

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



FROM: Community Health Agency / Department of Public Health

SUBMITTAL DATE:
April 4, 2012

SUBJECT: Ratify acceptance of the Tuberculosis Special Needs Funds Award for Fiscal Year 2011/2012 from the California Department of Public Health Tuberculosis Control Local Assistance funding to support extended contact investigation activities in a high school setting.

RECOMMENDED MOTION: That the Board of Supervisors:

- 1) Ratify receipt of the Tuberculosis Special Needs Funds Award in the amount of \$36,255 for the period of performance of January 1, 2012 through June 30, 2012 to support the extended contact investigation activities in a high school setting; and
- 2) Authorize the Chairman of the Board to Sign four (4) copies of the Acceptance of Award; and
- 3) Approve and direct the Auditor Controller to adjust the budget as detailed in Schedule A attached.

BACKGROUND: (continued on page 2)

Susan D. Harrington
Susan Harrington, Director of Public Health

BC:rr

**REQUIRES
4/5th's VOTE**

FINANCIAL DATA	Current F.Y. Total Cost:	\$ 36,255	In Current Year Budget:	No
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	Yes
	Annual Net County Cost:	\$ 0	For Fiscal Year:	11/12

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

C.E.O. RECOMMENDATION:

APPROVE

BY: *Debra Courmoyer*
Debra Courmoyer

County Executive Office Signature

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Stone, seconded by Supervisor Buster 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: April 24, 2012
xc: CHA-Public Health, Auditor, EO

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

Prev. Agn. Ref. ATTACHMENTS FILED District: 5/5. Agenda Number:

WITH THE CLERK OF THE BOARD

3 . 10

FISCAL PROCEDURES APPROVED
 PAUL ANGULO, CPA, AUDITOR-CONTROLLER
 BY: *[Signature]* 4/11/12
 SAMUEL WONG
 Departmental Concurrence
 DATE
 NEAL R. KIPNIS
 FORM APPROVED COUNTY COUNSEL
 BY: *[Signature]*

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

Form 11

Community Health Agency / Department of Public Health

Page 2 of 3

SUBJECT: Ratify acceptance of the Tuberculosis Special Needs Funds Award for Fiscal Year 2011/2012 from the California Department of Public Health Tuberculosis Control Local Assistance funding to support extended contact investigation activities in a high school setting.

BACKGROUND: (continued)

The California Department of Public Health has awarded Riverside County Department of Public Health Special Needs funds for a high school extended contact investigation due to a TB exposure at the school. This short term funding is for temporary staff to provide follow-up and Directly Observed Therapy for Latent TB Infection.

SUBJECT: Ratify acceptance of the Tuberculosis Special Needs Funds Award for Fiscal Year 2011/2012 from the California Department of Public Health Tuberculosis Control Local Assistance funding to support the extended contact investigation activities in a high school setting.

SCHEDULE A

**BUDGET ADJUSTMENT
COMMUNITY HEALTH AGENCY
DEPARTMENT OF PUBLIC HEALTH
FISCAL YEAR 2011/2012**

INCREASE IN APPROPRIATIONS

10000-4200100000-510320	Temporary Salaries	\$27,840
10000-4200100000-528920	Car Pool Expenses	\$ 8,325
10000-4200100000-520230	Cellular Phone	\$ 90

TOTAL INCREASE IN APPROPRIATIONS \$36,255

INCREASE IN ESTIMATED REVENUE

10000-4200100000-751680	CA State Grant Revenue	\$36,255
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TOTAL INCREASE IN ESTIMATED REVENUE \$36,255



Ron Chapman, MD, MPH
Director

State of California—Health and Human Services Agency
California Department of Public Health



EDMUND G. BROWN JR.
Governor

March 14, 2012

Cameron Kaiser, M.D.
Health Officer
Riverside County Department of Public Health
4065 County Circle Drive, Ste. 412-K
Riverside, CA 92503

Dear Dr. Kaiser:

**LETTER OF AWARD – Tuberculosis Special Needs Funds Award –
High School Extended Contact Investigation**

FUNDING PERIOD – January 1, 2012 through June 30, 2012

This letter of award is in response to the original request for additional funds to support tuberculosis (TB) control activities submitted on March 13, 2012 by Riverside County Department of Public Health. The California Department of Public Health (CDPH) Tuberculosis Control Branch (TBCB) has approved the line items for personnel, travel and equipment.

AWARD

Riverside County Department of Public Health, Tuberculosis Control will receive \$36,255 from the CDPH TBCB to support TB control activities associated with an extended contact investigation (CI) in a high school setting. This award must be used for expenditures listed in the attached approved budget.

This award is valid and enforceable only if the enacted 2011-2012 budget for the State of California and the 2012 Federal budget makes sufficient funds available for the purposes of this program.

MANAGING YOUR AWARD

The FY 2011-2012 Tuberculosis Control Local Assistance Funds, Policies and Procedures Manual, Part 1 includes all the requirements for these funds. Reimbursement is contingent upon compliance with these policies and procedures. This manual and forms are located on the CDPH TBCB internet site at:
<http://www.cdph.ca.gov/programs/tb/Pages/LocalAssistanceAward.aspx>.

Cameron Kaiser, M.D.
March 14, 2012
Page 2

Submitting an invoice

This award is separate from your Base Award. When invoicing for approved expenditures, please refer to the award as the "Tuberculosis Special Needs Funds Award – High School Extended CI – January 1, 2012 through June 30, 2012."

The invoice(s) submitted for this award shall include only actual expenditures for the approved line items. A final invoice is due by August 15, 2012. Please use the same format as for your local assistance Base Award.

ACCEPTANCE OF YOUR AWARD

To acknowledge your acceptance of this award and the conditions attached to it, please return a hard-copy of the enclosed "Acceptance of Award" form with an authorized signature to:

California Department of Public Health
Tuberculosis Control Branch
850 Marina Bay Parkway, Building P, 2nd Floor
Richmond, CA 94804-6403
Attention: Mr. David Beers - Special Funds Award

The CDPH TBCB cannot process your invoice until the signed "Acceptance of Award" is received.

Fiscal questions should be directed to David Beers, TBCB fiscal analyst, at (510) 620-3012 or by email to David.Beers@cdph.ca.gov. For programmatic questions, please contact Anne Cass, your program liaison, at (619) 688-0253 or by email to anne.cass@cdph.ca.gov.

Sincerely,



Sue Spieldenner, RN, M.P.H.
Chief, Resources Planning and Management Section
Tuberculosis Control Branch
Division of Communicable Disease Control
Center for Infectious Diseases
California Department of Public Health

ACCEPTANCE OF AWARD

Riverside County Department of Public Health

FUNDING PERIOD – January 1, 2012 through June 30, 2012

BASE AWARD \$36,255

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.

ATTEST:
KECIA HARPER-IHEM, Clerk

By 

DEPUTY


Authorized Signature

4/24/12
Date

JOHN TAVAGLIONE

Print Name

CHAIRMAN, BOARD OF SUPERVISORS

Title

FORM APPROVED COUNTY COUNSEL

BY: 

NEAL R. KIPNIS

DATE

3.10

APR 24 2012

Local Assistance Base Award

Jurisdiction: Riverside County

Submission Date: March 14, 2012

Revised Summary Budget FY 2011 - 2012

LINE ITEM CATEGORY	AMOUNT
Personnel (Benefit)	\$
Benefits (@ %)	\$
Personnel (Non-Benefit)	\$ 27,840
Travel	\$ 8,325
Equipment	\$ 90
Supplies	\$
Contractual	\$
Other	\$
TOTAL BUDGET	\$ 36,255

Prepared by: Barbara Cole, Disease Control Director

Telephone: (951) 358 - 5107

E-mail: BCole@rivcocha.org