similar transactions since they are subject to the same restrictions as employees. DCH encourages its employees to seek guidance from the Office of General Counsel regarding questions on conflicts of interest.

9. Gifts

Employees are strictly prohibited from individually accepting gifts from any person with whom the employee interacts on official state business. Gifts include, but are not limited to, money, services, loans, travel, meals, charitable donations, refreshments, hospitality, promises, discounts or forbearance that are not generally available to members of the public. Any such item received must be returned to the sender with an explanation of DCH's Ethics Policy.

10. Relationships with Vendors and Lobbyists

DCH values vendors who possess high business ethics and a strong commitment to quality and value. Business success can only be achieved when those involved behave honestly and responsibly. Therefore, it is critical that employees ensure that vendors contracting with DCH are fully informed of DCH policies concerning their relationships with DCH employees and that these policies be uniformly applied to all vendors. Among other requirements, DCH expects that each vendor will honor the terms and conditions of its contracts and agreements. If DCH determines that a vendor has violated the terms and conditions of a contract or agreement, the vendor shall be held responsible for its actions.

Employees must ensure that fair and open competition exists in all procurement activities and contracting relationships in order to avoid the appearance of and prevent the opportunity for favoritism. DCH strives to inspire public confidence that contracts are awarded equitably and economically. DCH will apply the state procurement rules, guidelines, and policies. Open and competitive bidding and contracting will be the rule.

DCH recognizes that lobbyists, both regulatory and legislative, may from time to time seek to meet with DCH employees to advance a particular interest. DCH recognizes that employees may have personal opinions, even those that may be contrary to a position that DCH has adopted. DCH employees, however, must recognize that the public, including legislators and lobbyists, may have difficulty differentiating between the official DCH position and a personal opinion. Accordingly, employees should always work directly with the Director of Legislative Affairs in preparing any responses to requests or questions from elected officials and their staff or lobbyists.

11. Mandatory Reporting

If I have knowledge of any ethics violation, I am aware that I am responsible for reporting such violation to the DCH Inspector General and the DCH Ethics Officer. My good faith reports will be free from retaliation. If I am a supervisor, I am aware that I am responsible for reporting such violation and for forwarding any such report from a member of my staff to the DCH Inspector General and the DCH Ethics Officer. As a supervisor, I am additionally responsible for ensuring that the employees who report to me are aware of and comply with the ethical standards and policies that are applicable to their positions.

ACKNOWLEDGEMENT OF STATEMENT OF ETHICS

BY SIGNING THIS AGREEMENT, I THE UNDERSIGNED, HEREBY ACKNOWLEDGE THAT:

- I have received, read, and understand the Georgia Department of Community Health *Statement of Ethics*;
- I agree to comply with each provision of the Georgia Department of Community Health *Statement of Ethics*;
- I am a: GRANTEE
 SUBGRANTEE

Authorized Signature*

Date

Print Name

Title

*Must be President, Vice President, CEO or Other Authorized Officer

ETHICS IN PROCUREMENT POLICY

I. THE COMMITMENT

The Department is committed to a procurement process that fosters fair and open competition, is conducted under the highest ethical standards, is fully compliant with all legal authority, and has the complete confidence and trust of the public it serves. To achieve these important public purposes, it is critical that current vendors and those making proposals to provide goods or services to the Department, as well as employees of the Department, members of the Board of Community Health, and independent contractors, consultants and temporary staffing agency employees currently on an assignment with DCH, have a clear understanding and an appreciation of, the DCH Ethics in Procurement Policy (the “Policy”).

II. SCOPE

This Policy is applicable to all Vendors and DCH Workers, as those terms are defined below.

III. ETHICAL PROCUREMENT STANDARDS

In order to maintain an ethical procurement process, DCH Workers and Vendors must act in accordance with the following standards:

A. Fulfilling Legitimate Business Needs

The procurement of goods and services will be limited to those necessary to accomplish the mission, goals, and objectives of the Department.

B. Identifying and Resolving Conflicts of Interest

Conflicts of interest shall be promptly identified and resolved early in the Procurement process. A “conflict of interest” exists when an individual possesses personal, financial or professional interests that compete, conflict or otherwise interfere with the individual’s actual or perceived ability to act in the best interests of the Department or carry out that individual’s duties in an impartial manner. A conflict of interest situation can arise when an individual takes actions or has interests that may make it difficult to perform his or her work objectively and effectively. Conflicts of interest also arise when an individual, or a family member of that individual, receives personal benefits as a result of the individual’s action, decision, or disclosure of Confidential Information in a Procurement.

C. Avoiding the Appearance of Impropriety

DCH Workers must take care to avoid any appearance of impropriety and must promptly disclose to their supervisors any material transaction or relationship that reasonably could

be expected to give rise to a conflict of interest. Similarly, anyone engaged in a business relationship with the Department should avoid any appearances of impropriety.

D. Maintaining Impartiality

DCH Workers must maintain an impartial, arms' length relationship with anyone seeking to influence the outcome of a Procurement.

E. Declining Gifts

DCH Workers are prohibited at all times from soliciting, demanding, accepting, or agreeing to accept Gifts from Vendors, including Gifts from consultants, independent contractors or temporary staffing agency employees currently on assignment with DCH.

F. Avoiding Misrepresentations

DCH Workers and Vendors may not knowingly falsify, conceal or misrepresent material facts concerning a Procurement.

G. Obtaining Sufficient Authorization

DCH Workers may not obligate the Department without having received prior authorization from an approved official. Engaging in such activity is a misrepresentation of authority. DCH Workers who are consultants, independent contractors or temporary staffing agency employees shall not represent themselves as having the authority of a DCH employee.

H. Reporting Possible Conflicts of Interests

DCH Workers and Vendors involved in Procurements must promptly report possible conflicts of interests to DCH in accordance with Section V "General Requirements" of the Policy.

A DCH Worker's failure to act in accordance with these standards, or failure to follow the guidelines set forth herein shall be grounds for disciplinary action, up to and including, termination of the working relationship with DCH. Similarly, a Vendor's failure to comply with this Policy will result in appropriate action as determined by governing state and/or federal law, rules and regulations, and other applicable Department policies and procedures.

IV. DEFINITIONS

For purposes of this policy:

"Affiliate Vendor Team" shall include, but not be limited to, owners, employees, directors, officers, contractors, and consultants of a Vendor that directly or indirectly assist the Vendor in the preparation of response to a Procurement. For individual consultants, independent contractors and temporary staffing agency workers, the "Affiliate Vendor Team" includes the owners, employees, directors, officers, contractors and consultants of the company for whom the individual consultant, independent contractor or temporary staffing agency worker works.

“Confidential Information” shall mean all information not subject to disclosure pursuant to the Open Records Act, O.C.G.A. §50-18-70 et seq. For all Procurements governed by the State Purchasing Act, O.C.G.A. §50-5-50 et seq., “Confidential Information” shall also include records related to the competitive bidding and proposal process which, if disclosed prior to the issuance of the public notice of intent to award would undermine the public purpose of obtaining the best value for the Department. Such records include, but are not limited to, cost estimates, bids, proposals, evaluation criteria, evaluations of Vendors’ bids/proposals, negotiation documents, offers and counter-offers, and records revealing preparation for the Procurement.

“DCH” and “Department” shall mean the Georgia Department of Community Health.

“DCH Worker” shall mean any person who works for the Department as an employee or as an independent contractor, consultant or temporary staffing agency employee on assignment with the Department, as well as members of the Board of Community Health.

“DOAS” shall mean the Georgia Department of Administrative Services.

“Evaluation Team” shall mean a designated group of DCH Workers who review, assess, and score documents submitted to the Department in response to a Procurement Solicitation. An Evaluation Team for a Staffing Recruitment includes the individuals responsible for reviewing resumes submitted in response to the Staffing Recruitment Solicitation, interviewing prospective staffing agency workers, and approving the selection of the individuals.

“Family Member” shall mean a spouse, adult living in the household of the DCH worker, and relatives of the DCH Worker, his or her spouse, or an adult living in the household of the DCH Worker. Relatives include the following: parent/stepparent, grandparent, child, grandchild, brother (full, half, step), sister (full, half, step), uncle, aunt, nephew, niece, and first cousin.

“Financial Interest” shall mean an ownership interest in assets or stocks of the Vendor, current employment with the Vendor, or prospective employment with the Vendor. “Financial Interest” does not include an ownership interest in a Vendor that is part of a widely held investment fund (such as a mutual fund, regulated investment company, common trust fund maintained by a bank or similar financial institution, pension or deferred compensation plan, or any other investment fund), if the individual has no ability to control the financial interests held by the fund AND (A) The fund is publicly traded or available; or (B) The assets of the fund are widely diversified, meaning it holds no more than 5% of the value of its portfolio in the securities of any one issuer, other than the U.S. Government, and no more than 20% in any particular economic or geographic sector.

“Gifts” shall mean anything of value, including but not limited to the following: goods, money, advances, personal services, entertainment, lodging, parking, real property or the use thereof, commissions, promises of future employment, stocks, bonds, notes or other investment interests in an entity, rights of action, intellectual property, gratuities, loans, extensions of credit, forgiveness

of debts, memberships, subscriptions, travel or means of personal transportation, meals, tickets to events, charitable donations, refreshments, hospitality, and promises, discounts or forbearance that are not generally available to members of the public. A Gift need not be intended to influence or reward a DCH Worker.

“Issuing Officer” shall mean the Procurement Professional designated in the Procurement Solicitation to be the Vendor’s only point of contact with the Department following the public advertisement of the Procurement Solicitation until such time as the results of the Procurement Solicitation are publicly announced or the Procurement Solicitation is cancelled. The Issuing Officer is responsible for managing all communication during this time period, including, but not limited to, answering Vendors’ questions, contacting Vendors for clarification requests, negotiations, and contract discussions.

“Kickback” shall mean compensation of any kind directly or indirectly accepted by a DCH Worker from or on behalf of a Vendor seeking/competing for or doing business with the Department, for the purpose of influencing the award of a contract or the manner in which the Department conducts its business. Kickbacks include, but are not limited to, money, fees, gifts, employment opportunities for a DCH Worker or Family Member, commissions or credits. DCH Workers who are employed by a Vendor, such as consultants, independent contractors and temporary staffing agency workers, may receive payment from the Vendor associated with the work performed on a DCH assignment. However, any payment received by the consultant, independent contractor or staffing agency worker as a result of another DCH Worker’s services for the Department may be a prohibited kickback. For example, a consultant who owns a consulting company may receive compensation for his or her work on an assignment with DCH. However, if he or she employs an individual who then becomes a consultant for DCH, any mark-up or payment received as a result of the employee’s services for DCH shall be disclosed for evaluation by DCH and may be considered a kickback.

“Procurement” shall mean buying, purchasing, renting, leasing, or otherwise acquiring any supplies, services, or construction. The term also includes all activities that pertain to obtaining any supply, service, or construction, including description of requirements, selection and solicitation of sources, preparation and award of contract, as well as the disposition of any Protest. A Procurement is not limited to, but specifically includes, procurements which are either exempt or non-exempt either by statute or under DOAS rules, a procurement of professional services, a Staffing Recruitment and procurements under any other approved procurement vehicle.

“Procurement Manual” shall mean the most current version of the Georgia Procurement Manual released by DOAS.

“Procurement Professional” shall mean the Department’s Office of Procurement Services (OPS) staff member assigned to and responsible for managing the Procurement process, including, but not limited to, needs identification and fact-finding, market research, requests for information, development of requirements and specifications, determination of the Procurement strategy and management of the Procurement solicitation, evaluations and awards. The Procurement

Professional is charged with adhering to the highest ethical standards and ensuring that Procurements are executed in a fair and impartial manner, consistent with applicable laws, rules and regulations, which may include the Georgia Procurement Manual (GPM), the Georgia State Purchasing Act and Department procurement policies.

“Procurement Solicitation” shall mean the Department’s solicitation of offers from Vendors for the needed supplies, services or construction. Procurement Solicitation shall include, but not be limited to, requests for quotes, requests for qualified contractors, requests for proposals, requests for approvals, requests for pre-qualifications, reverse auctions and any other approved solicitation method.

“Prohibited Contact” applies only to a Procurement subject to DOAS rules and refers to a Vendor’s contact with DCH Workers other than through the Issuing Officer after the public advertisement of a Procurement Solicitation and until such time as the results of the Procurement Solicitation are publicly announced or the Procurement Solicitation is cancelled. During that time period, “Prohibited Contact” shall mean contact with any DCH Worker, other than the Issuing Officer, whereby it could be reasonably inferred that such contact was intended to influence, or could reasonably be expected to influence, the outcome of a Procurement Solicitation. This prohibition includes, without limitation, personal meetings, meals, entertainment functions, telephonic communications, letters, faxes and e-mails, as well as any other activity that exposes the DCH Worker to direct contact with a Vendor. This prohibition does not include contacts with DCH Workers for the purpose of discussing existing on-going Department work which is unrelated to the subject of the Procurement Solicitation or existing consulting assignments. Inquiries regarding the status of a Procurement should always be directed to the Issuing Officer.

“Protest” shall mean a written objection by an interested party to Procurement Solicitation, or to a proposed award or award of a contract, with the intention of receiving a remedial result.

“Protestor” shall mean an actual bidder/offeror who is aggrieved in connection with a Procurement Solicitation or intended or actual contract award and who files a Protest.

“Requirements Team” shall mean a designated group of DCH Workers who develop a Procurement Solicitation. A Requirements Team for the selection of professional services, consultant or temporary staffing agency employee includes the individuals responsible for drafting the request for such professional, consultant or staffer and approving the posting of the request. A DCH Worker is not a member of a Requirements Team simply because he or she identifies potential Vendors or meets with potential Vendors or current Vendors to discuss Departmental needs and review relevant information. A Requirements Team is formed once it is determined that a Procurement Solicitation or request for services is necessary to meet a Departmental need.

“Staffing Recruitment” shall mean a Procurement for the specific purpose of selecting temporary staffing agency employees in accordance with DOAS statewide contracts.

“Staffing Recruitment Professional” shall mean the Department’s Office of Human Resources staff member assigned to and responsible for managing the Staffing Recruitment process. The Staffing

Recruitment Professional is charged with adhering to the highest ethical standards and ensuring that Staffing Recruitments are executed in a fair and impartial manner, consistent with applicable laws, rules and regulations.

“Staffing Recruitment Solicitation” shall mean a Procurement Solicitation for the specific purpose soliciting offers as part of a Staffing Recruitment.

“Vendor” shall mean any individual or entity seeking to do business or doing business with the Department, including, without limitation, contractors, professionals, consultants, suppliers, manufacturers seeking to act as the primary contracting party, officers and employees of the foregoing, any subcontractors, sub consultants and sub suppliers at all lower tiers, as well as any person or entity engaged by the Department to provide a good or service. A professional, consultant or temporary staffing agency and its employee who desires to be placed on an assignment with DCH is a Vendor. Once selected, the professional, consultant or temporary staffing agency employee remains a Vendor, but is also a DCH Worker.

V. General Requirements

A. Responsibilities of Procurement Professionals, Staffing Recruitment Professionals and DCH Workers who are on a Requirements Team or Evaluation Team

1. Procurement Professionals and Staffing Recruitment Professionals must ensure that DCH Workers participating in any Procurement activities have sufficient understanding of the Procurement and evaluation process and the applicable DCH and DOAS rules and regulations and policies associated with the processes.
2. Requirements Team members are tasked with developing standards of work, Procurement Solicitations and related documents in an objective and impartial manner. Typically, a Procurement Professional or Staffing Recruitment Professional facilitates the activities of a Requirements Team and a designated DCH Worker who is a Requirements Team member serves as the Head of the Requirements Team. Often, Requirements Team members are uniquely qualified to develop this material because of their experience with the industry. This experience may have been gained through employment or performance of services with Vendors. These Requirements Team members also maintain professional relationships that enable them to gather valuable information about current products and services. While participating on the Requirements Team, it is essential that Requirements Team members use their experiences and contacts solely to benefit the Department. They must place aside any personal and/or professional biases or prejudices that may exist when developing standards of work, Procurement Solicitations and related documents. A DCH Worker serving on a Requirements Team must not allow the DCH Worker’s or Family Member’s personal or professional relationships (e.g., friendships, dating, prior or current employment) with employees, principals, directors, officers, etc. of a Vendor or individuals on the Affiliate Vendor Team to interfere with the ability to prepare these

Procurement Solicitations fairly and objectively in the interests of the Department. Such relationships may give rise to the appearance of, and/or create an actual conflict of interest and must be promptly disclosed in writing to the designated Procurement Professional or Staffing Recruitment Professional and the Head of the Requirements Team prior to the DCH Worker's participation on the Requirements Team using the Attestation Form attached as Exhibit A to this Policy (or Exhibit C to this Policy for a Staffing Recruitment), or a similar form provided by the Ethics Officer.

3. The designated Procurement Professional or Staffing Recruitment Professional shall consult with the Ethics Officer before making a determination as to whether a DCH Worker who has made any written disclosures on the Attestation Form or for whom there is a potential conflict of interest is permitted to participate on the Requirements Team. The Ethics Officer will make a determination as to whether an actual conflict or appearance of a conflict exists and will notify the designated Procurement Professional or Staffing Recruitment Professional and the Head of the Requirements Team. The Ethics Officer may recommend actions that are necessary to assure the objectivity and fairness of the Procurement Solicitation and to prevent the appearance of a conflict of interest. If an actual conflict or appearance of conflict exists, it is the responsibility of the designated Procurement Professional or Staffing Recruitment Professional to exclude the individual from the Requirements Team or prepare a written description of the actions that will be taken to "cure" the conflict and assure the objectivity and fairness of the Procurement Solicitation. The designated Procurement Professional or Staffing Recruitment Professional shall maintain this written description of actions and ensure compliance with its terms. In some cases, disclosure of the conflict may be sufficient to "cure" the conflict.
4. Evaluation Team members are tasked with conducting objective, impartial evaluations, and, therefore, must place aside any personal and/or professional biases or prejudices that may exist. A DCH Worker serving on an Evaluation Team must not allow the DCH Worker's or DCH Worker's Family Member's personal or professional relationships (i.e. friendships, dating, prior or current employment) with employees, principals, directors, officers, etc. of a Vendor or individuals on the Affiliate Vendor Team to interfere with the rendering of fair and objective determinations. Such relationships may give rise to the appearance of, and/or create an actual conflict of interest and must be promptly disclosed in writing to the designated Procurement Professional or Staffing Recruitment Professional and the Head of the Evaluation Team prior to the Worker's participation on the Evaluation Team using the Attestation Form attached as Exhibit B to this Policy (or Exhibit C to this Policy for a Staffing Recruitment), or a similar form provided by the Ethics Officer.
5. The designated Procurement Professional or Staffing Recruitment Professional shall consult with the Ethics Officer before making a determination as to whether a DCH Worker who has made any written disclosures on the Attestation Form or for whom there is a potential conflict of interest is permitted to participate on the Evaluation Team. The

Ethics Officer will make a determination as to whether an actual conflict or appearance of a conflict exists and will notify the designated Procurement Professional or Staffing Recruitment Professional and the Head of the Evaluation Team. The Ethics Officer may recommend actions that are necessary to assure the objectivity and fairness of the Evaluation and to prevent the appearance of a conflict of interest. If an actual conflict or appearance of conflict exists, it is the responsibility of the designated Procurement Professional or Staffing Recruitment Professional to exclude the individual from the Evaluation Team or prepare a written description of the actions that will be taken to “cure” the conflict and assure the objectivity and fairness of the Evaluation. The designated Procurement Professional or Staffing Recruitment Professional shall maintain this written description of actions and ensure compliance with its terms. In some cases, disclosure of the conflict may be sufficient to “cure” the conflict.

6. In the event that the Department determines that a conflict of interest does exist and a DCH Worker on a Requirements Team or Evaluation Team failed to make the appropriate disclosure, the Department will evaluate whether the conflict is of sufficient magnitude to disqualify the DCH Worker from further participation on the Requirements Team and/or the Evaluation Team. Furthermore, in the event that the Department determines that the conflict of interest did negatively impact the final Procurement Solicitation or the outcome of a Procurement, such DCH Worker may be subject to disciplinary action, up to and including termination of employment.
7. In the event the Department becomes aware that a DCH Worker maintains a relationship of any sort that may be a conflict of interest or may have the appearance of a conflict of interest with respect to a Procurement, the designated Procurement Professional or Staffing Recruitment Professional shall consult with the Ethics Officer, after which the Ethics Officer will make a determination as to whether an actual conflict or appearance of a conflict exists. Based on that determination and the impact of the conflict or the appearance of a conflict, the Ethics Officer may recommend actions that are necessary to cure the conflict or the appearance of a conflict. If an actual or appearance of a conflict exists, it is the responsibility of the designated Procurement Professional or Staffing Recruitment Professional to take appropriate action, up to and including the disallowance of the DCH Worker’s participation in any Procurement activities.
8. Prior to participating on a Requirements Team or an Evaluation Team, each DCH Worker (including the Head of the Requirements Team and Head of the Evaluation Team) and the designated Procurement Professional or Staffing Recruitment Professional must execute the appropriate Attestation Form in Exhibit A or B to this Policy (or Exhibit C to this Policy for a Staffing Recruitment).

B. *Responsibilities of DCH Workers who are not on a Requirements Team or Evaluation Team*

All DCH Workers should be mindful of the importance of confidentiality during any Procurement. Even if a DCH Worker is not serving in the capacity of a member on the Evaluation Team or Requirements Team, all DCH Workers must refrain from engaging in conduct with a Vendor that could result in a conflict of interest or be considered a Prohibited Contact.

C. *Responsibilities of DCH Workers who are also Vendors*

A DCH Worker who is a consultant or temporary staffing agency employee on an assignment with DCH is also a Vendor. Consultants or temporary staffing agency employees shall provide professional, objective and impartial advice and services, and at all times hold the Department's interest's paramount, without any consideration for future work for themselves or members of the Vendor Affiliate Team. In addition to the general obligations of a DCH Worker and Vendor, such individuals shall do the following in order for the Department to identify potential or perceived conflicts of interest that may impact procurements:

1. Disclose to the supervising DCH employee and Director of Human Resources every current and former employer.
2. Disclose to the supervising DCH employee and Director of Human Resources the name of every current DCH Worker with whom the individual or the individual's Family Member has a current or pre-existing personal or professional relationship.
3. Disclose to the supervising DCH employee and Director of Human Resources any project for another client that may give rise to an actual or perceived conflict of interest.
4. Appropriately identify him or herself as an employee of the entity that actually pays his or her compensation and state that he or she is on a contract assignment with DCH.
5. Ensure that he or she only performs work that is within the scope of the current assignment.
6. Coordinate with the supervising DCH employee to ensure that his or her level of access to Confidential Information is limited to the scope of the current assignment.

D. *DOAS rules applicable*

DOAS rules and regulations may apply to a Procurement, which DOAS rules and regulations may also be applicable to conflicts of interest and may be more restrictive than the provisions of this Policy. It is the responsibility of all DCH Workers to comply with DOAS rules and regulations, when applicable.

VI. VENDOR RESPONSIBILITIES

A. *Gifts and Kickbacks*

Vendors may neither offer nor give any Gift or Kickbacks, directly or indirectly, to a DCH Worker. Similarly, no Vendor may offer or give any Gift or Kickbacks, directly or indirectly, to any member of a DCH Worker's Family. Such prohibited activity may result in the termination of the contract, in those cases where the Vendor has executed a contract with the Department. In the event that a potential Vendor who has submitted a response to a Procurement Solicitation engages in such activity, the Department shall act in accordance with DOAS protocol.

B. *Family Relationships with DCH Workers*

If a Vendor has a family or personal relationship with a DCH Worker, a Gift that is unconnected with the DCH Worker's duties at the DCH is not necessarily prohibited. In determining whether the giving of an item was motivated by personal rather than business concerns, the history of the relationship between the Vendor and DCH Worker shall be considered. However, regardless of the family or personal relationship between a Vendor and a DCH Worker, a Gift is strictly forbidden where it is being given under circumstances where it can reasonably be inferred that it was intended to influence the DCH Worker in the performance of his or her official duties.

C. *Vendor Submittals*

The Department expects all Vendors to be forthcoming, always submitting true and accurate information in response to a Procurement Solicitation or with regard to an existing business relationship. If the Department determines that the Vendor has intentionally omitted or failed to provide pertinent information and/or falsified or misrepresented material information submitted to the Department, the Department shall act in accordance with applicable state law and DOAS procurement policies and procedures.

Vendors must calculate the price(s) contained in any bid in accordance with the Georgia Procurement Manual.

D. *Business Relations*

A Vendor may not be allowed to conduct business with the Department for the following reasons:

1. Falsifying or misrepresenting any material information to the Department as set forth hereinabove;
2. Conferring or offering to confer upon a DCH Worker participating in a Procurement (which the entity has bid or intends to submit a bid) any Gift, gratuity, favor, or advantage, present or future; and
3. Any other reasons not explicitly set forth herein that are contained in the Georgia Procurement Manual or applicable Department policy.

E. *Prohibited Contact*

The Vendor is precluded from engaging in Prohibited Contact upon the release of a Procurement Solicitation or posting of a request for consulting or temporary staffing services, during the evaluation process, and any time prior to the Department's public announcement of the results of the Procurement Solicitation, filling of the temporary position, or the Department's cancellation of the Procurement Solicitation.

VII. USE OF CONFIDENTIAL INFORMATION

DCH Workers will not use Confidential Information for their own advantage or profit, nor will they disclose Confidential Information to any potential Vendor or to any unauthorized recipient. DCH Workers will comply with all confidentiality requirements set forth in DCH policies and applicable law.

VIII. ADDRESSING VIOLATIONS

A. *The Process*

All DCH Workers are responsible for bringing violations to the attention of the Issuing Officer under the Procurement protocols, the Procurement Professional or the Staffing Recruitment Professional or to a supervisor/manager if the affected DCH Worker is not a part of the Procurement. The supervisor/manager and/or the designated Procurement Professional or Staffing Recruitment Professional shall promptly report such violation to the Ethics Officer. If for any reason it is not appropriate to report a violation to the DCH Worker's immediate supervisor or the designated Procurement Professional or Staffing Recruitment Professional, DCH Workers will report such violations or concerns to the Ethics Officer or the Office of Inspector General. Procurement Professionals, Staffing Recruitment Professionals and managers are required to report suspected ethics violations to the Ethics Officer and the Office of Inspector General, who have specific responsibility for investigating all reported violations.

Confirmed violations will result in appropriate disciplinary action, up to and including termination from employment. In some circumstances, criminal and civil penalties may be applicable.

The Ethics Officer or Inspector General will notify the DCH Worker making the report of the suspected violation of receipt of such report. All reports will be promptly investigated, and appropriate corrective action will be taken if warranted by the investigation.

B. *Good Faith Filings*

Anyone filing a complaint concerning a violation of this Policy must be acting in good faith and have reasonable grounds for believing the information disclosed indicates a violation. Good faith reporting of suspected policy violations by others shall not jeopardize a DCH Worker's employment with the Department. However, any allegations that prove not to be substantiated and which prove to have been made maliciously or knowingly to be false will be viewed as a serious disciplinary offense.

C. *Confidentiality*

Violations or suspected violations may be submitted on a confidential basis by the complainant or may be submitted anonymously. Reports of violations or suspected violations will be kept confidential to the extent possible, consistent with the need to conduct an adequate investigation. Additionally, all DCH Workers are expected to cooperate in the investigation of such violations. Failure to cooperate in an investigation may result in disciplinary action, up to and including termination from employment.

ACKNOWLEDGEMENT OF STATEMENT OF ETHICS IN PROCUREMENT POLICY

BY SIGNING THIS AGREEMENT, I THE UNDERSIGNED, HEREBY ACKNOWLEDGE AND AGREES THAT:

- I have received, read, and understand the Georgia Department of Community Health *Statement of Ethics in Procurement Policy*;
- I agree to comply with each provision of the Georgia Department of Community Health *Statement of Ethics in Procurement Policy*;
- I am a: GRANTEE
 SUBGRANTEE

Authorized Signature*

Date

Print Name

Title

*Must be President, Vice President, CEO or Other Authorized Officer.

EMERGENCY DEPARTMENT UPGRADE

No portion of DCH Grant funding may be used for ANY expenditure(s) prior to the completion of a signed Grant Agreement with DCH. A budget justification which explains each line expense must accompany the budget worksheet. *All consultants and subgrantees and expenses related to such must be identified. If consultant or sub-grantee has yet to be determined, please explain the selection process and provide quotes.

CATEGORY			GRANT FUNDS REQUESTED	NON-GRANT FUNDED CONTRIBUTIONS		TOTAL REQUESTED
PERSONNEL-SALARIES	FRINGE	% OF TIME		IN-KIND	CASH	
ADMINISTRATIVE SALARIES AND FRINGE						
Position - Salary						
Position - Salary						
Position - Salary						
TRAVEL EXPENSES (All Travel must be in accordance with the State of Georgia travel policy which may be reviewed at www.sao.state.ga.gov)						
▪ Lodging						
▪ Meals						
▪ Mileage or Air Fare						
▪ Conferences						
OFFICE OPERATION EXPENSES (This is considered an indirect cost and is limited to 10% of the budget)						
▪ Facilities Rental/Mortgage						
▪ Telephone						
▪ Internet						
▪ Utilities						
▪ Office Supplies						
EQUIPMENT EXPENSES						
▪ Computers (hardware, software and network equipment)						
▪ Printers						
▪ Medical (Itemize in budget justification)						
ADMINISTRATIVE EXPENSES						
▪ Materials (This includes administrative, educational and clinical materials, itemize in budget justification)						
▪ Consultant Expenses*						
▪ Other Expenses**						
SUB – TOTAL(S)						
TOTAL FUNDING REQUEST						\$

NOTE: A budget justification which explains each line item expense must accompany the budget worksheet. *All consultants and sub-grantees and expenses related to such must be identified. If a consultant or sub-Grant has yet to be determined please explain the selection process and provide quotes. **All expenses identified as other must be fully justified and explained in the budget narrative. Additionally, if the Grantee has entered into a cost sharing arrangement this too must be reflected in the budget and detailed in the budget justification.

EMERGENCY DEPARTMENT UPGRADE

ORGANIZATION:		POINT OF CONTACT:	PHONE:
GRANT PROGRAM:	GRANT NUMBER:	FUNDING PERIOD:	AWARD AMOUNT:

Please be as specific and detailed as possible and use additional sheet(s) if necessary. The work plan should follow a logical progression. Objectives should correlate to a deliverable and an action item for achieving deliverable(s). The work plan **MUST** identify a person responsible for achieving and facilitating the deliverable and action item. The anticipated outcome should be clearly articulated and relate to the objective(s), deliverable(s) and action item(s).

Quarterly reporting requires that the work plan be updated. The update **MUST** document, explain and reconcile all changes to the work plan to include end date(s), deliverable(s), action item(s), person responsible and outcome(s). The updated work plan should document all success and/or failure as well as challenges in achievement of a deliverable. Discrepancies between anticipated outcomes and actual outcomes should be fully explained. Any additional action items taken as a result of any changes, challenges or failures should also be documented and explained.

Start Date: MM/YY	End Date: MM/YY	Objective(s):	Deliverable(s): Action Item(s): Person Responsible:	Anticipated Outcome(s): Actual Outcome(s): Additional Action Item(s):
			Deliverable(s): Action Item(s): Person Responsible:	
			Deliverable(s): Action Item(s): Person Responsible:	
			Deliverable(s): Action Item(s): Person Responsible:	
			Deliverable(s): Action Item(s): Person Responsible:	
			Deliverable(s): Action Item(s): Person Responsible:	
			Deliverable(s): Action Item(s): Person Responsible:	

PROJECT TIMELINE TEMPLATE

APPENDIX F

EMERGENCY DEPARTMENT UPGRADE

POINT OF CONTACT:
FUNDING PERIOD:

ACTIVITY/ DELIVERABLE:	APR '20	MAY '20	JUN'20	JUL '20	AUG' 20	SEP'20	OCT'20	NOV'20	DEC'20	JAN'21

**GEORGIA DEPARTMENT OF COMMUNITY HEALTH
STATE OFFICE OF RURAL HEALTH
EMERGENCY DEPARTMENT (ED) UPGRADE
UPGRADE
DCH APPLICATION CHECKLIST**

Include checklist as final page of Grant application. Checklist will be completed by the Department of Community Health,
Grant Administration
Mailing Address MAY NOT be a post office box.

Name of Grant: ED Upgrade Grant		
Applicant Organization:		
Contact Name:		
Address:		
City:	State:	ZIP Code:
Fax:	E-mail:	

DO NOT COMPLETE SECTION BELOW.

Please place this check list on top of your application. This checklist will be returned to you and certifies that your application for the ED Upgrade Grant has been received by the Department of Community Health and includes the following requirements:

- Project Abstract
- Project Narrative
- Organizational Narrative
- Budget Worksheet and Budget Justification
- Appendix A: DCH Grant Application Form
- Appendix B: Statement of Ethics (*Signature Page must be submitted*)
- Appendix C: Ethics in Procurement Policy (*Signature Pages must be submitted*)
- Appendix D: Business Associate Agreement (*Signature Page must be submitted*)
- Appendix E: Budget Worksheet (*Budget Justification MUST accompany this appendix*)
- Appendix F: Project Work Plan Template

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FOR INTERNAL USE: Administrative Review Completed	Application Complete	Application Incomplete or Non-Responsive

Signature

Date