

ITEM: 3.33 (ID # 23366) MEETING DATE: Tuesday, October 31, 2023

**FROM :** RUHS-PUBLIC HEALTH:

**SUBJECT:** RIVERSIDE UNIVERSITY HEALTH SYSTEM – PUBLIC HEALTH: Ratify and Authorize Acceptance of Award No. 1 NH28CE003530-01-00 with the Centers for Disease Control and Prevention (CDC) for the Riverside Overdose Data to Action Program for the Period of Performance of September 1, 2023, through August 31, 2028; and Amend Salary Ordinance No. 440 Pursuant to Resolution No. 440-\_\_\_\_.; All Districts [Total award amount \$2,892,500; up to \$11,570,000 in additional funding – 100% Federal]

**RECOMMENDED MOTION:** That the Board of Supervisors:

- Ratify and authorize acceptance of Award No. 1 NH28CE003530-01-00 with the Centers for Disease Control and Prevention (CDC) for the Riverside Overdose Data to Action Program in the amount of \$2,892,500 for the period of performance September 1, 2023, through August 31, 2028;
- 2. Amend Salary Ordinance No. 440 pursuant to Resolution No. 440-\_\_\_\_ submitted herewith; and
- 3. Authorize the Director of Public Health, or designee, based on the availability of fiscal funding and as approved as to form by County Counsel, to: (a) sign all reports, certifications, forms, grant agreements, and subsequent amendments to the Award that exercise the options of the Award, including modifications of the statement of work that stay within the intent of the Award; and (b) sign amendments to the compensation provisions that do not exceed the sum total of \$2,892,500 annually through the grant period.

ACTION:A-30, Policy, Position Added

# MINUTES OF THE BOARD OF SUPERVISORS

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

Ayes:	Jeffries, Spiegel, Washington and Gutierrez
Nays:	None
Absent:	Perez
Date:	October 31, 2023
xc:	RUHS-PH

Kimberly A. Rector Clerk

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

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$2,410,417	\$2,892,500	\$2,892,500	\$0
NET COUNTY COST	\$0	\$0	\$0	\$0
SOURCE OF FUNDS	<b>5:</b> 100% Federal		Budget Adju	stment: No
			For Fiscal Ye	ear: 23/24 – 28/29

C.E.O. RECOMMENDATION: Approval

# BACKGROUND:

### Summary 3 1

County of Riverside overdose deaths, emergency department (ED) visits and hospitalizations are increasing. The complexity of prescription opioids and the prevalence of illicit fentanyl also contributes to the increase in overdose deaths and nonfatal overdoses. These trends demonstrate a need for measuring, reducing, and preventing the harms caused by substance use disorders and overdose. Such an effort requires collaboration among Riverside University Health System-Public Health (RUHS-PH), Riverside University Health System - Behavioral Health (RUHS-BH), Emergency Medical Services (EMS), Health Systems, medical care providers, medical care plans, community agencies, and individual patients to incorporate a systemic change within the community.

To create more responsive and collaborative prevention efforts and address the upstream causes of substance use disorders and overdose, RUHS-PH applied for and received grant funding from the Centers for Disease Control and Prevention (CDC) in September 2019. This prior funding was instrumental in establishing the Riverside Overdose Data to Action (RODA) program, which focused on enhancing the surveillance of overdose morbidity and mortality in Riverside County and using enhanced surveillance to guide the development and implementation of overdose prevention efforts.

The CDC was awarded with the next iteration of OD2A funding - Overdose Data to Action: Limiting Overdose through Collaborative Actions in Localities (OD2A LOCAL) - on September 1, 2023. This next round of funding will allow for previous RODA activities to continue, as well as support more collaboration between RUHS-PH and local community-based organizations (CBOs) for the implementation of prevention efforts to decrease the number of fatal and nonfatal overdoses, decrease illicit opioid and stimulant use, improve health equity among groups disproportionately affected by the overdose crisis and those previously underserved by overdose prevention programs, and increase the adoption of harm reduction strategies and principles.

In pursuit of the goals of RODA, RUHS-PH will fund and partner with CDC approved CBO's to implement a needs assessment. These CBO's will then conduct a needs assessment focused on addressing health equity and the needs of the priority populations and people with lived experience within the first six months of the grant award period.

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

Overall, the long-term outcomes consist of the following:

- Decrease the drug overdose death rate in Riverside County, including prescription opioid and illicit opioid overdose death rates.
- Decrease the rate of opioid misuse and opioid use disorder in Riverside County.
- Increase the provision of evidence-based treatment for opioid use disorder in Riverside County.
- Decrease the rate of ED visits due to opioid misuse or opioid use disorder in Riverside County.

To decrease the opioid, and stimulant-involved overdose morbidity and mortality in Riverside County, RODA will build data-informed prevention programs in a variety of settings including community, health systems, and public safety. RODA's strategies and activities will increase access to evidence-based care for substance use disorders, support re-engagement in care and long-term recovery, and ensure access to harm reduction tools such as naloxone and fentanyl test strips.

# Impact on Residents and Businesses

RODA will continue to enhance the County's overdose surveillance data to provide accurate, timely, and actionable information to effectively implement policies, prevention strategies, and interventions to reduce and prevent overdose deaths in Riverside County. Activities will prioritize the allocation of resources in conversation with partners to maximize impacts on drug overdose and decrease health disparities. RODA will implement activities that are evidence-based or evidence-informed and focus on populations historically underserved and at disproportionate overdose risk based on available evidence and data. RODA will concentrate evaluation efforts on critical prevention programs or key data gaps to inform ongoing efforts to strengthen activities and improve the impact of current prevention programs with the goal of decreasing overdoses in Riverside County.

### **Additional Fiscal Information**

The CDC has awarded funding to RUHS-PH in the amount of \$2,892,500 annually for a 5-year funding cycle for the Riverside Overdose to Action Program. All future year funding will be based on satisfactory programmatic progress and the availability of funds. RUHS-PH is requesting approval to accept up to \$2,892,500 per year through August 31, 2028. There is no impact to County General Funds. Funding from CDC will be allocated as follows for the first year:

County F	iscal Year	Grant Fiscal Year		
Year	Amount	Year	Amount	
2023/2024	\$2,410,417	2023/2024	\$2,892,500	
2024/2025	\$482,083		7	
Total	\$2,892,500	Total	\$2,892,500	

RUHS-PH also requests to amend Ordinance No. 440 to add the position listed in the table below. Pursuant to Board Policy A-30, this position will be eliminated in the event funding is no

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

longer available. However, every effort will be made to pursue other funding sources to maintain this position.

Job Code	Job Title	Quantity
86252	Public Health Data Scientist	1

# **Contract History and Price Reasonableness**

In September 2019, the CDC awarded RUHS-PH a three-year, \$7.1 million grant to support a comprehensive countywide response to opioid-related and other drug overdoses. The grant— Overdose Data to Action - supported the RUHS-PH in obtaining high quality, comprehensive, and timely data on overdose morbidity and mortality. This data is essential for informing prevention and overdose response efforts in Riverside County. The CDC awarded RUHS-PH with the next iteration of OD2A funding - Overdose Data to Action: Limiting Overdose through Collaborative Actions in Localities (OD2A LOCAL) - on September 1, 2023. This next round of funding will allow for previous RODA activities to continue, as well as support more collaboration between the County and local community-based organizations.

# ATTACHMENTS:

ATTACHMENT A. Notice of Award, No. 1 NH28CE003530-01-00, with Center for Disease Control and Prevention

ATTACHMENT B. Resolution No. 440-\_\_\_\_

lichael Bowers 10/25/2023 Douglas Ordonez Jr.



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award

Award# 1 NH28CE003530-01-00 FAIN# NH28CE003530 Federal Award Date: 08/23/2023

<b>Recipient Information</b>	Federal Award Information			
<b>1. Recipient Name</b> RIVERSIDE, COUNTY OF 4065 County Circle Dr Riverside, CA 92503-3410	<ul> <li>11. Award Number <ul> <li>1 NH28CE003530-01-00</li> </ul> </li> <li>12. Unique Federal Award Identification Number (FAIN) <ul> <li>NH28CE003530</li> </ul> </li> <li>13. Statutory Authority <ul> <li>Section 311(c)(1) of the PHS Act (42 USC § 243(c)(1))</li> </ul> </li> </ul>			
2. Congressional District of Recipient	14. Federal Award Project Title Riverside Overdose Data to Action			
<ol> <li>Payment System Identifier (ID) 1956000930B7</li> <li>Employer Identification Number (EIN) 956000930</li> <li>Data Universal Numbering System (DUNS) 117023953</li> <li>Recipient's Unique Entity Identifier (UEI) YXSZFGDUQUJ5</li> <li>Project Director or Principal Investigator</li> </ol>	<ul> <li>15. Assistance Listing Number 93.136</li> <li>16. Assistance Listing Program Title Injury Prevention and Control Research and State and Community Based Programs</li> <li>17. Award Action Type New</li> <li>18. Is the Award R&amp;D?</li> </ul>			
Wendy Hetherington Chief, Epidemiology & Program Evaluation whetherington@ruhealth.org	No Summary Federal Award Financial Informatio 19. Budget Period Start Date 09/01/2023 - End Date 08/31/2024	n		
951-358-5557	20. Total Amount of Federal Funds Obligated by this Action	\$2,892,500.00		
8. Authorized Official	20a. Direct Cost Amount	\$2,572,484.00		
Ms. Kim Saruwatari Director	20b. Indirect Cost Amount	\$320,016.00		
ksaruwatari@ruhealth.org	<b>21.</b> Authorized Carryover	\$0.00		
951-358-7036	22. Offset	\$0.00		
	23. Total Amount of Federal Funds Obligated this budget period	\$0.00		
Federal Agency Information CDC Office of Financial Resources	24. Total Approved Cost Sharing or Matching, where applicable	\$0.00		
CDC Office of Financial Resources	25. Total Federal and Non-Federal Approved this Budget Period	\$2,892,500.00		
9. Awarding Agency Contact Information	26. Period of Perfomance Start Date 09/01/2023 - End Date 08/31/2028			
Natasha Jones Grants Management Officer mgz2@cdc.gov	27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance	\$2,892,500.0		
770-488-1649	29. Authorized Treatment of Dreaman Income			
10.Program Official Contact Information	28. Authorized Treatment of Program Income ADDITIONAL COSTS			
Sherry Bolden	29. Grants Management Officer – Signature			
Program Officer	Ms. Tajsha LaShore			
skb2@cdc.gov	His. Lapita Labitit			
4044980341				

30. Remarks



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

# Notice of Award

Award# 1 NH28CE003530-01-00 FAIN# NH28CE003530 Federal Award Date: 08/23/2023

Recipient Information	<b>33. Approved Budget</b> (Excludes Direct Assistance)
Recipient Name RIVERSIDE, COUNTY OF	<ul> <li>I. Financial Assistance from the Federal Awarding Agency Only</li> <li>II. Total project costs including grant funds and all other financial participation</li> </ul>
4065 County Circle Dr Riverside, CA 92503-3410	a. Salaries and Wages       \$824,625.0         b. Fringe Benefits       \$455,440.0         c. TotalPersonnelCosts       \$1,280,065.0
Congressional District of Recipient 41 Payment Account Number and Type 1956000930B7 Employer Identification Number (EIN) Data 956000930 Universal Numbering System (DUNS) 117023953 Recipient's Unique Entity Identifier (UEI) YXSZFGDUQUJ5	d. Equipment       \$0.0         e. Supplies       \$23,807.0         f. Travel       \$32,500.0         g. Construction       \$0.0         h. Other       \$46,603.0         i. Contractual       \$1,189,509.0         j. TOTAL DIRECT COSTS       \$2,572,484.00
<b>31. Assistance Type</b> Cooperative Agreement <b>32. Type of Award</b> Other	k. INDIRECT COSTS\$320,016.001. TOTAL APPROVED BUDGET\$2,892,500.00m. Federal Share\$2,892,500.00n. Non-Federal Share\$0.00

#### **34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
3-9390BX6	23NH28CE003530OPCE	CE	410Q	93.136	\$2,892,500.00	75-23-0952

# DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award



Centers for Disease Control and Prevention

Award# 1 NH28CE003530-01-00 FAIN# NH28CE003530 Federal Award Date: 08/23/2023

#### **Direct Assistance**

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)	
Personnel	\$0.00	\$0.00	\$0.00	
Fringe Benefits	\$0.00	\$0.00	\$0.00	
Travel	\$0.00	\$0.00	\$0.00	
Equipment	\$0.00	\$0.00	\$0.00	
Supplies	\$0.00	\$0.00	\$0.00	
Contractual	\$0.00	\$0.00	\$0.00	
Construction	\$0.00	\$0.00	\$0.00	
Other	\$0.00	\$0.00	\$0.00	
Total	\$0.00	\$0.00	\$0.00	

# AWARD ATTACHMENTS

# RIVERSIDE, COUNTY OF

1 NH28CE003530-01-00

1. Terms and Conditions

### AWARD INFORMATION

**Incorporation**: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at <u>https://www.cdc.gov/grants/federal-regulations-policies/index.html</u>, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number CDC-RFA-CE-23-0003, entitled Overdose Data to Action: Limiting Overdose through Collaborative Actions in Localities (OD2A: LOCAL), and application dated May 8, 2023, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

**Approved Funding:** Funding in the amount of \$2,892,500 is approved for the Year 01 budget period, which is September 1, 2023 through August 31, 2024. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third-party in-kind contribution when applicable.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

**Component/Project Funding:** The NOFO provides for the funding of multiple components under this award. The approved component funding levels for this notice of award are:

NOFO Component	Amount	
Component A	\$ 2,892,500	

### Financial Assistance Mechanism: Cooperative Agreement

**Substantial Involvement by CDC:** This is a cooperative agreement and CDC will have substantial programmatic involvement after the award is made. Substantial involvement is in addition to all post-award monitoring, technical assistance, and performance reviews undertaken in the normal course of stewardship of federal funds.

CDC program staff will assist, coordinate, or participate in carrying out effort under the award, and recipients agree to the responsibilities therein, as detailed in the NOFO. Across all components, CDC will provide substantial involvement beyond regular performance and financial monitoring during the period of performance. Substantial involvement means that recipients can expect federal programmatic partnership in carrying out the effort under the award. CDC's Division of Overdose Prevention (DOP), with support from the DOP Technical Assistance Center (TAC), will work in partnership with recipients to ensure the success of the cooperative agreement by:

- Assisting in advancing program activities to achieve project outcomes
- Providing technical assistance on data management plans
- Collaborating with recipients to develop evaluation plans that align with CDC evaluation activities
- Providing technical assistance on recipient's Evaluation and Performance Measurement Plan
- Providing technical assistance on recipient's Targeted Evaluation Projects

- Providing technical assistance to define and operationalize performance measures
- Facilitating the sharing of information among recipients
- Participating in relevant meetings, committees, conference calls, and working groups related to the cooperative agreement requirements
- Coordinating communication and program linkages with other CDC programs and Federal agencies, such as Centers for Medicare and Medicaid Services (CMS), Food and Drug Administration (FDA), the National Institutes of Health (NIH), Substance Abuse and Mental Health Services Administration (SAMHSA), the Department of Justice (DOJ), and the HHS Office of the National Coordinator for Health Information Technology (ONC)
- Translating and disseminating lessons learned and best practices through publications, meetings, surveillance measures, and other means to expand the evidence base
- Identifying and awarding a partner organization to expand and strengthen recipients' capacity to implement surveillance and prevention activities through jurisdiction-level staffing support

Additionally, technical assistance for Component A around the funding announcement's guiding principles will be available to ensure that all recipients are able to:

- Collect data around community characteristics, including racial and ethnic composition, and conduct analyses with a health equity focus
- Use data to inform and tailor prevention programs, with emphasis on reaching groups disproportionately affected by the overdose epidemic
- Ensure implementation of culturally relevant interventions and equitable delivery of prevention services

The Technical Assistance Center (TAC) will leverage various modes of technical assistance, including group trainings, webinars, communities of practice, individualized one-on-one assistance, peer-to-peer interactions, and asynchronous learning to increase recipient capacity to implement evidence-based interventions. DOP staff and DOP TAC subject matter experts will work with the recipients to provide scientific subject matter expertise and resources by:

- Providing guidance on using data to inform jurisdiction-level populations of focus, on selecting evidence-based overdose prevention interventions, and on implementation of best practices across all prevention strategies
- Providing support and technical assistance for implementation of all components (A, B & C)

**Component B:** The following additional support will be provided to Component B recipients:

- Guidance on the drugs that should be included in standard toxicologic testing. This guidance will be updated periodically or as needed in response to emerging trends. This will be done in consultations with recipients
- Guidance for sharing toxicologic results with CDC in a standardized fashion to meet Component B reporting requirements
- Provide support on collecting and analyzing the data through drug product and/or drug paraphernalia workgroup meetings that will be held at least quarterly. This may include presentations by CDC and external experts on topics of interest

**Component C:** The following additional support will be provided to Component C recipients:

- Guidance on the required and optional standardized indicators for linkage to and retention in care surveillance. This guidance may be updated periodically or as needed in consultations with recipients
- Guidance for sharing linkage to and retention in care surveillance indicators with CDC in a standardized format to meet Component C reporting requirements, including providing a data submission template
- Provide support on collecting and analyzing data through the linkage to and retention in care surveillance workgroup meetings that will be held at least quarterly. This may include presentations by CDC, external experts, and recipients on topics of interest

**Budget Revision Requirement:** By October 2, 2023 the recipient must submit a revised budget with a narrative justification.

- Total budget: Please provide a revised budget that aligns with the approved funding totals noted in above.
- Salaries and Wages: Please provide annual salaries and position descriptions for each staff member. Review total personnel calculation for accuracy. Move fringe costs to a separate budget category.
- Fringe: Provide justification for how fringe rate is calculated. Review total for accuracy.
- Travel: Please provide justification for travel costs IAW <u>CDC budget guidelines</u>.
- Supplies: Provide a monthly estimate for office supplies. Itemize and justify all program supplies.
- Other: provide unit costs for the following- fentanyl test strips, gas gift cards, training/certifications, website maintenance, printing, mailing, media campaign, Canva Pro

Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.

**Expanded Authority:** The recipient is permitted the following expanded authority in the administration of the award.

Carryover of unobligated balances from one budget period to a subsequent budget period. Unobligated funds may be used for purposes within the scope of the project as originally approved. Recipients will report use, or intended use, of unobligated funds in Section 12 "Remarks" of the annual Federal Financial Report. If the GMO determines that some or all of the unobligated funds are not necessary to complete the project, the GMO may restrict the recipient's authority to automatically carry over unobligated balances in the future, use the balance to reduce or offset CDC funding for a subsequent budget period, or use a combination of these actions.

# FUNDING RESTRICTIONS AND LIMITATIONS

**Indirect Costs:** Indirect costs are approved based on the negotiated indirect cost rate agreement dated January 27, 2023, which calculates indirect costs as follows, a Final is approved at a rate of 25% of the base, which includes salaries, wages, and fringe benefits. The

effective dates of this indirect cost rate are from July 1, 2023 to June 30, 2024.

**Missing Contractual/Consultant Elements** – The contract(s)/consultant(s) listed below are **not** approved and the recipient may not begin the contracts until all contractual elements listed in the <u>CDC budget guidelines</u> are provided via GrantSolutions as a notification of contractor amendment and GMO approval is provided via Notice of Award.

Behavioral Health Emergency Management Services Riverside County Sheriff-Coroner Inland Empire Health Plan Inland Empire Harm Reduction HARC Rainbow Pride Youth Alliance Desert Healthcare TruEvolution Starting Over

**REPORTING REQUIREMENTS** 

**Required Disclosures for Federal Awardee Performance and Integrity Information System** (FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services Natasha Jones, Grants Management Officer/Specialist Centers for Disease Control and Prevention Branch 5 Supporting Chronic Diseases and Injury Prevention 2960 Brandywine Road Atlanta, Georgia 30341 Email: <u>mgz2@cdc.gov</u> (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services Office of the Inspector General ATTN: Mandatory Grant Disclosures, Intake Coordinator 330 Independence Avenue, SW Cohen Building, Room 5527 Washington, DC 20201

Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or Email: <u>MandatoryGranteeDisclosures@oig.hhs.gov</u>

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

### PAYMENT INFORMATION

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to <u>hhstips@oig.hhs.gov</u> or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

**Payment Management System Subaccount**: Funds awarded in support of approved activities have been obligated in a subaccount in the PMS, herein identified as the "P Account". Funds must be used in support of approved activities in the NOFO and the approved application.

The grant document number identified beginning on the bottom of Page 2 of the Notice of Award must be known in order to draw down funds.

# 440 Resolution Request Form

To request changes affecting classifications and/or positions within the Salary Ordinance No. 440, please complete this form in its entirety (you must complete a separate line for each classification you are requesting). Submit this form with the completed and signed Form 11 to the Human Resources Department. A 440 Resolution will be prepared and submitted with the completed Form 11 for approval to the Human Resources Director. Once approved, the Form 11 and Resolution will be forwarded accordingly.

When preparing your Form 11 for submittal, the **SUBJECT** and **RECOMMENDED MOTION** section <u>must include</u> the following language referencing the 440 Resolution that will be attached: "Amend Salary Ordinance No. 440 pursuant to Resolution No. 440-\_\_\_\_\_ submitted herewith."

After the Resolution is prepared, Human Resources will assign and enter the Resolution Number on the Form 11.

Tunna	na of Joh No						DO NOT USE WITH	H 4(a)(ii) ACTIONS
Type of Action	Job Code	+/-	No. of Positions	Dept ID No.	Dept. Name	Classification Title	From Salary Plan/Grade	To Salary Plan/Grade
4(a)(ii)	86252	+	1	4200100000	Public Health	Public Health Data Scientist		
-		_						
_		_					_	
_		_						
_		-						_
_		_					-	
_		_						
_		_						
_		_					_	

Requested By: Wendy Hetherington

Contact Number: 9513585757

<b>Action Codes</b>	Action
3(a)(iv)	Adds and/or deletes a classification within the Class & Salary Listing
3(c)(ii)	Adds and/or deletes a classification within Appendix I (straight-time over-time), Appendix II (At-Will) and/or Appendix III (Dept Head/Car Allowance)
4(a)(ii)	Adds and/or deletes positions within a Department
8(c)	Changes salary for existing classifications
1(o)	Reclassifies existing positions