INTENT TO PARTICIPATION IN THE SUPPLY CHAIN INTEGRITY PROJECT

(_____) ("Participant"), a Missouri hospital or health system, hereby intends to participate in the Missouri Hospital Association's Supply Chain Integrity Project.

I. PROJECT DESCRIPTION
   a. MHA is offering hospitals and health systems a comprehensive supply chain integrity program consisting of a four-part virtual series which explores the current state of health care supply chain management, covering supplies, equipment, and pharmaceuticals. This series draws on past lessons and current realities to equip hospitals with strategies for navigating the future. Following participation in the education series, hospitals can receive a stipend for replenishing supply caches, increasing Periodic Automatic Replacement (PAR) levels, or select to participate in a supply chain process improvement visit. This website provides an overview of the program.

II. PROJECT COMPONENTS
   a. Education Opportunity – a complimentary four-part virtual education series occurring in August – September 2024. Sessions take place from 10 to 11 a.m. and include:
      i. Session One: Best Practices in Healthcare Supply Chain Management, held on August 7
      ii. Session Two: Supply Chain Process Improvement, held on August 14
      iii. Session Three: Supply Chain Considerations During Disruptions and Disasters, held on August 21
      iv. Session Four: Supply Chain Disruption in Missouri Hospitals, held on September 4
   b. Stipend – funding to participating hospital, following submission of an application and documentation related to items purchased.
      i. Stipend amounts will be a minimum of $8,600 per hospital, however, amounts may increase based on the final number of hospitals participating in the project.
      ii. Use of stipends can include:
         1. Purchase PPE and/or respiratory supplies to replenish supply caches or increase PAR levels.
         2. Participation in a supply chain process improvement visit.

III. PARTICIPATION REQUIREMENTS
   a. Participants must return this letter of intent to sdusheke@mhanet.com by August 2, 2024.
   b. A staff member from the Participant organization must participate in all four parts of our complimentary virtual education series. It is highly encouraged that as many staff attend as possible, and for continuity it is recommend that the same staff member is present at each session. Participant must indicate attendees below.

c. Following the conclusion of the education series and upon verifying Participants attendance at each session, MHA will send the Participant an application to complete. Participant must complete the application outlining the intended use of the stipend by September 30, 2024 and send to sdusheke@mhanet.com. A sample application (Attachment A) is attached.
d. Following application approval, Participant purchases supplies or participates in process improvement visit.
e. Participant returns outlined required documentation.
f. Participant receives stipend check (if process improvement visit is selected, MHA will pay for visit on the hospital's behalf).
g. Participant agrees to:
    i. Comply with existing and/or future directives and guidance from ASPR regarding control of the spread of COVID-19;
    ii. In consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care to individuals of other jurisdictions, who seek treatment from the Participant to the same extent that they would provide patient care to similarly situated individuals domiciled in the Participant's jurisdiction; and
    iii. Assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation.
    iv. Participant shall comply with the applicable terms and conditions of the Award attached hereto as Attachment C.
    v. Participant shall provide MHA with access to and the right to physically inspect any equipment purchases made, in whole or in part, with the funds provided under this intent to participate document. Further, Participant shall allow MHA to audit Participant's completion of the Activities under Section III.
    vi. Participant must assure that preparedness activities under this award are not conducted in a manner to restrict healthcare services based on an individual's home jurisdiction and that any facilities that received funds under this award may not restrict services based on an individual's home jurisdiction.

IV. DOCUMENTATION REQUIREMENTS

a. Documentation must be received by MHA no later than January 31, 2025. Failure to return documentation by this date will result in loss of stipend.
b. For stipends used for purchasing supplies for the purpose of replenishing supply caches or increasing PAR levels:
    i. Application (see Attachment A)
    ii. Invoice (no purchase orders, invoice must show item name, quantity and price)
    iii. Proof of receipt, i.e. packing slips, internal receipt documentation (document must show item name and quantity received)
    iv. Proof of payment, i.e. copy of check, receipt showing credit card payment, statement/official accounting document

v. Stipend check will not be sent to Participant until MHA receives the above documentation in its entirety.

c. For stipends used for a supply chain process improvement visit:
   i. Application (see Attachment A)
   ii. Participant will not receive stipend check; MHA will pay costs associated with the visit on the Participant's behalf.

d. If the Participant uses the funding to purchase supplies or equipment over five thousand dollars ($5,000.00), the requirements in Attachment B are hereby incorporated into this Agreement and shall be met, as applicable.

V. PAYMENT AND DOCUMENTATION

a. Final documentation outlined above must be received no later than January 31, 2025 to:

   Sheala Dusheke
   Grant Specialist
   P.O. Box 60
   Jefferson City, MO 65102-0060
   sdusheke@mhanet.com

b. Failure to submit this final documentation by January 31, 2025, will result in stipend not being issued to participant.

VI. RECITALS

a. The U.S. Department of Health and Human Services (HHS), Administration for Strategic Preparedness and Response ("ASPR"), established the Hospital Association COVID-19 Preparedness and Response Activities funding opportunity to support the urgent preparedness and response needs of hospitals, health systems, and health care workers on the front lines of this pandemic in order to prepare them to safely and successfully identify, isolate, assess, transport, and treat patients with COVID-19 or persons under investigation (PUIs) for COVID-19 (the "COVID-19 Program"); and

b. To fulfill its obligations under the funding opportunity, MHA must assure hospitals and health systems eligible to receive ASPR funding expend requested funding in the required categories authorized by the ASPR grant; and

c. Participant is eligible for and desires to receive ASPR grant funding from MHA; and

d. The parties wish to memorialize their respective obligations in this intent to participate document.

VII. EMPLOYMENT OF UNAUTHORIZED ALIENS

a. Section 285.530.1, RSMo prohibits any business entity or employer from knowingly employing, hiring or continuing to employ an unauthorized alien to perform work within the state of Missouri. By signature below, Participant warrants it is not knowingly in violation of subsection 1 of section 285.530, RSMo and shall not henceforth be in such violation.

VIII. DOCUMENT RETENTION

a. Participant shall retain all books, records and other documents relevant to this agreement for a period of five (5) years after final payment or the completion of any audit, whichever is later, or as otherwise designated by MHA in response to requirements imposed by the federal funding agency.
b. Participant shall allow authorized representatives of MHA to inspect those records on request.
c. Participant shall provide MHA with all records, documents or other information needed to complete the ASPR-required performance measures evaluation.
d. If Participant is subject to any litigation, claim, negotiation, audit or other action involving the records before the expiration of the five (5) year period, Participant shall retain the records until completion of the action and resolution of all issues which arise from it, or until the end of the regular five (5) year period, whichever is later.
e. If MHA is subject to any litigation, claim, negotiation, audit or other action involving the records, MHA will notify Participant in writing to extend Participant's retention period.
f. MHA may, upon direction of ASPR, recover any payment made to Participant if Participant fails to retain adequate documentation.

IX. LIABILITY

a. Neither ASPR nor MHA will indemnify or hold harmless Participant or its employees against any liability incurred or arising as a result of any activity of Participant or any activity of Participant's employees related to Participant's performance under the contract.
b. The relationship of Participant to MHA shall be that of independent contractor. Nothing in this intent to participate document is intended to, nor shall be construed in any manner as creating or establishing an agency relationship or the relationship of employer/employee between the parties. Participant shall assume all legal and financial responsibility for taxes, FICA, employee fringe benefits, workers' compensation, employee insurance, minimum wage requirements, overtime, or any other applicable employee-related obligation or expense, and shall assume all costs, attorneys' fees, losses, judgments, and legal or equitable remedies imposed associated with the matters outlines in this paragraph in regard to Participant's subcontractors, employees and agents. Participant shall have no authority to bind MHA or ASPR for any obligation or expense not specifically stated in this contract.
c. Participant shall be responsible for all claims, actions, liability and loss (including court costs and attorneys' fees) for any and all injury or damage (including death) occurring as a result of Participant's performance or the performance of any subcontractor, involving any equipment used or service provided, under the terms and conditions of this intent to participate document or any subcontract or other

agreement, or based on any violation of any state or federal statute, ordinance, building code or regulation by Participant. Participant shall not be responsible for any injury or damage occurring as a result of any negligent act or omission committed by MHA, including its officers, employees and assigns.

X. TERMINATION

a. MHA, in its sole discretion, may terminate the obligations of the parties under this agreement, in whole or in part, effective immediately upon written notice to Participant if:
    i. ASPR notifies MHA of its intent to terminate its contract with MHA; or
    ii. Federal funds are not appropriated, continued, or available at a sufficient level to fund this intent to participate document; or
    iii. A change in federal or state law relevant to this intent to participate document occurs; or
    iv. A material change of the parties to the intent to participate document occurs.

XI. CONTACT INFORMATION

a. MHA Project Staff
    i. Kara Amann-Kale
    Director of Hospital Preparedness Programs
    kamann-kale@mhanet.com
    573-893-3700 ext. 1402
    ii. Sheala Dusheke
    Grant Specialist
    sdusheke@mhanet.com
    573-893-3700 ext. 1361
b. Participant
    i. Identify a primary and secondary point of contact for this project:

Primary Contact
Name: _____
Title: _____
Phone: _____
Email: _____

Secondary Contact
Name: _____
Title: _____
Phone: _____
Email: _____

ii. Identify staff that will be participating in the education series. A staff member from the Participant organization must participate in all four parts of our complimentary virtual education series. It is highly encouraged that as many staff attend as possible, and for continuity it is recommend that the same staff member is present at each session.

Staff Participating in Education Series (include name, title, and email address)

_____
_____
_____
_____
_____
_____
_____
_____

iii. To assist in MHA planning, please select which of the stipend options the Participant will most likely choose following completion of required education (this does not commit Participate to this as the final selection. Final selections will be indicated on application).

____ Purchase PPE and/or respiratory supplies to replenish supply caches or increasing PAR levels

_____ Participation in a supply chain process improvement visit

XII. By signing below, the authorizing individual is stating the Participant's intent to participate in the MHA Supply Chain Integrity Project.

Signature: _____
Name: _____
Title: _____
Date: _____

attachments (3)

ATTACHMENT A: Hospital Supply Reimbursement Application

Instructions

Following successful completion of outlined requirements, including attending the MHA Pharmaceutical and Supply Chain Integrity Four-Part Education Series, hospitals are eligible to receive reimbursement $____ (final amount will be entered here following completion of the education series, reimbursement will be at a minimum $8,600) for PPE and/or respiratory supplies to re-build caches or increase PAR levels or may opt to receive a supply chain process improvement visit through the use of grant funding (fiscal year 2021 Hospital Association COVID-19 Preparedness and Response Activities and CFDA 93.889, through a contract with the U.S. Department of Health and Human Services Office of the Administration for Strategic Preparedness and Response).

Applications will be sent to the primary and secondary contact listed in the intent to participate document to hospitals that complete the requirements the week of September 9, 2024. **Participants must complete this form in its entirety and return it to** sdusheke@mhanet.com **by September 30, 2024.** MHA will review requests and will reply to the email with approval. Once approved, Participants can order the approved supplies through their preferred vendor. For supplies purchased, Participants must send an invoice, proof of receipt (packing slip) and proof of payment to sdusheke@mhanet.com as outlined in the intent to participate document. Once all paperwork is received, a stipend check will be issued to the Participant. Reimbursement will not be made if all necessary documentation is not submitted.

Contact Information

Name: _____ Title: _____

Hospital: _____

Requirements (initial to attest to completion and agreement)

____ Participated in MHA supply chain educational series webinar (four sessions)
Session One: Best Practices in Healthcare Supply Chain Management (August 7)
Session Two: Supply Chain Process Improvement (August 14)
Session Three: Supply Chain Considerations During Disruptions and Disasters (August 21)
Session Four: Supply Chain Disruption in Missouri Hospitals (September 4)

For Participants Using Stipend to Purchase PPE and/or Respiratory Supplies

____ Participant is using stipend to purchase supplies that are being used to re-build caches or increase PAR levels of PPE and/or respiratory supplies (eligible supplies listed below)

____ If purchasing supplies, Participant has developed a plan to rotate stock if using funds to supply caches to ensure product does not expire or if increasing PAR levels has developed a plan to determine those levels and how they will sustain those levels

For Participants Using Stipend for Participation in Supply Chain Process Improvement Visit

____ Hospital is using stipend to receive a supply chain process improvement visit Participant will not receive stipend check, MHA will pay for visit expenses on the hospital's behalf)

Eligible Supplies

- Personal Protection Equipment (masks, gloves, gowns, eye protection, face protection PAPRs, CAPRs, shoe and head covers)
- Supplies Used in the Care of Respiratory Patients

Request for Reimbursement (if purchasing supplies)

Supply(ies) requested (include item, cost per item, quantity, and total cost):

_____

_____

_____

Justification for Supplies Requested

Use of Supplies (check box):

- ☐ Increase PAR levels in hospital
- ☐ Resupply cache at hospital

Detailed Description:

_____

_____

_____

_____

For MHA Tracking:

- ☐ Request received on _____ (date)
- ☐ Request approved on _____ (date) by _____
- ☐ Participant notified of approval on _____ (date) by _____
- ☐ Documentation returned by Participant.
  - ☐ Invoice
  - ☐ Proof of receipt
  - ☐ Proof of purchase
- ☐ Approved by QSR staff _____ (name and date)
- ☐ Approved by Accounting staff _____ (name and date)
- ☐ Participant notified of reimbursement check
- ☐ Reimbursement check sent

ATTACHMENT B

Equipment and Supplies

Real property, equipment, and intangible property, that are acquired or improved with the funding must be held in trust by the Participant as trustee for the beneficiaries of the COVID-19 Program under which the property was acquired or improved. ASPR or MHA may require the Participant to record liens or other appropriate notices of record to indicate that personal or real property has been acquired or improved with the funding and that use and disposition conditions apply to the property.

Additional Requirements for Equipment

The Participant may use its own property management standards and procedures provided they meet all the following with respect to equipment purchased with the funding:

A. The Participant must, at a minimum, provide the equivalent insurance coverage for equipment acquired or improved with the funding as provided to other equipment owned by Participant.

B. Subject to the other obligations and conditions set forth herein, title to equipment acquired or improved under the funding will vest upon acquisition in the Participant. Title must vest in the Participant subject to the following conditions:
   i. Use of the equipment for the authorized purposes of the COVID-19 Program during the period of performance, or until the equipment is no longer needed for the purposes of the project.
   ii. Participant may not encumber the equipment without approval of ASPR or MHA.
   iii. Use and disposal of the equipment in accordance with the requirements below.

C. Procedures for managing equipment (including replacement equipment), whether acquired in whole or in part under the funding, until disposition takes place will, at a minimum, meet the following requirements:
   i. Property records must be maintained that include a description of the equipment, a serial number or other identification number, the source of funding for the equipment (including the FAIN), who holds title, the acquisition date, and cost of the equipment, percentage of Federal participation in the project costs for the funding under which the property was acquired, the location, use and condition of the equipment, and any ultimate disposition data including the date of disposal and sale price of the equipment.
   ii. A physical inventory of the equipment must be taken and the results reconciled with the records at least once every two years.
   iii. A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the equipment. Any loss, damage, or theft must be investigated.
   iv. Adequate maintenance procedures must be developed to keep the equipment in good condition.

v. If the Participant is authorized or required to sell the equipment, proper sales procedures must be established to ensure the highest possible return.

D. When original or replacement equipment acquired under the funding is no longer needed for the COVID-19 Program or for other activities currently or previously supported by ASPR, except as otherwise provided in Federal statutes, regulations, or ASPR disposition instructions, the Participant must request disposition instructions from ASPR if required by the terms and conditions of the Award. Disposition of the equipment will be made as follows, in accordance with ASPR disposition instructions:

i. Items of equipment with a current per unit fair market value of $5,000 or less may be retained, sold or otherwise disposed of with no further obligation to ASPR.

ii. If ASPR fails to provide requested disposition instructions within 120 days, items of equipment with a current per-unit fair-market value in excess of $5,000 may be retained by the Participant or sold. ASPR is entitled to an amount calculated by multiplying the current market value or proceeds from sale by ASPR's percentage of participation in the cost of the original purchase. If the equipment is sold, ASPR may permit the Participant to deduct and retain from the Federal share $500 or ten percent of the proceeds, whichever is less, for its selling and handling expenses.

iii. The Participant may transfer title to the equipment to the Federal Government or to an eligible third party provided that, in such cases, the Participant must be entitled to compensation for its attributable percentage of the current fair market value of the property.

iv. In cases where a Participant fails to take appropriate disposition actions, ASPR may direct the Participant to take disposition actions.

<u>Additional Requirements for Supplies</u>

A. Title to supplies will vest in the Participant upon acquisition. If there is a residual inventory of unused supplies exceeding $5,000 in total aggregate value upon termination or completion of the COVID-19 Program and the supplies are not needed for any other Federal award, the Participant must retain the supplies for use on other activities or sell them, but must, in either case, compensate the Federal Government for its share. The amount of compensation must be computed in the same manner as for equipment.

B. As long as the Federal Government retains an interest in the supplies, the Participant must not use supplies acquired under the funding to provide services to other organizations for a fee that is less than private companies charge for equivalent services, unless specifically authorized by Federal statute.

ATTACHMENT C

I. Standard Terms and Conditions of ASPR award:

a. The terms and conditions of this ASPR Award and other requirements have the following order of precedence if there is any conflict in what they require: (1) Title III of Division A of the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 and section 311 of the Public Health Service Act, as amended.(2) terms and conditions of the award (3) 45 CFR Part 75; (4) HHS Grants Policy Statement. References in the HHS Grants Policy Statement to 45 CFR part 74 or 45 CFR part 92 have been superseded by 45 CFR 75.

b. This grant is subject to the applicable requirements of the Uniform Administrative Requirements for Awards and Subawards to Institutions of Higher Education, Hospitals, Other Nonprofit Organizations, and Commercial Organizations under Title 45 Code of Federal Regulations, Part 75. Any applicable statutory or regulatory requirements, including 45 CFR Part 75 and 2 CFR Part 200, directly apply to this award apart from any coverage in the HHS GPS The terms and conditions of this Notice of Award and other requirements have the following order of precedence if there is any conflict in what they require: (1) Public Health Service Act, Section 311 (42 U.S.C. 243).(2) terms and conditions of the award (3) CFR Part 75; (4) HHS Grants Policy Statement.

II. Subaward Equal Treatment

a. The Participant must comply with 45 CFR 75, including the provision that no State or local government Participant nor any intermediate organization with the same duties as a governmental entity shall, in the selection of service providers, discriminate for or against an organization's religious character or affiliation.

III. Public Policy Requirements

a. All public policy requirements included in "Public Policy Requirements" in Part I and Part II (pages II-2 throughII-24) of the HHS GPS apply as appropriate. See FOA#: EP-U3R-20-001 under which this award was issued for more information.

IV. Mandatory disclosures

a. The non-Federal entity or applicant for a Federal award must disclose, in a timely manner, in writing to the Federal awarding agency or pass-through entity all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award. Failure to make required disclosures can result in any of the remedies described in §200.338 Remedies for noncompliance, including suspension or debarment. (See also 2 CFR part 180 and 31 U.S.C. 3321).

V. English Language

a. All Federal financial assistance announcements and Federal award information must be in the English language. Applications must be submitted in the English language and must be in the terms of U.S. dollars. If the Federal awarding agency receives applications in another currency, the Federal awarding agency will evaluate the application by converting the foreign currency to United States currency using the date specified for receipt of the application.

b. Non-Federal entities may translate the Federal award and other documents into another language. In the event of inconsistency between any terms and conditions of the Federal award and any translation into another language, the English language meaning will control. Where a significant portion of the non-Federal entity's employees who are working on the Federal award are not fluent in English, the non-Federal entity must provide the Federal award in English and the language(s) with which employees are more familiar.

VI. Gun Control

a. None of the funds made available through this award may be used, in whole or in part, to advocate or promote gun control.

VII. Pornography

a. None of the funds made available through this award may be used to maintain or establish a computer network unless such network blocks the viewing, downloading, and exchanging of pornography.

VIII. Lobby Restrictions

a. None of the funds made available through this award shall be used to pay any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with any of the following covered Federal actions: the awarding of any Federal contract, grant or cooperative agreement, the making of any Federal loan, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement. Influencing or attempting to influence means making, with the intent to influence, any communication to or appearance before an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of congress in connection with any covered action.

IX. Sterile Needle Distribution

a. Recipients may not use funds to purchase sterile needles or syringes for the hypodermic injection of any illegal drug: provided that such limitation does not apply to the use of funds for elements of a program other than making such purchases if the relevant State or local health department, in consultation with the Centers for Disease Control and Prevention,

determines that the State or local jurisdiction, as applicable, is experiencing or is at risk for a significant increase in hepatitis infections or an HIV outbreak due to injection drug use, and such program is operating in accordance with State and local law.

X. Trafficking In Persons

a. Participants may not engage in severe forms of trafficking in persons during the period of time that the award is in effect;
b. Participants may not procure a commercial sex act during the period of time that the award is in effect; or
c. Participants may not use forced labor in the performance of the award or subawards under the award.
d. You must inform us immediately of any information you receive from any source alleging a violation of a prohibition in this paragraph.

XI. Reducing Text Messaging While Driving

a. In accordance with Executive Order 13513, Federal Leadership On Reducing Text Messaging While Driving, dated October 1, 2009, contractors, subcontractors, and recipients and subrecipients are encouraged "to adopt and enforce policies that ban text messaging while driving company-owned or -rented vehicles or GOV, or while driving POV when on official Government business or when performing any work for or on behalf of the Government. Agencies should also encourage Federal contractors, subcontractors, and grant recipients and subrecipients as described in this section to conduct initiatives of the type described in section 3(a) of this order."

XII. Publications

a. All publications, including: research publications press releases other publications or documents about research that is funded by ASPR must include the following two statements: A specific acknowledgment of ASPR grant support, such as: "Research reported in this [publication/press release] was supported by [name of the program office(s), or other ASPR offices] the Department of Health and Human Services Office of the Assistant Secretary for Preparedness and Response under award number [specific ASPR grant number(s)].”A disclaimer that says: "The content is solely the responsibility of the authors and does not necessarily represent the official views of the Department of Health and Human Services Office of the Assistant Secretary for Preparedness and Response."

XIII. Federal Information Security Management Act (FISMA):

a. If applicable, all information systems, electronic or hard copy which contain federal data need to be protected from unauthorized access. This also applies to information associated with ASPR grants. Congress and the OMB have instituted laws, policies and directives that govern the creation and implementation of federal information security practices that pertain

specifically to grants and contracts. The current regulations are pursuant to the Federal Information Security Management Act (FISMA), Title III of the E-Government Act of 2002 Pub. L. No. 107-347.

XIV. Health and Safety Regulations and Guidelines

a. Participants are responsible for meeting applicable Federal, State, and local health and safety standards and for establishing and implementing necessary measures to minimize their employees' risk of injury or illness in activities related to ASPR grants. In addition to applicable Federal, State, and local laws and regulations, the following regulations must be followed when developing and implementing health and safety operating procedures and practices for both personnel and facilities:

   i. 29 CFR 1910.1030, Blood borne pathogens; 29 CFR 1910.1450, Occupational exposure to hazardous chemicals in laboratories; and other applicable occupational health and safety standards issued by the Occupational Health and Safety Administration (OSHA) and included in 29 CFR 1910. These regulations are available at http://www.osha.gov/pls/oshaweb/owastand.display_standard_group?p_toc_level=1&p_part_number =1910.

   ii. Nuclear Regulatory Commission "standards and Regulations, pursuant to the Energy Reorganization Act of 1974 (42 U.S.C. 5801 et seq.). Copies may be obtained from the U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001. The following guidelines are recommended for use in developing and implementing health and safety operating procedures and practices for both personnel and facilities: Biosafety in Microbiological and Biomedical Laboratories, CDC and NIH, HHS. This publication is available at http://www.cdc.gov/OD/ohs/biosfty/bmbl5/BMBL_5th_Edition.pdf.

   iii. Prudent Practices for "Safety in Laboratories (1995), National Research Council, National Academy Press, 500 Fifth Street, NW, Lockbox 285, Washington, DC 20055 (ISBN 0-309-05229-7). This publication can be obtained by telephoning 800-624-8373. It also is available at http://www.nap.edu/catalog/4911.html. Grantee organizations are not required to submit documented assurance of their compliance with or implementation of these regulations and guidelines. However, if requested by ASPR, Participants should be able to provide evidence that applicable Federal, State, and local health and safety standards have been considered and have been put into practice.