

**AMENDMENT #1
TO
MEMORANDUM OF UNDERSTANDING
BETWEEN THE
SCHOOL BOARD OF CLAY COUNTY, FLORIDA
AND
THE FLORIDA DEPARTMENT OF HEALTH**

This Amendment #1, entered into between the Florida Department of Health, ("DEPARTMENT") and the School Board of Clay County, Florida, ("BOARD"), amends the Memorandum of Understanding ("MOU"), effective September 1, 2015, between the parties to support the administration of influenza vaccines to students enrolled in designated public schools in Clay County, Florida. The purpose of this Amendment is add the administration of Tdap vaccine, clarify the amount of days to provide written notice to terminate, and update the contact person for the DEPARTMENT.

DEPARTMENT and BOARD have agreed to the following changes:

1. Page 1, Paragraph 4 is hereby amended to read:

"WHEREAS, to effectuate certain of the services set forth in the Interagency Agreement, the DEPARTMENT has entered into that certain Memorandums of Understanding with Healthy Schools, LLC (the "PROVIDER"), regarding the PROVIDER's administration of flu and Tdap vaccines to students at certain BOARD locations (the "Vaccine Program Agreement(s)"); and"

2. Page 1, Section II (The BOARD agrees to:), Paragraph (C.) is hereby amended to read:

"cooperate with the DEPARTMENT by facilitating communications to the parents/guardians for the required consents for each student, and raising awareness of the parents/guardians of the opportunities for the flu and Tdap vaccine available by these Vaccine Programs."

3. Page 2, Section III (TERM), is hereby amended to read:

"The term of this MOU shall be concurrent with the term of the Vaccine Program Agreement(s) for a period of one (1) year and automatically renew for successive one (1) year periods unless terminated. This MOU may be terminated by either party with or without cause upon thirty (30) days written notice to the other. This MOU may be modified, but only in writing and by mutual consent of the parties."

4. Page 3, contact person for the DEPARTMENT, is amended to:

"Florida Department of Health in Clay County
Heather E. Huffman, Administrator
1305 Idlewild Avenue
Green Cove Springs, FL 32043"

This amendment shall begin on December 21, 2015, or the date on which the amendment has been signed by both parties, whichever is later.

All provisions in the MOU and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform with this amendment.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the MOU.

This amendment and all its attachments are hereby made a part of the MOU.

IN WITNESS THEREOF, the parties hereto have caused this two page amendment to be executed by their officials thereunto duly authorized.

SCHOOL BOARD OF CLAY COUNTY

**STATE OF FLORIDA
DEPARTMENT OF HEALTH
CLAY COUNTY HEALTH DEPARTMENT**

SIGNED
BY: _____

SIGNED
BY: _____

NAME: Johnna McKinnon

NAME: Heather E. Huffman

TITLE: Chairman

TITLE: Administrator

DATE: _____

DATE: _____