

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

617



FROM: Department of Public Health

SUBMITTAL DATE:  
August 19, 2013

SUBJECT: Ratify acceptance of the Award for Fiscal Year 2013/2014 from the California Department of Public Health (CDPH) for Tuberculosis Local Assistance funding.

RECOMMENDED MOTION: That the Board of Supervisors:

- 1) Ratify acceptance of the California Department of Public Health Tuberculosis Assistance Funding Base Award in the amount of \$341,904 and the Food, Shelter, Incentives and Enablers (FSIE) Allotment of up to \$21,210 to support Tuberculosis (TB) control activities in the County or Riverside for Fiscal Year 2013/2014; and
- 2) Authorize the Chairperson of the Board to sign four (4) original copies of the Acceptance of Award.

BACKGROUND: TB continues to be a significant public health problem in California. The CDPH has awarded local assistance funding to health departments to support TB control activities, which include Public Health Nursing (PHN) case management, and treatment via directly observed therapy. In addition, funds are allocated for food, shelter, Incentives and Enablers (FSIE). Enablers include items such as bus tickets and gas vouchers.

BC:rr

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

FINANCIAL  
DATA

Current F.Y. Total Cost: \$ 363,114  
Current F.Y. Net County Cost: \$ 0  
Annual Net County Cost: \$ 0

In Current Year Budget: Yes  
Budget Adjustment: No  
For Fiscal Year: 13/14

SOURCE OF FUNDS: 100% State and Federal Funds

Positions To Be Deleted Per A-30 ☐  
Requires 4/5 Vote ☐

C.E.O. RECOMMENDATION:

APPROVE

BY: *Debra Cournoyer*  
Debra Cournoyer

County Executive Office Signature

MINUTES OF THE BOARD OF SUPERVISORS

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

Ayes: Jeffries, Tavaglione, Stone and Benoit  
Nays: None  
Absent: Ashley  
Date: September 10, 2013  
xc: Public Health

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

Prev. Agn. Ref.: 8/28/12, item 3.77 | District: ALL/ALL | Agenda Number:

ATTACHMENTS FILED

3-65

FORM APPROVED COUNTY COUNSEL  
BY: *NEAL R. KIPNIS* DATE: 8/28/13

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

**SUBJECT:** Ratify acceptance of the Award for Fiscal Year 2013/2014 from the California Department of Public Health (CDPH) for Tuberculosis Local Assistance funding.

**BACKGROUND (continued):**

These items are given to TB patients to assist them with transportation for clinic appointments.

Funds will be managed according to the California Department of Public Health (CDPH) Fiscal Year 13/14 Tuberculosis Control Assistance Funds, Standards and Procedures Manual.

**FINANCIAL DATA:**

The amount of funding for the Base Award is \$341,904 for FY 13/14 and is to be used to carry out tuberculosis control efforts. In addition, an allotment of up to \$21,210 is for food, shelter and incentives for patients being treated for tuberculosis.



Ron Chapman, MD, MPH  
Director & State Health Officer

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



EDMUND G. BROWN JR.  
Governor

June 28, 2013

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: Base Award**  
**Food, Shelter, Incentives and Enablers Allotment**  
**FUNDING PERIOD: July 1, 2013 through June 30, 2014**

This letter is confirmation of your local assistance award to support tuberculosis (TB) prevention and control activities in fiscal year (FY) 2013-2014.

**AWARD**

The California Department of Public Health (CDPH) Tuberculosis Control Branch (TBCB) is awarding to the Riverside County Department of Public Health a Base Award of \$341,904 and an Allotment of up to \$21,210 for food, shelter, incentives and enablers (FSIE) expenditures. These awards are comprised of \$161,201 (44%) State and \$201,913 (56%) federal funds.\* These funds are being awarded with the understanding that your staff will work with CDPH TBCB staff in carrying out your program's TB control efforts. The FSIE Allotment should be used to enhance treatment adherence, prevent homelessness, and/or promote least restrictive alternatives that decrease or obviate the need for detention.

This award is valid and enforceable only if the enacted State of California FY 2013-2014 budget and the 2013 and 2014 Federal budgets make sufficient funds available for the purposes of this program.

**MANAGING YOUR AWARD**

Requirements for the use of these funds are listed in Part 1 of the FY 2013-2014 Standards and Procedures Manual. This manual and forms (in Word fillable format) can be found on the CDPH TBCB internet site at:

<http://www.cdph.ca.gov/programs/tb/Pages/LocalAssistanceAward.aspx>.

Reimbursement of your expenditures is contingent upon compliance with these standards and procedures.

\*Federal funds fiscal Information: CFDA number – 93.116; grant number -5U52PS900515

SEP 10 2013 3-605

Invoicing for your Base Award and FSIE Allotment

- A signed original invoice (in blue ink) must be submitted on your organization's letterhead.
  - Bill to: California Department of Public Health, Tuberculosis Control Branch
  - Mail invoices to:  
California Department of Public Health  
Tuberculosis Control Branch  
850 Marina Bay Parkway, Building P, 2<sup>nd</sup> Floor  
Richmond, CA 94804-6403  
Attn: Mr. David Beers, Fiscal Analyst
- Invoices for the Base Award and the FSIE Allotment are due on the same schedule:

<u>Quarter</u>	<u>Period Covered</u>	<u>Due Date</u>
First	July 1 through September 30	November 15
Second	October 1 through December 31	February 18
Third	January 1 through March 31	May 15
Fourth	April 1 through June 30	August 15

If an invoice will not postmarked and sent by the quarterly due date, please contact the CDPH TBCB Fiscal Analyst to request an extension.

- Invoices for FY 2013-2014 will not be processed until:
  - All outstanding invoices from the previous year have been submitted
  - Any stipulations included in the Letter of Award have been resolved, and
  - The CDPH TBCB has received a signed "Acceptance of Award."

**ACCEPTANCE OF YOUR AWARD**

To acknowledge your acceptance of this award and the conditions attached to it, please return the attached "Acceptance of Award" with an original authorized signature to the CDPH TBCB. No further documentation of this contract is necessary.

The following hard-copy forms require an original signature and should be sent by mail with the signed Acceptance of Allotment if not submitted previously for FY 2013-2014:

- Darfur Contracting Act
- Special Terms and Conditions
- Drug-Free Workplace Certification

Mail your signed acceptance and completed forms to:

California Department of Public Health  
Tuberculosis Control Branch  
850 Marina Bay Parkway, Building P, 2<sup>nd</sup> Floor  
Richmond, CA 94804-6403  
Attn: Mr. David Beers, Fiscal Analyst

Cameron Kaiser, M.D.  
Page 3  
June 28, 2013

**REQUESTING ADDITIONAL FUNDS FOR FSIE EXPENDITURES**

Should you exceed your FSIE Allotment, additional funds may be requested. Written requests (hard copy or via e-mail) can be made at any time. Requests will be approved if unexpended funds are available. For complete information regarding requests for additional funds, please refer to Part 2, Section 3, of the FY 2013-2014 Standards and Procedures Manual.

Fiscal questions should be directed to the TBCB Fiscal Analyst, Mr. David Beers, (510) 620-3012 or by e-mail at [david.beers@cdph.ca.gov](mailto:david.beers@cdph.ca.gov). Programmatic questions should be directed to your CDPH TBCB Program Liaison.

Sincerely,



Sue Spieldenner, RN, MPH, Chief  
Resources Planning & Management Section  
Tuberculosis Control Branch  
Division of Communicable Disease Control  
Center for Infectious Diseases  
California Department of Public Health

# ACCEPTANCE OF AWARD

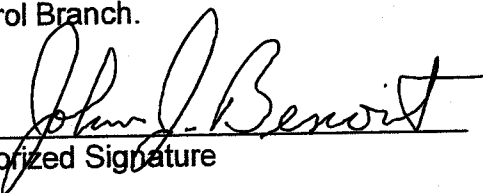
## Riverside County Department of Public Health

**Funding Period:** July 1, 2013 through June 30, 2014

**Base Award:** \$341,904

**Food, Shelter, Incentives and Enablers Allotment:** \$21,210

I hereby accept this award. By accepting this award, I agree to the requirements as described in the Standards and Procedures Manual for FY 2013-2014 and any other conditions stipulated by the California Department of Public Health, Tuberculosis Control Branch.

  
Authorized Signature

SEP 10 2013

Date

**JOHN J. BENOIT**  
Print Name

**CHAIRMAN, BOARD OF SUPERVISORS**  
Title

FORM APPROVED COUNTY COUNSEL

BY:

NEAL R. KIPNIS

DATE

ATTEST:

KEGIA HARPER-IHEM, Clerk

BY:

DEPUTY