

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

624



FROM: Stanley Sniff, Sheriff - Coroner - PA

SUBMITTAL DATE:
April 13, 2010

SUBJECT: Acceptance of FY 2009 Anti-Drug Abuse (ADA) Recovery Act and California Multi-Jurisdictional Methamphetamine Enforcement Team (Cal-MMET) Recovery Act Grant Awards from the California Emergency Management Agency (Cal-EMA)

RECOMMENDED MOTION: Move that the Board of Supervisors:

1. Accept Grant Awards from the California Emergency Management Agency (Cal-EMA) in the amounts of \$470,238 for ADA Recovery Act and \$377,000 for Cal-MMET Recovery Act Grants; and
2. Approve and direct the Auditor Controller to make the budget adjustments on the attached Schedule A.

BACKGROUND:

On February 17, 2009 President Obama signed into law the American Recovery and Reinvestment Act (ARRA; better known as Recovery Act) of 2009. On February 4, 2010 the California Emergency Management Agency (Cal-EMA) released Requests for Applications (RFA) for the Anti-Drug Abuse (ADA) Recovery Act Program and California Multi-Jurisdictional Methamphetamine (Cal-MMET) Recovery Act Program. The Sheriff's Department has been notified that the County's grant applications have been approved for the amounts requested.

BR# 10-089 (continued on page 2)

Will Taylor
Stanley L. Sniff, Jr., Sheriff - Coroner - PA
Will Taylor, Director of Administration

FINANCIAL DATA	Current F.Y. Total Cost:	\$ 46,423	In Current Year Budget:	No
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	Yes
	Annual Net County Cost:	\$ 0	For Fiscal Year:	2009/2010

SOURCE OF FUNDS: 100% Federal ARRA Grant Funds	Positions To Be Deleted Per A-30	<input type="checkbox"/>
	Requires 4/5 Vote	<input checked="" type="checkbox"/>

C.E.O. RECOMMENDATION:

APPROVE

Robert Tremaine
BY: Robert Tremaine
Robert Tremaine

County Executive Office Signature

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Benoit, seconded by Supervisor Tavaglione and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Buster, Tavaglione, Stone, Benoit and Ashley
Nays: None
Absent: None
Date: May 4, 2010
xc: Sheriff, Auditor(2), E.O.

Kecia Harper-Ihem
Clerk of the Board
By: *Kecia Harper-Ihem*
Deputy

Prev. Agn. Ref.: | **District:** All | **Agenda Number:** 3.66

ATTACHMENTS FILED
WITH THE CLERK OF THE BOARD

FORM APPROVED COUNTY COUNSEL
BY: NEAL R. KIPNIS DATE: 4/13/10
BY: SAMUEL WONG DATE: 7/10/10
Departmental Concurrence

Dep't Recomm.: Consent Policy
Per Exec. Ofc.: Consent Policy

Acceptance of FY 2009 Anti-Drug Abuse (ADA) Recovery Act and California Multi-Jurisdictional Methamphetamine Enforcement Team (Cal-MMET) Recovery Act Grant Awards from the California Emergency Management Agency (Cal-EMA)

BR # 10-089

Page 2

BACKGROUND: (continued)

Grants funds for the ADA Recovery Act Program and Cal-MMET Recovery Act Program will be used to ensure the multi-disciplinary participation of each task force for the duration of this grant, March 1, 2010 through February 28, 2012. Funds will be used to create and retain positions to be added to the teams.

The ADA Recovery Act Program grant will enhance comprehensive illegal marijuana dispensary reduction efforts through coordinated prevention and enforcement activities, information sharing, and collaboration among the ADA task forces. For the Sheriff's Department the grant will fund .5 of a Full Time Equivalent (FTE) Investigator position. The Department is proposing to move an Investigator position that was formerly funded by the County as support to the Southwest Corridor Narcotics Task Force operating from the Perris Station (Investigator PCN 4052). Now this position will target the supplemental ADA Recovery Act Program grant project activities with the Southwest Corridor Narcotics Task Force. The County will now fund the remaining hours left unfunded by the grant to retain this position for utilization on the task force. This grant will also fund .5 FTE Deputy District Attorney IV for the District Attorney's Office, .5 FTE Investigative Technician for the Riverside Police Department and .5 FTE Police Officer for the Banning Police Department as well as overtime for police departments participating in the illegal marijuana dispensary project.

The Cal-MMET Recovery Act Program will allow the team to investigate illegal methamphetamine precursor supplier sales and target criminals involved in the possession/distribution of precursor or key chemicals utilized in the clandestine manufacture of methamphetamine. With the concurrence of the County Executive Office, an approved Investigator position will be unfrozen and added to the Cal-MMET Team. The grant will also fund overtime for a Deputy Probation Officer II for the Probation Department.

Budget adjustments in the amount of \$ 46,423 for the few remaining months of this FY the Sheriff's Department are detailed in the attached Schedule A. The Department will submit a request for budget adjustments for FY 10/11 in the new fiscal year. The District Attorney's Office and Probation Department are participating in the grants but will request their own budget adjustments.

The grant documents have been approved as to form by County Counsel.

Schedule A

SHERIFF'S DEPARTMENT

ADA Recovery Act

Increase Appropriations:

10000-2500300000-510040	Regular Salaries	\$7,542
10000-2500300000-518100	Budgeted Benefits	\$3,199

Increased Estimated Revenue:

10000-2500300000-767440	Fed ARRA – Sub Recipient	\$10,741
-------------------------	--------------------------	----------

Cal-MMET Recovery Act

Increase Appropriations:

10000-2500300000-510040	Regular Salaries	\$16,047
10000-2500300000-510420	Overtime	\$12,308
10000-2500300000-518080	Other Budgeted Benefits	\$521
10000-2500300000-518100	Budgeted Benefits	\$6,806

Increased Estimated Revenue:

10000-2500300000-767440	Fed ARRA – Sub Recipient	\$35,682
-------------------------	--------------------------	----------



**PUBLIC SAFETY AND VICTIM SERVICES PROGRAMS DIVISION
CALIFORNIA EMERGENCY MANAGEMENT AGENCY**

**PUBLIC SAFETY BRANCH
3650 SCHRIEVER AVENUE
MATHER, CALIFORNIA 95655
TELEPHONE: (916) 324-6724
FAX: (916) 324-9179**



April 6, 2010

Jerry Williams
Chief Deputy
Riverside County
4095 Lemon Street, 2nd Floor
Riverside, CA 92501

Dear Mr. Williams:

SUBJECT: NOTIFICATION OF APPLICATION APPROVAL
Anti-Drug Abuse Enforcement Team Recovery Act Program (200902601)
Award #: ZA09 01 0330
Cal EMA ID#: 065-00000

Congratulations! The California Emergency Management Agency (Cal EMA) has approved your application in the amount of \$470,238, subject to Budget approval. A copy of your approved subgrant is enclosed for your records.

Cal EMA will make every effort to process payment requests within 60 days of receipt.

This subgrant is subject to the Cal EMA Recipient Handbook. You are encouraged to read and familiarize yourself with the Cal EMA Recipient Handbook, which can be viewed on Cal EMA's website at www.calema.ca.gov.

Any funds received in excess of current needs, approved amounts, or those found owed as a result of a close-out or audit, must be refunded to the State within 30 days upon receipt of an invoice from Cal EMA.

Should you have questions on your subgrant, please contact your Program Specialist.

LEVS Grant Processing

Enclosure

c: Recipient's file

Cal EMA 065-00000

Award # 2A09010330

CALIFORNIA EMERGENCY MANAGEMENT AGENCY GRANT AWARD FACE SHEET (Cal EMA 2-101)

The California Emergency Management Agency, hereafter designated Cal EMA, hereby makes a grant award of funds to the following:

- 1. **Grant Recipient:** County of Riverside
hereafter designated Recipient, in the amount and for the purpose and duration set forth in this grant award.
- 2. **Implementing Agency:** Riverside County Sheriff's Department
- 3. **Project Title:** Anti-Drug Abuse Enforcement Recovery Act Prog. 4. **Grant Period:** 03/01/10 to 02/28/12

*Select the Grant year and fund source(s) from the lists below or type the appropriate acronym in box 9. Enter the amount(s) from each source. Please do not enter both State and Federal fund sources on the same line. Add any cash match(s). Block 10G is the Grant Award total amount.

Grant Year	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Project Cost
10/11	5. JAGR		\$470,238				\$0	
Select	6. Select						\$0	
Select	7. Select						\$0	
Select	8. Select						\$0	
Select	9.						\$0	
	10. TOTALS	\$0	\$470,238	\$470,238	\$0	\$0	\$0	10. Grand Total: \$470,238

11. This grant award consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurance of Compliance forms which are being submitted. I hereby certify I am vested with the authority, and have the approval of the City/County Financial Officer, City Manager, County Administrator, or Governing Board Chair, to enter into this grant award agreement; and all funds received pursuant to this agreement will be spent exclusively on the purposes specified. The grant recipient signifies acceptance of this grant award and agrees to administer the grant project in accordance with the statute(s), the Cal EMA Program Guidelines, the Cal EMA Recipient Handbook, the Federal OJP Financial Guide and Program Guidelines (if applicable), and the Cal EMA audit requirements, as stated in the applicable RFP or RFA. The grant recipient further agrees to all legal conditions and terms incorporated by reference in the applicable RFP or RFA, and agrees that the allocation of funds is contingent on the enactment of the State Budget.

12. **Official Authorized to Sign for Applicant/Grant Recipient:** **Federal Employer ID Number:** 95-60000930

Name: Valerie Hill Title: Undersheriff

Payment Mailing Address: PO Box 512 City: Riverside Zip: 92502-0512

Telephone: (951) 955-2492 FAX: (951) 955-2428 Email: VHill@riversidesheriff.org

Signature: *Valerie Hill* Date: 3/3/10

[FOR CalEMA USE ONLY]

I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.

[Signature] *[Signature]*
 Cal EMA Fiscal Officer Date Cal EMA Director (or designee) Date

Yr / Chapter: 2009-10/1 PCA No: 18459
 Item: 0690.102.0890 Fed Cat. #: 16.804
 Component: 40.30.560
 Program: Anti-Drug Abuse Enforcement Team Recovery Act Program
 Fund: Federal Trust
 Match Req.: N/A
 Project No.: 09JAGR Amount: \$ 470,238

MAR 08 2010
471530



PUBLIC SAFETY AND VICTIM SERVICES PROGRAMS DIVISION
CALIFORNIA EMERGENCY MANAGEMENT AGENCY

PUBLIC SAFETY BRANCH
3650 SCHRIEVER AVENUE
MATHER, CALIFORNIA 95655
TELEPHONE: (916) 324-6724
FAX: (916) 324-9179



April 6, 2010

Jerry Williams
Chief Deputy
Riverside County
4095 Lemon Street, Second Floor
Riverside, CA 92501

Dear Mr. Williams:

SUBJECT: NOTIFICATION OF APPLICATION APPROVAL

California Multi-jurisdictional Methamphetamine Enforcement Team Recovery Act Program
(200902613)

Award #: ZM09 01 0330

Cal EMA ID#: 065-00000

Congratulations! The California Emergency Management Agency (Cal EMA) has approved your application in the amount of \$377,000, subject to Budget approval. A copy of your approved subgrant is enclosed for your records.

Cal EMA will make every effort to process payment requests within 60 days of receipt.

This subgrant is subject to the Cal EMA Recipient Handbook. You are encouraged to read and familiarize yourself with the Cal EMA Recipient Handbook, which can be viewed on Cal EMA's website at www.calema.ca.gov.

Any funds received in excess of current needs, approved amounts, or those found owed as a result of a close-out or audit, must be refunded to the State within 30 days upon receipt of an invoice from Cal EMA.

Should you have questions on your subgrant, please contact your Program Specialist.

LEVS Grant Processing

Enclosure

c: Recipient's file

Cal EMA

065-00000

Award # ZM09 010330

ERP
5/10

CALIFORNIA EMERGENCY MANAGEMENT AGENCY GRANT AWARD FACE SHEET (Cal EMA 2-101)

The California Emergency Management Agency, hereafter designated Cal EMA, hereby makes a grant award of funds to the following:

- 1. **Grant Recipient:** County of Riverside
hereafter designated Recipient, in the amount and for the purpose and duration set forth in this grant award.
- 2. **Implementing Agency:** Riverside County Sheriff's Department
- 3. **Project Title:** California Multi-Jurisdictional Methamp Rec Act
- 4. **Grant Period:** 03/01/10 to 02/28/12

*Select the Grant year and fund source(s) from the lists below or type the appropriate acronym in box 9. Enter the amount(s) from each source. Please do not enter both State and Federal fund sources on the same line. Add any cash match(s). Block 10G is the Grant Award total amount.

09

Grant Year	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Project Cost
10/TT	5. JAGR		\$377,000		\$0	\$0	\$0	
Select	6. Select						\$0	
Select	7. Select						\$0	
Select	8. Select						\$0	
Select	9.						\$0	
	10. TOTALS	\$0	\$377,000	\$377,000	\$0	\$0	\$0	10. Grand Total: \$377,000

11. This grant award consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurance of Compliance forms which are being submitted. I hereby certify I am vested with the authority, and have the approval of the City/County Financial Officer, City Manager, County Administrator, or Governing Board Chair, to enter into this grant award agreement; and all funds received pursuant to this agreement will be spent exclusively on the purposes specified. The grant recipient signifies acceptance of this grant award and agrees to administer the grant project in accordance with the statute(s), the Cal EMA Program Guidelines, the Cal EMA Recipient Handbook, the Federal OJP Financial Guide and Program Guidelines (if applicable), and the Cal EMA audit requirements, as stated in the applicable RFP or RFA. The grant recipient further agrees to all legal conditions and terms incorporated by reference in the applicable RFP or RFA, and agrees that the allocation of funds is contingent on the enactment of the State Budget.

12. **Official Authorized to Sign for Applicant/Grant Recipient:** Valerie Hill **Federal Employer ID Number:** 95-6000930
Name: Valerie Hill **Title:** Undersheriff
Payment Mailing Address: P.O Box 512 **City:** Riverside **Zip:** 92502-0512
Telephone: (951) 955-2400 **FAX:** (951) 955-2428 **Email:** VHILL@riversidesheriff.org
(area code) (area code)
Signature: *Valerie Hill* **Date:** 3/3/10

[FOR CalEMA USE ONLY]

I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.

Valerie Hill 4/5/10 *[Signature]* 4/5/10
 CalEMA Fiscal Officer **Date** CalEMA Director (or designee) **Date**

Yr / Chapter: 2009-10 / 1 PCA No: 18459
 Item: 0690-102-0890 Fed Cat. #:16.804
 Component: 40.30.560
 Program: Cal Multi-Jurisdictional Meth Enforcement Team
 Recovery Act Program
 Fund: Federal Trust
 Match Req.: N/A
 Project No.: 09/JAGR Amount: 377,000

MAR 10 2010
472571