

# LHD WELLBEING GRANTS - 2024 CYCLE

AGREEMENT BETWEEN
The Michigan Association for Local Public Health
326 W. Ottawa St., Lansing, MI 48933

&

Livingston County Health Department 2300 E Grand River Ave, Suite 102, Howell, MI 48843

This agreement is entered into on this **19th** day of **January**, **2024** by and between the Michigan Association for Local Public Health, hereinafter referred to as "**MALPH**," and **Livingston County Health Department**, hereinafter referred to as "**Grantee**." The purpose of this agreement is to specify the responsibilities of **MALPH** and **Grantee** related to the implementation of the **Local Health Department Staff Wellbeing** mini-grant program.

WHEREAS, **MALPH** and **Grantee** have expressed interest in collaborating to provide supportive services to local health department staff affected by the COVID-19 pandemic and to bolster their sense of social and emotional wellbeing.

WHEREAS, **Grantee** has represented that it is qualified to perform the services outlined in this agreement and is capable, competent, and willing to provide those services, either directly or through a subcontractor.

THEREFORE, in consideration of the sums to be paid by **MALPH** to **Grantee** in accordance with the terms set forth below, IT IS AGREED AS FOLLOWS:

#### 1. TERM:

The term of this contract is from January 19, 2024 through September 30, 2024.

### 2. DESCRIPTION OF SERVICES:

Grantee will provide, or arrange for, services designed to address workplace stress associated with responding to the COVID-19 pandemic. Program services may be educational or therapeutic in nature, and may address topics such as teambuilding, mindfulness, dealing with difficult people and situations, workplace violence mitigation, reducing stress, and resilience. Topics listed are offered as examples and do not constitute an exhaustive list of topics these funds may be used to support.

### 3. PAYMENT OF SERVICES:

- a. The total grant award is \$3,500.
- b. Payment will be made in full within 14 calendar days after **MALPH** receives this agreement, signed by the **Grantee**. Electronic signature is acceptable, and the agreement may be transmitted via email or by US mail.

#### 4. RESPONSIBILITIES OF MALPH:

- a. **MALPH** will provide compensation outlined in Section 3.
- b. **MALPH** will provide consultation, technical assistance and programmatic support as needed for Grantee to complete program deliverables.

### 5. SUBCONTRACTING:

In the event that the **Grantee** enters into a subcontract for any services provided under this agreement, **Grantee** shall ensure that subcontractors are qualified to perform those services and that appropriate agreements and financial controls are in place prior to disbursement of funds.

#### 6. FUNDING RESTRICTIONS:

Recipients may only expend funds for reasonable program purposes, including personnel, travel, supplies, food, and contractual services.

### 7. ACCEPTANCE OF THE TERMS OF AWARD:

By drawing or otherwise obtaining funds, the recipient acknowledges acceptance of the terms and conditions of the award and is obligated to perform in accordance with the requirements of the award. If the recipient cannot accept the terms, the recipient should notify **MALPH** within 15 business days.

This grant cycle was supported by funds made available from the Centers for Disease Control and Prevention, Center for State, Tribal, Local and Territorial Support, under 1 NB01T0000043-01-00. Subsequent activities are not necessarily endorsed by the Centers for Disease Control and Prevention. When publicizing an event or product paid for by these funds, please use the above statement.

## 8. CERTIFICATION STATEMENT:

By drawing or otherwise obtaining funds, the recipient certifies that proper financial management controls and accounting systems, to include personnel policies and procedures, have been established to adequately administer the award, and funds obtained are being used in accordance with applicable cost principles, regulations, and accounting standards. **Grantee** is required to permit independent auditors to have access to **Grantee** records and financial statements related to this agreement.

SIGNED ON BEHALF OF GRANTEE	SIGNED ON BEHALF OF MALPH
Signature:	Signature:
Name:	Name: Norm Hess
Title:	Title: Executive Director
Date:	Date: January 19, 2024