

**HEALTH FIRST INDIANA**  
**CORE PUBLIC HEALTH SERVICES AGREEMENT**

THIS CORE PUBLIC HEALTH SERVICES AGREEMENT (“Agreement”) is entered into by and between the Wabash County YMCA (“Service Provider”) and the Wabash County Health Department (“WCHD”).

**WITNESSETH:**

WHEREAS, Wabash County Board of Commissioners must approve all contracts brought forth by the Wabash County Health Department utilizing Health First Indiana (HFI) funds in Wabash County, Indiana;

WHEREAS, YMCA is a nonprofit organization that will offer a Diabetes Prevention Program aimed at reducing the prevalence of diabetes in Wabash County, Indiana;

WHEREAS, WCHD is a government agency providing core public health services to the citizens of Wabash County, Indiana (“Patients”);

WHEREAS, all parties are desirous of entering into this Agreement to promote and protect the health and wellbeing of the citizens of Wabash County;

NOW THEREFORE, in consideration of the mutual covenants and agreements contained herein, the parties hereby agree as follows:

1. **Purpose.** That the Wabash County Health Department agrees to provide financial support to ensure the successful implementation of the Health First Indiana Initiative (HFI) to Service Provider for the purpose of ensuring core public health services are provided to Patients.
2. **Services.** The Service Provider agrees to deliver the following core public health services (“Services”):
  - **Chronic Disease Prevention and Reduction.**
3. **Funding Request.** Service Provider shall submit a letter of request for funding each year. The current Request letter is attached hereto as Appendix A.
4. **Reporting.** Service Provider shall submit monthly reports to WCHD in the form attached hereto as Appendix B. Completed forms are due by the fifth (5<sup>th</sup>) day of each month during the Term of this Agreement. Service Provider shall also provide additional reporting information as reasonably requested by WCHD.
5. **Payment.** The Service Provider agrees that monetary payments will be allocated towards delivery of the Services. Funding for the Services shall be delivered as follows:
  - Total compensation shall be \$20,000.00;
  - Service Provider shall receive \$20,000 towards Chronic Disease Prevention and Reduction;
  - Payments equaling \$20,000 may be made if Service Provider can provide data on the Appendix B form.

**6. Fee Schedule and Billing.** Service Provider shall submit an invoice to WCHD. WCHD shall remit payment to Service Provider within forty-five (45) days of receipt of said invoice.

**7. Term and Termination.**

**7.1 Term.** This Agreement shall be effective upon being signed by the Parties (“Effective Date”). The initial term of this Agreement shall commence on the Effective Date and continue for one (1) year.

**7.2 Termination.** Notwithstanding the foregoing, either party may terminate this Agreement at any time with or without cause, by giving the other party thirty (30) days’ written notice, which notice shall specify the effective date of termination. Upon termination, Service Provider shall be compensated for work performed in furtherance of the Services, not to exceed to the total compensation, or shall reimburse the WCHD for monies received under this Agreement but not yet expended in furtherance of the Services, as of the date of termination.

**8. Miscellaneous.**

**8.1. HIPAA Compliance.** The parties agree they will comply in all material respects with all federal and state mandated regulations, rules or orders applicable to privacy, security and electronic transactions, including without limitation, regulations promulgated under Title II Subtitle F of the Health Insurance Portability and Accountability Act (Public Law 104-191) (“HIPAA”). If, within thirty (30) days of either party first providing notice to the other of the need to amend the Agreement to comply with Laws, the parties, acting in good faith, are (i) unable to mutually agree upon and make amendments or alterations to this Agreement to meet the requirements in question, or (ii) alternatively, the parties determine in good faith that amendments or alterations to meet the requirements are not feasible, then either party may terminate this Agreement upon thirty (30) days prior written notice.

**8.2. Administration.** Each party shall remain responsible for its own administration, financing, staffing, supplies and budget for the Services. The parties shall not jointly acquire, hold, or dispose of real or personal property under the terms of this Agreement. The parties acknowledge and agree that the purpose of this Agreement is not to induce any referrals or to otherwise generate any business between the parties, but instead to contract for commercially reasonable and legitimate services.

**8.3. Non-Discrimination.** All Services provided under this Agreement shall be provided without regard to race, color, creed, sex, age, disability status, payor source or national origin of the resident requiring such Screening Services. The parties agree to comply with all applicable laws prohibiting discrimination.

**8.4. Notices.** All notices, records, reports or correspondence between the parties shall be sent to the following locations:

WABASH COUNTY HEALTH DEPARTMENT:

Wabash County Health Department  
Attention: Health Officer  
89 W. Hill St.  
Wabash, IN 46992

Wabash County YMCA:

YMCA  
Attention: Dean Gogolewski  
500 S. Cass St.  
Wabash, IN 46992

- 8.5. Entire Agreement.** This Agreement shall constitute the entire agreement between the parties and any prior understanding or representation of any kind preceding the date of this Agreement shall not be binding upon either party except to the extent incorporated into this Agreement.
- 8.6. Amendments.** This Agreement may not be amended or modified unless mutually agreed upon in a writing signed by an authorized representative of each party.
- 8.7. Severability.** In the event any provision(s) of this Agreement shall be determined to be unenforceable or otherwise invalid for any reason by a Court of competent jurisdiction, such remaining provision(s) shall remain in full force and effect to the extent permitted by law.
- 8.8. Nonwaiver.** The failure of either party to this Agreement to insist upon the performance of any of the terms and conditions of this Agreement, or the waiver of any breach of any of the terms and conditions of this Agreement, shall not be construed as thereafter waiving any such terms and conditions, but the same shall continue and remain in full force and effect as if no such forbearance or waiver had occurred.
- 8.9. Governing Law.** This Agreement has been executed under and shall be governed by the laws of the State of Indiana, without regard to conflict of law principles.
- 8.10. Savings Clause.** Notwithstanding any term contained herein, this Agreement shall not be construed as to require the commission of any act contrary to law, and wherever there is any conflict between any provision of this Agreement and any local, State or Federal statute, regulation, ordinance or resolution, the latter shall prevail, but in the event of such conflict, the provisions of this Agreement affected shall be limited or applied, if possible, only to the extent necessary to be valid and enforceable to the maximum extent possible.
- 8.11. Dispute Resolution.** The parties expressly agree that any dispute concerning this Agreement, or the performance of any of its terms, shall first be reasonably attempted in good faith to be resolved informally. The parties expressly agree that, upon written request of any party, such dispute shall be submitted to mediation within the State of Indiana whereby the parties shall attempt in good faith to resolve such dispute. If such medication does not resolve such dispute, either may commence litigation and hereby agree exclusive jurisdiction and venue of any dispute shall be in the Wabash County Superior Court.

[Signature page follows]

**HEALTH FIRST INDIANA**  
**CORE PUBLIC HEALTH SERVICES AGREEMENT**  
**Signature Page**

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed as their official act by their respective representative(s) on the dates set out below, each of whom is duly authorized to execute the same.

**BOARD OF COMMISSIONERS OF  
WABASH COUNTY, INDIANA**

**WABASH COUNTY YMCA**

  
\_\_\_\_\_  
Jeff Dawes

By:   
\_\_\_\_\_ CEO

  
\_\_\_\_\_  
Brian Haupt

Print: Don Bobocousch

Title: CEO

  
\_\_\_\_\_  
Barry Eppley

Date: 11/18/2024

Attest:   
\_\_\_\_\_  
Shelly Baucce, Auditor

Date: 11/18/24

## Appendix A



FOR YOUTH DEVELOPMENT\*  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

October 11, 2024

Rich and Brandi,

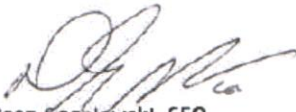
I hope this message finds you both well. We are excited to share that the Wabash County YMCA is seeking a \$20,000 grant from the Wabash County Health Department to support the implementation of a Diabetes Prevention Program, in collaboration with Parkview Wabash Hospital.

This program will serve a critical need in our community by providing individuals at risk of diabetes with the tools and resources necessary to improve their health outcomes. The grant will help fund the purchase of an InBody Scale, which will be used to track key health metrics, as well as cover the costs of A1C blood tests to monitor participant progress.

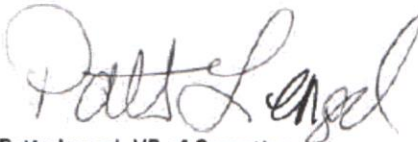
With your support, we aim to create a healthier and more resilient community, empowering individuals to take control of their health and reduce their risk of diabetes.

Thank you for considering this important request. We look forward to the opportunity to partner with you and the Wabash County Health Department to make a lasting impact.

Best regards,



Dean Sogolewski, CEO  
Wabash County YMCA  
[deang@wabashcountyyymca.org](mailto:deang@wabashcountyyymca.org)



Patty Lengel, VP of Operations  
Wabash County YMCA  
[plengel@wabashcountyyymca.org](mailto:plengel@wabashcountyyymca.org)

**Project Title: Diabetes Prevention Program (DPP) at Wabash County YMCA**

**Executive Summary:**

The Wabash County YMCA, in partnership with Parkview Wabash Hospital, seeks funding to launch a comprehensive Diabetes Prevention Program (DPP) aimed at reducing the prevalence of Type 2 diabetes in Wabash County. This six-month program will follow the National Institute of Health or Centers for Disease Control DPP curriculum, focusing on lifestyle changes that include weight management, exercise, and nutritional education. To enhance the program's effectiveness, we seek funding for the purchase of an InBody380 Scale, which will allow us to measure critical health metrics such as BMI, weight, muscle mass, fat mass, and water retention. This data will be used to track participants' progress and tailor the program to individual needs.

Our goal for the first year is to enroll 120 participants in the Diabetes Prevention Program, with an initial cost of \$293 per person to deliver the program. After the one-time purchase of the InBody Scale, this cost drops to \$214 per person. Both amounts offer a highly cost-effective alternative to the medical expenses associated with diabetes-related conditions.

Once the program is established, its reach will only expand, allowing us to help even more individuals. With additional grant funding from local and national foundations and grantors, we can increase our capacity and continue the vital work needed to improve the health of our community.

**Problem Statement:**

Type 2 diabetes is a growing concern in Wabash County, with many residents at risk due to obesity, sedentary lifestyles, and poor nutrition. Early intervention is critical to preventing the onset of diabetes and managing the associated health risks. However, current community resources are insufficient to provide the necessary support for at-risk individuals.

**Program Description:**

The Diabetes Prevention Program will run for six months and will include the following key components:

- **Curriculum:** The program will follow the NIH or CDC DPP curriculum, designed to help participants achieve a 5-7% weight loss through healthy eating, increased physical activity, and behavior changes.
- **InBody380 Scale:** The program will utilize the InBody380 scale to measure participants' BMI, weight, muscle mass, fat mass, and water retention. These metrics will be recorded at the beginning, midpoint, and end of the program to assess progress and guide individualized interventions.
- **Blood Panels:** Participants will undergo blood panels at the beginning and end of the program to measure A1C levels, providing a clear indicator of diabetes risk and progress.
- **Physical Measurements:** Regular monitoring of blood pressure and other physical metrics will be conducted throughout the program to ensure comprehensive health tracking.

- **Exercise Component:** Participants will receive a six-month membership to the Wabash County YMCA, providing unlimited access, with a target goal to engage in at least 120 minutes of weekly exercise using the YMCA's Technogym equipment. This state-of-the-art equipment is designed to improve cardiovascular health, build muscle mass, and reduce body fat, supporting participants in achieving their wellness goals.
- **Nutrition Seminars:** Nutrition seminars will be conducted by Parkview Hospital to educate participants on healthier eating habits, focusing on balanced diets, portion control, and the impact of food choices on blood sugar levels.

**Goals and Objectives:**

- **Behavioral Changes:** Encourage long-term lifestyle changes, including regular exercise and healthy eating habits.
- **Improved Physical Health:** Record improvements in blood pressure, BMI, and other physical metrics for all participants.
- **Lower A1C Levels:** Achieve a reduction in A1C levels for 75% of participants by the end of the six-month program.
- **Weight Loss:** Help participants achieve a 5-7% reduction in body weight.

**Wabash County YMCA Diabetes Prevention Program Budget:**

Diabetes Prevention Program	
Participants	120 people
Timeframe	12 months
<b>INCOME</b>	
Health Department Grant	\$20,000.00
Program Income-Non-Member	\$19,800.00
Program Income - Member	\$10,800.00
Financial Assistance	-\$15,300.00
	<b>\$35,300.00</b>
<b>EXPENSES</b>	
InBody380 Scale	\$9,560.00
Bloodwork	\$11,760.00
Nutrition Series	\$600.00
Coordinator	\$7,800.00
Payroll Tax	\$596.70
Incentives	\$1,000.00
Marketing	\$1,200.00
Program Supplies	\$2,000.00
Facility Costs*	\$674.70
<b>TOTAL EXPENSE</b>	<b>\$35,191.40</b>
	<b>\$293.26 per person</b>

**Evaluation and Reporting:**

Participant progress will be monitored through regular assessments using the InBody380 scale, blood panels, and physical measurements. A final report will be provided to the Wabash County Health Department, detailing the outcomes of the program, including changes in A1C levels, weight loss, and other health improvements.

**Sustainability:**

The Wabash County YMCA is dedicated to sustaining the Diabetes Prevention Program beyond the initial six-month period. We will actively pursue additional funding from local businesses and community organizations to ensure the program's longevity and broaden its impact, reaching more at-risk individuals across Wabash County.

**Conclusion:**

The Diabetes Prevention Program at the Wabash County YMCA is a vital step in addressing the growing challenge of Type 2 diabetes in our community. With the continued support of the Wabash County Health Department, we can equip participants with the tools and education necessary to make sustainable health improvements, ultimately reducing the long-term impact of diabetes and fostering a healthier future for our community.



# CHRONIC DISEASE PREVENTION AND REDUCTION

## Wabash County Health Department

### ACTIVITY

Start Date: \_\_\_ / \_\_\_ / \_\_\_ Stop Date: \_\_\_ / \_\_\_ / \_\_\_ Number of Unique People Served: \_\_\_\_\_

Stakeholders Engaged with this Activity: \_\_\_\_\_  
\_\_\_\_\_

### SCREENING AND REFERRALS

Number of people screened for high blood pressure through LHD or partners \_\_\_\_\_

Number of people identified with undiagnosed high blood pressure through LHD or partners \_\_\_\_\_

Number of people screened with a hemoglobin A1c through LHD or partners \_\_\_\_\_

Number of people identified with elevated hemoglobin A1c \_\_\_\_\_

Number of people screened for diabetes risk factors through LHD or partners \_\_\_\_\_

Number of people referred to or enrolled in a diabetic prevention program \_\_\_\_\_

Number of people referred to or enrolled in a diabetes self-management education support program \_\_\_\_\_

Number of people screened for high cholesterol through LHD or partners \_\_\_\_\_

Number of people identified with high cholesterol \_\_\_\_\_

Number of people screened for cancer through LHD activity (breast, colon cancer, etc.) \_\_\_\_\_

Number of people screened for BMI \_\_\_\_\_

Number of people referred to a weight treatment or obesity prevention program \_\_\_\_\_

Number of people identified as having a BMI over 30 \_\_\_\_\_

Number of individuals with asthma who receive an in-home trigger assessment \_\_\_\_\_

Number of people referred for chronic disease preventative care \_\_\_\_\_

Number of people referred for cancer screening \_\_\_\_\_

Number of people provided for cancer screening \_\_\_\_\_

Number of people screening positive for food insecurity \_\_\_\_\_

Number of people referred to a food assistance program \_\_\_\_\_

Number of people referred to the IDOH Breast and Cervical Cancer Program \_\_\_\_\_

**PROGRAMMING**

Number of adults participating in nutrition and physical activity education programming \_\_\_\_\_

Number of seniors participating in nutrition and physical activity education programming \_\_\_\_\_

Number of cancer risk reduction and prevention programs provided by the LHD \_\_\_\_\_

Number of cancer survivorship related services provided (smoking cessation resources, cancer support groups, respite opportunities for care givers) \_\_\_\_\_

**OTHER SERVICES**

Type of other \_\_\_\_\_  
\_\_\_\_\_

Number of people receiving other services \_\_\_\_\_