

Introduced by _____

First Reading _____

Second Reading _____

Ordinance No. _____

Council Bill No. B 58-14

AN ORDINANCE

authorizing a memorandum of understanding with the Missouri Department of Corrections to provide tuberculosis screening and testing services; and fixing the time when this ordinance shall become effective.

BE IT ORDAINED BY THE COUNCIL OF THE CITY OF COLUMBIA, MISSOURI, AS FOLLOWS:

SECTION 1. The City Manager is hereby authorized to execute a memorandum of understanding with the Missouri Department of Corrections to provide tuberculosis screening and testing services for the period of July 1, 2014 through June 30, 2015. The form and content of the memorandum of understanding shall be substantially in the same form as set forth in "Exhibit A" attached hereto.

SECTION 2. This ordinance shall be in full force and effect from and after its passage.

PASSED this _____ day of _____, 2014.

ATTEST:

City Clerk

Mayor and Presiding Officer

APPROVED AS TO FORM:

City Counselor

MEMORANDUM OF UNDERSTANDING

Between the

Missouri Department of Corrections

And

Columbia/Boone County Health Department

City of Columbia, MO on behalf of its

I. Purpose

The purpose of this Memorandum of Understanding ("Agreement") is to establish the terms between the State of Missouri Department of Corrections ("the Department") and the Columbia/Boone County Health Department ("Contractor") for administering and reading tuberculosis skin tests ("TST") for determination of known tuberculin reactors status during baseline and/or new hire evaluation to Department Employees, Volunteers in Corrections and interns, hereinafter collectively or singularly referred to solely for purposes of this agreement as "Employees" or "Employee".

City of Columbia, Missouri on behalf of its

II. Contract Period

- A. This Agreement is effective July 1, 2014 through June 30, 2015. Upon mutual agreement of both parties, this agreement may be renewed for two (2) additional one-year periods or any portion thereof.
- B. The Agreement may be amended and/or extended by written agreement signed by all parties.
- C. This Agreement supersedes any previous Agreement in place for like services.

III. Provision of Services

This Agreement provides for the administering and reading of TST and/or determination of known tuberculin reactor status during baseline and/or new hire evaluation as may be requested by the Department to approved Employees.

IV. Organizational Responsibilities**A. The Department and the Contractor agree that the following activities are the responsibility of the Department:**

1. The Department shall work with the Contractor to schedule Employees for TST/evaluations to be administered at the Columbia/Boone County Health Department.
2. The Department agrees to pay the Contractor a firm, fixed price for each TST/evaluation as indicated herein:
 - TST administration and reading \$20.00 per test

B. The Department and the Contractor agree that the following activities are the responsibility of the Contractor:

1. The Contractor agrees to require Employees to present documentation of the Department's approval to receive specified services at the Contractor's site at the Department's expense prior to rendering services and billing the Department for any services provided pursuant to this Agreement.

2. The Contractor agrees that services rendered to Employees at the local public health department without documentation of approval are at the expense of the Employees.
3. The Contractor shall provide written reports (stated in millimeters of induration) within three (3) days of administering the TST utilizing the Department's approval form.
4. The Contractor agrees to follow section 199.350 RSMo; 19 CSR 20-20.100, Tuberculosis Testing for Residents and Workers in Long-Term Care and Correctional Centers; MO Department of Health Rules and Regulations; Centers for Disease Control and Prevention (CDC) guidelines and Department procedures for testing, vaccination and documentation.
5. The Contractor agrees that the two-step TST shall be given as a four (4) appointment process: 1) give first TST at first appointment; 2) the second appointment must occur within 48 to 72 hours of the first TST; at this appointment, assess the results of TST #1; if first TST is read as positive per the CDC Core Curriculum, then further evaluation per the CDC Core Curriculum is necessary; 3) if TST #1 is determined to be negative per the CDC Core Curriculum, give TST #2 one to three weeks from the result date of TST #1; and 4) assess results of TST #2 in 48 to 72 hours. If TST is negative, no further action is necessary. If TST is positive, then further evaluation per the CDC Core Curriculum is necessary (CDC Core Curriculum on Tuberculosis: What the Clinician Should Know, Fall Edition 2011, pages 52-54).
 - a. For Employees and Volunteers that have a documented negative TST administered with the previous twelve (12) months of employment, it is only necessary to give the first TST and assess the results in 48 to 72 hours. If there is no written documentation, or if the TST was given greater than twelve (12) months prior to beginning employment, then the entire two-step TST process must be followed as described above (CDC MMWR, Guidelines for the Prevention of Mycobacterium Tuberculosis in Healthcare Settings, 2005, page 29, Box 1 Indications for two-step tuberculin skin tests).
6. The Contractor agrees to notify the Employee and their worksite coordinator when the test is deemed reactive, educate the Employee on what TB infection means, and inform the Employee that a physician referral is necessary. The Contractor shall advise the Employee to contact the Department worksite coordinator for a physician referral unless the Contractor has follow-up services available. The Contractor agrees to call the worksite Chief Administrative Officer if the Employee displays symptoms and is suspected of possible active TB.
7. The Contractor should utilize the Sanofi PPD.
8. The Contractor agrees to provide TST to all Employees referred to the contractor.
9. The Contractor shall provide a monthly invoice that shall include a listing of all tested Employees' names, work sites, dates of TST administering and reading or reactor evaluation.

10. Services will be used on an as needed, if needed basis, with no guarantee as to the amount of services that will be required.
11. The Department and the Contractor agree that the prices listed in Section IV.A.2 of this Agreement may be changed (increased or decreased) by amendment if the cost is changed to the public for similar services. Any price increase/decrease shall be in the form of written amendment requiring the signature of both parties. At no time will the price to the Department exceed the price the Contractor charges the public for similar services.
12. The Contractor shall provide the invoice to:

Missouri Department of Corrections
Employee Health and Safety Coordinator
P.O. Box 236
Jefferson City, Missouri 65102

V. Confidentiality

The privacy and confidentiality of Employee TB test records will be maintained in accordance with the requirements of all applicable state and federal laws.

VI. Signatures

Cari Collins, Director
Division of Human Services
Missouri Department of Corrections

Date

Mike Matthes, City Manager
City of Columbia, MO

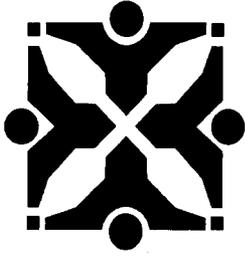
Date

ATTEST:

By: _____
Sheela Amin, City Clerk

APPROVED AS TO FORM:

By: _____
Nancy Thompson, City Counselor



Source: Health

Agenda Item No:

To: City Council
From: City Manager and Staff

Stephanie Browning / JSC
MM

Council Meeting Date: Mar 3, 2014

Re: Missouri Department of Corrections
Memorandum of Understanding

EXECUTIVE SUMMARY:

An ordinance authorizing the City Manager to sign the Memorandum of Understanding between the City of Columbia and the Department of Corrections (DOC) for administering and reading tuberculosis skin tests ("TST") to DOC employees, volunteers, and interns at a fixed cost of \$20 per test for the period of July 1, 2014 through June 30, 2015.

DISCUSSION:

The State of Missouri provides tuberculosis screening to Department of Corrections employees, volunteers, and interns through agreements with local public health agencies.

FISCAL IMPACT:

This is a fixed cost program. Funding is based on the number of individuals screened at \$20 per test.

VISION IMPACT:

<http://www.gocolumbiamo.com/Council/Meetings/visionimpact.php>

11.3 Goal: Columbia will be a healthy community. All residents will have timely access to appropriate health care. Effective prevention initiatives will contribute to a healthy community.

SUGGESTED COUNCIL ACTIONS:

Should the Council agree with staff recommendations, an affirmative vote is in order.

FISCAL and VISION NOTES:					
City Fiscal Impact Enter all that apply		Program Impact		Mandates	
City's current net FY cost	\$0.00	New Program/ Agency?	No	Federal or State mandated?	No
Amount of funds already appropriated	\$0.00	Duplicates/Epands an existing program?	No	Vision Implementation impact	
Amount of budget amendment needed	\$0.00	Fiscal Impact on any local political subdivision?	No	Enter all that apply: Refer to Web site	
Estimated 2 year net costs:		Resources Required		Vision Impact?	Yes
One Time	\$0.00	Requires add'l FTE Personnel?	No	Primary Vision, Strategy and/or Goal Item #	11.3
Operating/ Ongoing	\$0.00	Requires add'l facilities?	No	Secondary Vision, Strategy and/or Goal Item #	
		Requires add'l capital equipment?	No	Fiscal year implementation Task #	