

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA** 4326



FROM: Community Health Agency/Department of Public Health

SUBMITTAL DATE:
September 29, 2011

SUBJECT: Ratify receipt of Award Letter TBCB12CTCA from the California Department of Public Health Tuberculosis Control Branch (CDPH TBCB) for tuberculosis (TB) prevention and control activities and ratify the Eighth Amendment to the Agreement with the American Lung Association in California (ALAC).

RECOMMENDED MOTION: That the Board of Supervisors:

- 1) Ratify receipt of Award Letter TBCB12CTCA from the California Department of Public Health Tuberculosis Control Branch (CDPH TBCB) for tuberculosis (TB) prevention and control activities in the amount of \$161,499 (\$148,537 for ALAC, \$12,962 for Riverside County Administrative Fees) for the period July 1, 2011 – June 30, 2012; and

RECOMMENDED MOTION: (continued on page 2)

Attachments

BC:rr

Susan D. Harrington
Susan D. Harrington, Director of Public Health

FINANCIAL DATA	Current F.Y. Total Cost:	\$ 161,499	In Current Year Budget:	Yes
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	No
	Annual Net County Cost:	\$ 0	For Fiscal Year:	11/12
SOURCE OF FUNDS: 100% State funds.				Positions To Be Deleted Per A-30 <input checked="" type="checkbox"/>
				Requires 4/5 Vote <input type="checkbox"/>

C.E.O. RECOMMENDATION:

APPROVE

BY: *Debra Cournoyer*
Debra Cournoyer

County Executive Office Signature

ATTACHMENTS FILED
WITH THE CLERK OF THE BOARD OF SUPERVISORS
Dep't Recommendation ☒ Policy
Per Exec. Ofc.: ☐ Consent ☒ Policy

SUBJECT: : Ratify receipt of Award Letter TBCB12CTCA from the California Department of Public Health Tuberculosis Control Branch (CDPH TBCB) for tuberculosis (TB) prevention and control activities and ratify the Eighth Amendment to the Agreement with the American Lung Association in California (ALAC).

RECOMMENDED MOTION: (continued)

- 2) Ratify the Eighth Amendment to the Agreement with the American Lung Association in California (ALAC) for the monitoring of statewide TB prevention and control activities for the performance period of July 1, 2011 through June 30, 2012 in the amount of \$148,537 as is required by the State grant; and
- 3) Authorize the Chairman of the Board to sign three (3) original "Acceptance Award" letters and three (3) original copies of the Agreement with ALAC; and
- 4) Authorize the Purchasing Agent to sign future contract amendments limited to the shifting of funds between budgetary line items as needed to facilitate the delivery of program services. Any amendments which would alter the original approved total grant award or change any given fiscal year's revenues or modify the lifetime of the grant will be brought to the Board of Supervisors for approval.

BACKGROUND:

Tuberculosis (TB) continues to be a significant public health problem in California. The CDPH has awarded funds for TB prevention and control activities, which includes funding for American Lung Association in California (ALAC).

The contract with ALAC, TB education and prevention, was approved on January 11, 2000 and expired after seven amendments. A new contract #04-002 with ALAC for the Local Assistance Funding was approved by the Board on October 7, 2003, agenda item 3.15 for Fiscal Year 03/04 and has been renewed seven times. This Eighth amendment to the agreement is for the performance period July 1, 2011 through June 30, 2012 in the amount of \$161,499. Of this amount, \$148,537 is state funding for ALAC to support tuberculosis (TB) prevention and control activities, and \$12,962 is for Riverside County Administrative costs.

The amount of \$161,499 was included in Fiscal Year 11/12 therefore no budget adjustment is requested.

ACCEPTANCE OF AWARD

Riverside Community Health Agency, Department of Public Health

FUNDING PERIOD – July 1, 2011 through June 30, 2012

Award Number: TBCB12CTCA

Amount: \$161,499

I hereby accept this award. By accepting this award, I agree to the requirements as described in the Policies and Procedures Manual for FY 2011-2012, and any other conditions stipulated by the California Department of Public Health, Tuberculosis Control Branch.

Authorized Signature

Date

Print Name

Title

FORM

APPROVED COUNTY COUNSEL

BY:

NEAL R. KIPNIS

DATE