# PROCEDURES APPROVED

# SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA





FROM: Office on Aging SUBMITTAL DATE:

March 29, 2010

SUBJECT: Fiscal Year 2009-2010 Area Plan Amendment #2 Standard Agreement AP-0910-21 between California Department of Aging (CDA) and County of Riverside, Office on Aging.

## **RECOMMENDED MOTION:** That your Honorable Board:

- 1. Approve and Authorize Chair to execute Standard Agreement AP-0910-21 for FY 2009-2010 (July 1, 2009 to June 30, 2010) with the California Department of Aging (CDA).
- 2. Return all 4 copies to the Office on Aging for further processing.
- 3. Direct the Auditor-Controller's Office to increase Estimated Revenue and Appropriations by \$753,528 for FY 09/10 as outlined in Attachment "A"

BACKGROUND: The attached contract includes Federal and State transfers requested by our agency and approved by California Department of Aging. These funds support programs and activities for seniors countywide that included Supportive Services Title IIIB, Congregate and Home Delivered Meals programs Title IIIC.

(Continued next page...)

•		Edward F. Wals	L & Was		
	Current F.Y. Total Cost:	\$753,528	In Current Year I	 3udget:	No
FINANCIAL DATA	Current F.Y. Net County Cost				Yes
	Annual Net County Cost:	\$ 0	For Fiscal Year:		09/10
SOURCE OF FUNDS: Federal 100%				Positions To Deleted Per A	
				Requires 4/5 V	∕ote ⊠
C.E.O. RECOM	MENDATION:	APPROVE	7.		
County Execut	tive Office Signature	BY: Lani Sioson	<u>≥10800</u>		

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Jep't Recomm∴ Exec. Ofc.

Prev. Agn. Ref.:3.64 Sept.29,2009 | District: All

**Agenda Number:** 

ATTACHMENTS FILED WITH THE CLERK OF THE BOARD

### Continued.

Preventive Health and Medication Management Title IIID, Family Caregiver Program Title IIIE, Long Term Care Ombudsman Title VIIA, Elder Abuse Prevention Title VIIB.

It also includes information and instruction for the following adjustments:

- Policy change on Federal One Time Only (OTO) fund uses
- Additional Unallocated Baseline Grant Funding

In our FY 09-10 budget submitted to the Board and approved on September 29, 2009 Agenda item 3.64; our agency submitted a Title III/VII / CBSP budget amount of \$6,162,817. The term of this agreement remains unchanged (7/1/09 – 6/30/10) however; the amended agreement amount totals \$6,916,345; therefore, an adjustment of \$753,528 is needed as shown on Attachment "A".

This adjustment includes an increase of \$430,587 on One Time Only (OTO). It reflects also a baseline reduction of Federal funds in Disease Prevention and Elder Abuse of \$1,298 and increases of \$324,239 Baseline Federal funds in Supportive Services Program, Congregate and Home Delivered Meals Program, Disease Prevention Program and Family Caregiver Program for a net total agreement of \$753,528.

The California Department of Aging (CDA) has amended the California Code of Regulations (CCR), Title 22, Section 7314 regarding the use of federal OTO funds. It removes the prohibition against using OTO to increase baseline services effective January 20, 2010. State forms has been amended to reflect the new changes on the uses of One Time Only funds.

Other policy requirements remain in effect for OTO uses:

- OTO funds must be used in the program from which they were incurred and are non-transferable to another program.
- OTO purchases must be for allowable program costs
- Subcontractor receiving OTO funds must have an existing contact with the AAA for the same program from which the OTO funds accrued.

There is no impact to county general fund and we are requesting for no additional matching requirements.

# OFFICE ON AGING ATTACHMENT A

# Adjusting revenue and appropriations:

INCREASED ESTIMATED 21450-5300100000-767140		753,528 \$753,528
INCREASED APPROPRIAT 21450-5300100000-527780 21450-5300100000-536200 21450-5300100000-546140 21450-5300100000-546320	FIONS Special Program Expense Contributions to Non-Co Agency Equipment-Office Vehicles-Cars/Light Trucks	59,689 610,026 18,000 <u>65,813</u> \$753,528

Attachment A: Area Plan Amendment #2 with CDA

Date: 03/22/10

STANDARD AGREEMENT AMENDMENT		
STD. 213 A (Rev 6/03)  CHECK HERE/IF ADDITIONAL PAGES ARE ATTACHED Pages	AGREEMENT NUMBER	AMENDMENT NUMBER
	AP-0910-21 REGISTRATION NUMBER	<b>-</b>
	REGISTRATION NO.	
1. This Agreement is entered into between the State Agency and	Contractor named below	:
STATE AGENCY'S NAME		
California Department of Aging		
COUNTY OF RIVERSIDE		
a The term of this		
Agreement is July 1, 2009 through	June 30, 2010	
5 A A A A A A A A A A A A A A A A	Lundrod	forty five dollars
5. The maximum difference bundred six	teen thousand, three hundred	orty ive domain
The parties mutually agree to this amendment as follows. All a	actions noted below are t	by this reference made a part
of the Agreement and incorporated herein:		
This amendment incorporates the following changes:		
The amount of the contract is increased due to allocation or	f One-Time-Only funding a	nd an increase in baseline
The amount of the contract is increased due to allocation of the contract is increased due to all the contract is incre	il Olio Timo ottiy	
federal funding.  • Effective, January 2010, Exhibit B, Article I, FUNDS, G.1, t	he word 'cannot' is deleted	
<ul> <li>Effective, January 2010, Exhibit B, Article I, FUNDS, G.3, the Effective, January 2010, Exhibit B, Article I FUNDS, G.3, the Effective of the Plant By 2010 Area Plant</li> </ul>	ne word 'cannot' is deleted.	ected in Revision 2.
<ul> <li>Effective, January 2010, Exhibit B, Article I FUNDS, G.3, tr</li> <li>Transfers between line items to the FY 2009-10 Area Plan</li> </ul>	Budget Revision Tare rent	libit B, pages 10 and 11,
Exhibit B. page 10, titled Budget Display, Amendment 2, to	,	
Budget Display Amendment 1.  The Area Plan Budget, Revision 2, is hereby incorporated	by reference and replaces	the Area Plan Budget,
The Area Plan Budget, Revision 2, is hereby insorperate and a provision 1.	•	
Revision 1		
t and itions shall remain the same.		
All other terms and conditions shall remain the same.	2	
IN WITNESS WHEREOF, this Agreement has been executed by the p	parties deleto.	CALIFORNIA
CONTRACTOR	83	Department of General Services Use Only
CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership		·
CONTRACTOR'S NAME (If other than an individual, state whether	, etc.) = 3	
SOLINITY OF DIVERSIDE	, etc.)	
COUNTY OF RIVERSIDE		
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