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Commissioners' Agenda

The Board of County Commissioners (BOCC) is comprised of the three elected County Commissioners: Ernie Moser (District 1), Jeff Hough (District 2, Chair), and Ken Bullock (District 3). The BOCC generally meets twice weekly: **Tuesdays & Thursdays at 9:00 a.m.** Unless otherwise noted, meetings are generally held in the Commissioner's Chambers at 624 E Center, Room 212, Pocatello, Idaho. During these public meetings, the BOCC may approve contracts, expend funds, hear testimony, make decisions on land use cases, and take care of other County matters.

Times are subject to change within 15 minutes of the stated time.

Thursday, April 3, 2025

9:00 AM Business Meeting (action items)

Agenda:

- Rick Phillips – Commission seeking to recognize Mr. Phillips' years of service to our community
- Buddy Romriell, Public Works, seeking approval of and signature on a grant opportunity with the Idaho Department of Health and Welfare for mosquito abatement for State Fiscal Year 2025 (requested 5 minutes) (action item)

Claims Agenda:

- Board of Ambulance District: Invoices and Commissioner Report
- Board of Commissioners: Invoices, Commissioners Reports, and Credit Applications
- Salary Rate Approval Forms/Notice of Separation with Potential Executive Session under Idaho Code §74-206(1)(a)&(b) regarding personnel with potential action following adjournment of Executive Session
- Payroll Report
- Alcohol Licenses and Permits
- Certificate of Residency Approval
- Mileage Reimbursement Requests

- Technology Request Form
- Memorandum Authorization for Accounts Payable
- Cardholder User Agreement and Authorization

BANNOCK COUNTY COMMISSIONERS
 624 E. Center, Pocatello, ID 83201
 Phone: (208) 236-7210 • Fax: (208) 232-7363



ERNIE MOSER
 Commissioner
 1st District

JEFF HOUGH
 Commissioner
 2nd District

KEN BULLOCK
 Commissioner
 3rd District

Business Meeting Agenda Request Form

The Board of Bannock County Commissioners business meetings are generally held on **Tuesday at 9:15 a.m.** in the Commissioners' Chambers in the Bannock County Courthouse, Room 212; 624 E Center Pocatello, Idaho or as noticed **48 hours** prior to the meeting at <https://bannockcounty.us/commissioners/>. The Commissioners also hold meetings throughout the week as coordinated with the Commissioners' staff. Agenda times are subject to change within **15 minutes** of scheduled time. Any person(s) needing special accommodations to participate in public meetings should contact the Commissioners' Office at 208-236-7210, three to five working days before the meeting.

Requestor Name:

Kristi Davenport

Department:

Commission

Requestor Email:

kristid@bannockcounty.gov

Item(s) to be considered:

Thanking Rick Phillips for his years of community involvement.

Date of meeting being requested:

04/03/2025

Time requested:

10 Minutes

Does the request involve a contract, agreement, external funding, or award acceptance?

No

Contract/Agreement Begin Date:

Contract/Agreement End Date:

List of additional attendees:



FOR COMMISSION OFFICE USE:

DATE _____

TIME _____

Agenda Request Form

The Board of Bannock County Commissioners business meetings are generally held on **Tuesday** in the Commissioners' Chambers in the Bannock County Courthouse, Room 212; 624 E Center Pocatello, Idaho or as noticed **48 hours** prior to the meeting at <https://bannockcounty.us/commissioners/>. The Commissioners also hold meetings throughout the week as coordinated with the Commissioners' staff. Agenda times are subject to change within **15 minutes** of scheduled time. Any person(s) needing special accommodations to participate in public meetings should contact the Commissioners' Office at 208-236-7210, three to five working days before the meeting.

Email this completed form and any supporting documents to agendarequest@bannockcounty.us by 5:00 PM the Wednesday prior to the scheduled meeting.

Name/Department: Bobette Beesley Public Wor **Phone/Email:** bobetteb@bannockcounty.g

Item to be considered: 2025 State of Idaho Department of Health & Welfare

Informational background:

H&W contract funding for the Mosquito Abatement. This annual gra

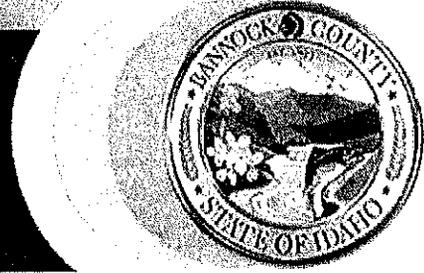
1. What meeting are you requesting? 4/3/25
2. How much time will be needed for this agenda item? 5 minutes or less
3. Is Commission action requested (decision, approval, signature, or guidance)? Approval
4. Does this request involve a contract, agreement, external funding source, or award acceptance? YES
5. What is the potential financial impact of this request? \$8200.00
6. Have all supporting documents been included with this form? YES
7. Will you be using presentation software or have other presentation needs? (if YES, provide presentation with this form) NO
8. Name and contact information for others who should be invited to attend:

Buddy Romriell & Dana Evans

GRANT TEAM RISK ASSESSMENT FOR GRANTS

Department:	<u>Mosquito Abatement</u>	Apply for award	X		
Project name:	<u>2025 Idaho Department of Health and Welfare Mosquito</u>	Do not apply			
Assistance Listing # (formerly CFDA #)		Federal Procurement			
Grant Writing		<i>No</i> (0 pts)	<i>Maybe</i> (2.5 pts)	<i>Yes</i> (5 pts)	Score
Project clearly eligible for grant? Meets priorities of the grant? If no, stop, do not apply.				X	5
Will administrative costs be allowed by the grant? Equipment only = 5	X				0
Matching funds: 0: cash or mix required, not budgeted; 2.5: match obtainable; 5: No match, or has been/can be budgeted, in-kind easily obtainable				X	5
Sufficient time to prepare grant submission before the due date?				X	5
Department and/or Grant Team have adequate time to write grant?				X	5
Award odds assessment: 0: strong competition, small number of awards, odds of award <10% 2.5: open competition, odds of award >10% to <50% 5: Meets top priorities, odds of award greater than 50%				X	5
Funding agency history: 0: none; 2.5: funder known/no history; 5: good relationship with funder				X	5
No organizational resources needed (space, equipment, in-kind)				X	5
Are new personnel fully covered by grant? n/a = 5				X	5
Sustainability: 0: difficult, may require significant ongoing commitment of resources; 2.5: effort needed, may require some ongoing support; 5: minimal additional resources OR no sustainability expected/needed			X		2.5
Extent of Project					
Aligns with department's mission				X	5
Existing or imminently anticipated need				X	5
Program will not be a duplication of existing efforts in area				X	5
Expertise of department/director in relevant area				X	5
Staff training: 0: required, not funded; 2.5: Minimal, some covered; 5: Minimal, required and costs covered				X	5
Program partnership: 0: needed/not developed; 2.5: potential identified; 5: not needed/already contacted				X	5
Procurement complexity: 0: multiple/phases/formal; 2.5: 1-2 simple/semi-formal; 5: none				X	5
Department capacity to administer and monitor project				X	5
Auditing capacity for processing, reporting, and monitoring				X	5
Department capacity for tracking/progress reports				X	5
Comments: Any award will result on contract, will still require application					92.5
Other departments to involve:					<i>Score</i>
Scoring Key: 70% = Yes 50-69% = Maybe <50 = No	Possible adjustments to scoring: New personnel required -3 New system (reporting/application) -1 to 10 Subaward (adds admin burden) -4 Davis Bacon required -10 Does proposal provide operational support (rather than project support) up to +5				
Auditing/Grant Team: <i>LuAnn Losee</i>	Date:	03/25/2025			
Override of Recommendation not to apply: Justification:	Date:				
Commissioner:	<i>Jeff Hough</i>	Date:	3/27/25		

Bannock County NOTICE OF FUNDING OPPORTUNITY AND RISK ASSESSMENT FOR GRANTS



Is this a Reoccurring Grant? YES NO

Department:

Date Form Completed:

Supervisor:

Program Manager:

Project Title:

Submission Deadline:

Grant Name:

Grant Number:

Funding Agency:

Amount Requested:

Grant Match Percentage: In-kind Allowed? YES

Total Estimated Project Cost:

Long term maintenance cost (including staffing)

Explain Source of Match:

This grant will provide reimbursement of mosquito trap surveying labor costs, dry ice used in traps, and fuel for the pick-up that the speciator uses for the trapping. Also included is the purchase of RAMP testing supplies

Project Summary:

State of Idaho contract funding description for West Nile virus surveillance and mosquito vector control. Estimated budget for reimbursement of labor \$4000 (2 temporary employees totaling 250 hours at \$16.07 per hour), dry ice \$1000, fuel \$1000. Also included \$2200 to purchase RAMP testing supplies. These amounts are based on previous years in which the grant was received.

Anticipated Notification Date: Project Start Date: Project End Date:

Funding Type: Federal State Local Government Private Other

Net Cash Outflow: Reimbursement Advance Funded Other

Target Population:

Potential Impact on Target Population:

Our impact is to lessen the community from becoming infected with the West Nile Virus (WNV) disease by trapping and testing mosquitoes. WNV is transmitted by infected mosquitos and can cause serious illness in people of any age.

Funding Source Reporting Requirements:

Invoices showing dollar amounts and breakdown of supplies and labor used for funding.

Number of Staff to Participate: Will Grant Require Staff to be Pulled from Primary Duties: YES NO

Will Staff Training be Provided: YES NO Training Cost Included in Budget: YES NO

Does Grant Include Technology: YES NO If so, have Computer Services Been Notified: YES NO

Does Grant Require Office Space: YES NO Does Grant Require New Personnel: YES NO

Chance of Successful Funding: HIGH MEDIUM LOW

Application Prep Burden:

- HIGH (Needs project development and grant writing assistance)
- MEDIUM (Small project development or grant writing assistance)
- LOW (Program in place, simple project development or department able to complete application)

Administrative/Management Burden:

HIGH MEDIUM LOW

Grant Team Assessment: (To be completed by the Grant Team)	
Does the project align with the grant criteria?	
Is the project feasible?	
Can we meet the matching requirement?	
Is the initiating department able to adequately manage the grant?	
Are there other consideration? If so, please describe:	
Other departments to involve:	
Summary of Department comments/ recommendation:	
Project/Grant Program Manager Contact Information:	
Auditing Department: Recommend Application	Do Not Recommend Application
Signatures:	Comments:
Legal: Recommend Application	Do Not Recommend Application
Signatures:	Comments:
BOCC: Recommend Application	Do Not Recommend Application
Comments:	

Chairman Signature Jeff Hough Date April 3, 2025

Idaho Mosquito Abatement Districts: SFY25 Contractual Application

Purpose

The Idaho Department of Health and Welfare Division of Public Health is accepting application for the Idaho Mosquito Abatement Districts contracts (MADS). This funding announcement is to notify organizations of the opportunity to apply for reimbursement-based funds supporting surveillance for mosquitoes of public health concern. Funding may be used for the costs associated with collecting, testing, and monitoring mosquito vector populations. These reimbursement costs can include supplies to conduct surveillance and testing, labor to support surveillance and testing, disposable laboratory materials and mosquito surveillance supplies and other items as approved and specified in the contract cost billing.

Definitions

As used in the Contract, the following terms shall have the meanings set forth below:

- A. **Contract** shall mean the Contract Cover Sheet, these General Terms and Conditions, and all Attachments identified on the Contract Cover Sheet. The Contract shall also include any negotiated and executed amendment to the Contract.
- B. **Contract Monitor** shall mean that person appointed by the Department to administer the Contract on behalf of the Department. "Contract Monitor" includes, except as otherwise provided in the Contract, an authorized representative of the Contract Monitor acting within the scope of his or her authority. The Department may change the designated Contract Monitor from time to time by providing notice to the Contractor as provided in the Contract.
- C. **Contractor** shall mean that individual, partnership, corporation, or other entity who executes the Contract or performs services under the Contract. Contractor shall include any subcontractor retained by the Contractor as permitted under the terms of the Contract.
- D. **Department** shall mean the State of Idaho, Department of Health and Welfare, its divisions, sections, offices, units, or other subdivisions, and its officers, employees, and agents.

Funding Information

This Contract is funded by the Epidemiology and Laboratory Capacity (ELC) Cooperative Agreement awarded 8/1/2024 through the Centers for Disease Control and Prevention. A total of \$48,000 is available to be dispersed to the recipients in reimbursement-based-contract. Funds will be awarded to successful applications on a first come first served basis until all funds are expended.

An initial funding cap of \$7,000 will apply for this reimbursement-based-contract opportunity.

Funding may not be used for expenses reimbursed by any other federal source including but not limited to National Association of City and County Health Officials (NACCHO) and County Funds. Funds cannot be used for construction, food, gift cards, or any other item that is not directly associated with the operation of mosquito surveillance.

Eligibility and Preferences:

Eligible applicants must represent a vector control program housed within a local public health agency or other local government agency. "Local" is here defined as organizations working at county, city, municipality, or community levels. Private sector vector control entities are not eligible for funding through this opportunity.

Contract Terms

Selected applicants will enter into an agreement with the Department using standard Contract language **(terms and conditions) attached as Appendix A below**. Agreement with majority of the Department's standard contract terms and conditions is a requirement and as part of the application, the contractor will be asked to verify that they have read the Department's standard contract language and confirmed in agreement with the terms and conditions. Should your organization need to propose any changes to the terms and conditions, please inform us immediately, however, the Department reserves the right to accept or decline such changes. Significant changes, which could affect the agreement's timely execution, may impact your selection as a successful applicant. Contractors that cannot agree to the majority of the Department's contract language should not apply for this initiative.

Reporting Requirements:

A scope of work (Table 1) further outlining these activities is below and represents the deliverables associated with receipt of funding which will be incorporated into the contract.

Selected Applicants will be required to:

- A. Designate one point of contact to serve as project coordinator. Even if this person will not lead all project activities. The selected applicant must dedicate one individual with whom the contract monitor will have direct communications on all matters related to this project.
- B. Adhere to the activities and timelines proposed in the application materials. The designated project coordinators must communicate with the contract monitor if deliverables must change due to unforeseen circumstances.
- C. Must conduct surveillance activities as outlined by the contract Scope of work in Table 1 at the end of this document.

Financial Reports:

Funding recipients must submit to the Idaho Department of Health and Welfare-Bureau of Environmental Health and Communicable Disease the appropriate receipts, invoices, and documentation in the format required by the program for surveillance and laboratory expenses as specified in the contract language and in accordance with the contract recipients Reporting and Record Retention Requirements. Contract recipients shall comply with subaward and executive compensation reporting requirements as required by the Federal Funding Accountability and Transparency Act (FFATA).

Application Requirements:

Please describe the activities and expenses for which the funding will be used. A budget template attached as Appendix B below.

Timeline for the scope of work: 05/01/2025 – 07/31/2025

1. Provide a single point of contact for correspondence related to this funding.
2. Provide a brief explanation of your organization including if you are currently or have historically received funds from the Idaho Department of Health and Welfare Division of Public Health.
3. Provide a work plan that clearly outlines the intended uses of requested funds.
4. Provide a budget that details the anticipated funding that is in alignment with the application workplan.

Review and Scoring:

Applicants must score a minimum of 70 points (out of a possible 100) to be eligible to receive this funding. Applications will be reviewed by a committee and scored based on the following:

- **Narrative** – Maximum of 20 points. Applicant clearly describes their organization, capacity to implement the project, experience serving the target population, demonstrated ability to submit timely reports and invoices. Applicant includes a description of collaborating organizations for this project and clearly delineates each organization's roles and responsibilities for the project.
- **Work Plan** – Maximum of 40 points. Applicant clearly outlines a timeline and workplan to implement the project including who is responsible for specific activities.
- **Budget** – Maximum of 20 points. Applicant provides a comprehensive itemized budget.
- **Allowable Expenses** – Maximum of 20 points. Applicant's budget includes expenses that are allowable per scope of the contract.

Submission Guidelines:

- Proposals must be submitted to the Contract Monitor:

Samantha Kirkendall, MS CPHM

Health Program Manager, Surveillance and Analytics

Bureau of Environmental Health and Communicable Disease

Division of Public Health | Idaho Department of Health and Welfare

208-985-6185

Samantha.kirkendall@dhw.idaho.gov