

**THE REGIONAL HEALTHCARE EMERGENCY PREPAREDNESS COALITION  
COUNTY- LEVEL HEALTHCARE COALITION COORDINATION AGREEMENT**

This REGIONAL HEALTHCARE EMERGENCY PREPAREDNESS COUNTY-LEVEL HEALTHCARE COALITION COORDINATION AGREEMENT (this "Agreement") is entered into as of this   1   day of   July  , 2025 (the "Effective Date") by and between COTS, an Ohio non-profit corporation ("COTS"), and Columbus Public Health, 240 Parsons Ave, Columbus, OH 43215 ("Agency").

**RECITALS**

- A. WHEREAS, the Agency is engaged in activities related to emergency management coordination, response and/or provision of health care services in the Central Ohio Disaster Preparedness Planning Region, and
- B. WHEREAS, COTS has received grant monies from the Ohio Department of Health (ODH) to act as a regional disaster preparedness coordinator for the Central region by planning and funding the community's disaster preparedness efforts;
- C. WHEREAS, COTS desires to engage the Agency to develop, implement and enhance disaster preparedness plans and protocols;
- D. NOW, THEREFORE, in consideration of the mutual promises, covenants and agreements contained herein, the parties agree to the following:

**ARTICLE I. Contractor Responsibilities**

**Agency shall:**

- 1. Work with and report major milestones, as identified by COTS, to the COTS Regional Coalition Coordinator, Arin Tracy, 1390 Dublin Road, Columbus, Ohio 43215
- 2. Agency shall perform the Services consistent with the National Response Framework (NRF), the National Incident Management System (NIMS), the National Preparedness Goals (NPG), the Homeland Security Exercise and Evaluation Program (HSEEP) criteria, and the terms and conditions of this Agreement.
- 3. The manner and means of providing the Services are under the sole control of Agency. However, the Services contemplated herein must be acceptable to COTS and shall be subject to COTS' general right of supervision over its business affairs to secure satisfactory performance of Agency.

**Project Deliverables**

- 1. **Engagement in County-Level Healthcare Coalition** – The Agency is hereby engaged by COTS to coordinate the Coalition's development, implementation and enhancement of

community disaster preparedness plans and protocols with the following participants: hospitals, Emergency Management Agencies, public health authorities, EMS, long term care facilities, nursing homes, American Red Cross, hospice providers, Federally Qualified Health Centers, urgent care centers, home health providers, and other healthcare partners in the community (hereafter, the “Coalition”) in accordance with the State Fiscal Year (SFY2026) Grant for Regional Health Care Preparedness Program.

2. **Responsibilities of Agency Regarding Coalition Coordination**– as a condition to coordinate the local healthcare coalition, the Agency shall comply with Exhibit A.
3. **Allocation of Funds** – During the term of this Contract and subject to the terms and conditions set for herein, COTS shall allocate funds (in an amount not to exceed that \$8,000.00) received from the Ohio Department of Health to the Agency. Payment of the funds to the Agency shall be contingent upon COTS receipt of funds from ODH. A delay in ODH payment to COTS may result in a delay in the payment by COTS of funds to the Agency. The Agency acknowledges the potential for delay in its receipt of funds as a result of the preceding sentence. The Parties each agree to be responsible for any personal injury or property damages caused by its acts or omissions as determined by a court of competent jurisdiction or as the Parties may otherwise mutually agree. The Agency acknowledges and understands COTS makes no representations that the Agency receipt of the funds is guaranteed, and COTS is in no way responsible for reimbursing the Agency for any expenses incurred in anticipation of the Funds.
4. **Records and Audit** – The agency shall maintain accounts and records adequate to identify and account for all expenditures made and funds received under this contract and all other records that COTS shall request the Agency to maintain from time to time. All disbursements for funds shall be only for obligations incurred in the performance of the Agency’s Coalition Coordination Efforts and shall be supported by contracts, invoices, vouchers, and other data, as appropriate to support such disbursements. These accounts and records shall be retained for five (5) years after (i) expiration or termination of this Contract; or (ii) final payment of the Funds under this Contract, whichever is later, and during such period the Agency agrees to provide COTS with access to and the right to examine any books and records involving transactions related to this Contract. The Agency further agrees that all such accounts and records shall be kept in an orderly and readily identifiable fashion. Notwithstanding the foregoing, if there is litigation, claims, audits, negotiations, or other actions related to the funds that an Agency has knowledge of prior to the expiration of the forgoing retention period, then the Agency agrees to continue to maintain all accounts and records until the final resolution of such litigation, claims, audits, negotiations, or other actions.

5. **Requests for Coalition Specific Information** – The Coalition Point(s) of Contact shall promptly reply to COTS’ request for Coalition specific information relating to meeting deliverables and/or other requests related to readiness/preparedness inquiries from ODH or COTS in a timeframe set forth by COTS.
6. **Continued Effect of this Contract** – The parties agree that the terms of this Contract shall remain in full force and effect upon execution by both parties until June 30, 2026, or until a new Contract is executed by and between the parties or at such time that COTS’ grant to act as regional disaster preparedness coordinator for the Central Region is terminated or expires, in which case the Contract shall automatically terminate.
7. **Amendments** – The parties acknowledge that from time to time it may be necessary to amend the scope, terms, or some other aspect of this Contract and agree that all changes to this Contract must be evidenced by either an amendment or an amended and restated Contract signed by all parties to this Contract.
8. **Binding Agreement** – This Contract is intended to be a legal binding agreement upon the parties with respect to all provisions stated herein and shall be binding upon the legal representatives, successors, assigns and affiliates, and subsidiaries of the respective parties.
9. **Counterparts** – This Contract may be executed in one or more counterparts, all of which shall be considered one and the same agreement, binding on all parties hereto, notwithstanding that all parties are not signatories to the same counterpart.
10. **Assignment** – The Agency shall not subcontract any provision of this Contract to a third party without the express written approval of COTS.
11. **Severability** – The provisions of this Contract are severable and in the event that one of more of the deliverables are found to be inconsistent with legal requirements upon any party, and therefore unenforceable, the remaining provisions shall remain in full force and effect.
12. **Governing Law** – This Contract shall be governed by and construed in accordance with the laws of the State of Ohio (regardless of the laws that might be applicable under principles of conflict law). The site of any dispute resolution (including any mediation, arbitration, or litigation) shall be in Franklin County, Ohio.
13. **Equal Opportunity** – The Agency is required to be in compliance with Equal Employment Opportunity (Executive Order 11246 & 11375) and as supplemented by 41 CFR part 60.

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be executed by their duly authorized officers on the day and year first written above,

Signed by: Julia Glaze Julia Glaze 8/26/2025  
A7ABC3493440492...  
Local Healthcare Coalition Lead Signature Date

DocuSigned by: MWR by Anita Clark Mysheika W. Roberts, MD, MPH 8/27/2025  
5631545F188F46E...  
Agency CEO/President/Health Commissioner Signature Date  
TIN: 316400223

 7/1/2025  
\_\_\_\_\_  
Tracy Davidson MS, CCC-SLP  
CEO, COTS  
TIN: 311592734 Date

## **Exhibit A**

### **County-Level Healthcare Coalition Coordination 2025-2026 Deliverables**

1. Distribute to local partners: documents, communication drill information, training/exercise/education tools, and important event information developed by the regional coalition. To be eligible to participate in the full-scale exercises, coalition members must have a signed MOU on file prior to the full-scale exercise.
2. Submit Notice of Acceptance or Declining Agreement to RHCC. Due by August 31, 2025. Submit Coalition Agreement to Regional Healthcare Coalition Coordinator.
3. Local Coalition Admin Form. Each local coalition must have a lead agency and designate a co-lead or back-up agency to assist with information sharing during an event. Provide updates/changes using the VEOCI Preparedness Portal (VPP). Due by August 31, 2025.
4. Maintain a contact list of coalition members and active participation status. Complete the Central Region Local Coalitions Membership Roster Form using the VEOCI Preparedness Portal (VPP). Due by August 31, 2025 and March 1, 2026.
5. Distribute and discuss the importance of the Regional Coalition Memorandum of Understanding to the local coalition members. Upload signed MOUs on the VEOCI Preparedness Portal (VPP).
6. Coordinate and hold at minimum two local coalition meetings during the grant year. Ensure meeting dates are sent to the Regional Healthcare Coalition Coordinator. Provide on the VEOCI Preparedness Portal (VPP) all meeting documents (meeting documentation should include sign-in sheets, meeting minutes with coalition deliverable discussions, and all presentation material).
7. The Healthcare Coalition Lead and/or designated co-lead attends and encourages coalition members to attend the Full Healthcare Coalition Meetings. September & November 2025; February & April 2026.
8. The Healthcare Coalition Lead and/or designated co-lead participates in the Full-Scale Exercise.
9. The Healthcare Coalition Lead and/or designated co-lead participates in the Medical Surge Response Exercise. Dates: TBD.
10. Upload the county healthcare coalition Charter or Bylaws by December 31, 2025. A review/revise date must be included in the Bylaws.
11. Upload the county healthcare coalition Concept of Operations Plan (CONOPS) by December 31, 2025. A review/revise date must be included in the CONOPS Plan.
12. Upload the county healthcare coalition Communication Plan by December 31, 2025. A review/revise date must be included in the Communication Plan.
13. The Healthcare Coalition Lead and/or designated co-lead attends RHEP Coalition Summit. Date: TBD

14. The Agency shall comply with the Equal Employment Opportunity (Executive Orders 11246 and 11375) and as supplemented by 41 CFR part 60. The Agency shall submit an email to COTS no later than June 5, 2026, stating that all deliverables have been met for the 2025-2026 grant year.

**Acronyms:**

CONOPS - Concept of Operations Plan

HSEEP - Homeland Security Exercise and Evaluation Program criteria

HVA – Hazard Vulnerability Assessment

NIMS - National Incident Management System

NPG - National Preparedness Goals

NRF - National Response Framework

RHEP – Regional Healthcare Emergency Preparedness

TTX – Tabletop Exercise

VPP - VEOCI Preparedness Portal