

# **COUNTY OF SANTA CRUZ**

## HEALTH SERVICES AGENCY

P.O. BOX 962, 1080 EMELINE AVENUE SANTA CRUZ, CA 95061 (408) 454-4066 FAX: (408) 454-4770 TDD: (408) 454-4123

November 30, 1999

AGENDA: December 14, 1999

BOARD OF SUPERVISORS Santa Cruz County 701 Ocean Street Santa Cruz, CA 95061

#### RE: ACCEPT REVENUE FOR THE EARLY INTERVENTION PROGRAM

Dear Board Members:

The Health Services Agency has received notification from the State Office of AIDS of two related and coordinated funding awards for the Early Intervention Program (EIP). One award (\$120,000) comes from State funds earmarked for health counseling provided to EIP clients. The other award (\$60,000) distributes federal funds from the Centers for Disease Control (CDC) for risk reduction activities. A resolution accepting \$180,000 in combined revenue is attached. HSA is requesting authorization for an additional 2.25 FTE positions made possible by this new funding, as detailed below. Also requested is approval of the fixed asset purchase of computer equipment funded by these awards.

The County's Early Intervention Program provides primary care and case management services to HIV clients meeting the program's financial and diagnostic criteria. The \$120,000 State funding award is effective December 1, 1999, for seven months of this fiscal year and will be ongoing in subsequent years. The new funding will support a new 0.60 FTE Public Health Nurse position and the addition of 0.40 FTE to an existing 0.50 Mental Health Client Specialist position (resulting in a 0.90 FTE position). These positions will be part of a multi-disciplinary team that will provide comprehensive assessments of eligible clients, case management services including regularly updated individual care plans, health counseling and risk reduction activities.

The State EIP award will cover some existing staff costs, thereby freeing up County funds that will be used to augment an existing part-time epidemiologist position by 0.25 FTE to 0.75 FTE, without increasing net County cost. Although not directly related to the EIP, the augmented epidemiologist position will allow HSA to strengthen core public health activities such as local needs assessment, data analysis, and identifying and assessing local morbidity and mortality trends. During this start-up year, a total of \$64,768 will go towards staffing costs. A portion of the 1999-00 funds will be used to train County staff and staff of existing contract service providers in skills development associated with risk reduction and counseling activities.

040,

This year's funding also covers various operating costs such as office supplies, travel and mileage, plus the purchase of three personal computers. Total training, operating, and equipment funding comes to \$48,755. In addition, HSA can claim overhead costs amounting to 10% of personnel costs (\$6,477).

0402

The \$60,000 federal CDC award will fund a new 1 .OO FTE Mental Health Client Specialist position, plus related services and supplies, dedicated to an HIV Transmission Prevention Project (HTPP). As with the State EIP, funding will be ongoing and fully cover the cost of the new position in future years. Also included is funding for the purchase of two networked personal computers to support project activities. The goals and objectives of this project will be closely coordinated with and complement those of the State funded EIP. Both the State and the federal funding allocations will be conveyed to the County via the State AIDS Master Agreement, which also provides funding for education and prevention activities, AIDS testing, outreach and several AIDS other programs.

HSA is requesting authorization to sign the related amendments to this State revenue agreement when they are received. HSA is also requesting authorization to sign minor program or budget adjustment amendments as long as the original State contract amount is unchanged, a practice allowed by the State and used by HSA with the other State Master Agreement programs.

HSA also receives federal funding (\$427,124 in FY 1999-00) for the Early Intervention Program through Title III of the Ryan White Comprehensive AIDS Resource Emergency (CARE) Act. This funding supports medical care services, while the State EIP and federal CDC funding focus on health counseling and risk reduction. It is anticipated that approximately 65 clients will be served annually by the combined State and federally funded programs. The State EIP and the HTPP will be managed through HSA's Public Health Case Management unit.

It is therefore RECOMMENDED that your Board:

- 1. Adopt the attached resolution accepting and appropriating \$180,000 in unanticipated revenue for the Early Intervention Program; and
- 2. Authorize the Health Services Agency Administrator to sign the related State revenue agreement amendments when received and any additional amendments reflecting minor program changes or budget revisions within the original contract amount.
- 3. Authorize the creation of a new 0.60 FTE Public Health Nurse II position and a new 1.00 FTE Mental Health Client Specialist position in Department 3620 and refer to County Personnel for classification; and authorize the addition of 0.40 FTE to an existing Sr. Mental Health Client Specialist position (NP5093EA) and the addition of 0.25 FTE to an existing Epidemiologist position (NH1 001 LA).

4. Approve the fixed asset purchase of five personal computers and related materials and supplies at an approximate total cost of \$12,000.

Sincerely,

Charles M. Moody, HSA Administrator

**RECOMMENDED:** 

Susan A. Mauriello County Administrative Officer

cc: County Administrative Office County Counsel HSA Personnel County Purchasing Auditor-Controller HSA Administration County Personnel STATE OF CALIFORNIA-HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF HEALTH SERVICES 714/744 P STREET P.O. BOX 942732 SACRAMENTO, CA 94234-7320 (9 16) 445-0553

November 16, 1999

George Wolfe, M.D., M.P.H. Health Officer Santa Cruz County P. 0. Box 962 1080 Emeline Street Santa Cruz, CA 95060

Dear Dr. Wolfe:

# This letter replaces our October 4, 1999 letter of award and increases the awardfrom \$110,000 to \$120,000.

The California Department of Health Services, Office of AIDS (DHS/OA) is pleased to award \$120,000 to Santa Cruz County to fund its Early Intervention Project for fiscal year (FY) 1999-2000. Please prepare and submit the following information no later than November 30, 1999

- A PROJECT/CENTER BUDGET showing projected expenses for FY 1999-2000. The proposed budget should be completed in the format shown in Attachment 1, <u>EIP</u> <u>BUDGET AND CASELOAD ESTIMATE</u> (enclosed). Definitions for each line item in the budget are included in Attachment 2, <u>LINE ITEM INSTRUCTIONS</u> (enclosed).
- 2) A CLIENT CASELOAD ESTIMATE showing the expected average EIP caseload for FY 1999-2000. This must be noted on the bottom of Attachment 1, <u>EIP BUDGET AND</u> <u>CASELOAD ESTIMATE</u>. This in.fo.rmation will be used by OA staff to determine the EIP caseload you will contractually be obligated to maintain under your Memorandum of Understanding (MOU) for FY 1999-2000. "Average caseload" is defined in Attachment 2, <u>LINE ITEM INSTRUCTIONS</u> (enclosed).
- 3) **A BUDGET JUSTIFICATION** to accompany the Project/Center budget. The justification should include, for each budget line item, a breakdown of the specific items included and any supportive information or explanations necessary to demonstrate the appropriateness of the expenditures. A description of information to be provided in the Budget Justification for each budget line item is included in Attachment 2, <u>LINE ITEM INSTRUCTIONS</u> (enclosed). **Proposed budgets cannot be approved without complete, detailed Budget Justifications.**





GRAY DAVIS, Governor

Ø 002 0465

GRAY DAVIS. Governor

STATE OF CALIFORNIA-HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF HEALTH SERVICES P.O. BOX 942732 SACRAMENTO, CA 94234-7320 (916) 445-0553



November 23, 1999

George Wolfe, M.D., MPH P.O. Box 962 1080 Emeiine Avenue Santa Cruz, CA 95060

Dear Dr. Wolfe:

#### AWARD LETTER RE: TRANSMISSION PREVENTION PROJECT

The Department of Health Services, Office of AIDS (DHS/OA) is pleased to award \$60,000 to the Santa Cruz County Early Intervention Program (EIP) for the new HIV Transmission Prevention Demonstration Project for fiscal year (FY) 1999-2000. This demonstration project will provide funding for 1 .0 full-time equivalent prevention specialist(s)' and ongoing training for the specialist(s) to work with HIV positive clients. We anticipate funding this project in subsequent years.

As you know, DHS/OA recently received funding from the Federal Centers for Disease Control and Prevention (CDC) to provide priority intervention' services to individuals at risk for transmitting HIV: The focus of this demonstration project is on providing HIV risk reduction counseling to HIV positive individuals enrolled in the EIP.

The demonstration project will fund a licensed clinical position or position(s) (Prevention Specialists) and ongoing training for the specialists. While funding for the position(s) is ongoing, the first three to five years of the project will have a significant research emphasis, including data collection.

Please prepare and submit the following information no later than December 15, 1999.

(1) Project Budget showing projected expenses for FY 1999-2000. You are. to use the same format and five line item instructions as your existing OA-funded EIP. <u>Please Note: Allowable costs for this HIV Transmission Prevention</u> <u>Demonstration Project will be merged at DHS/OA/EIP into one memorandum of</u> <u>understanding (MOU) with your existing EIP for FY 1999-2000.</u>

Ø 003

Dr. George Wolfe Page 2 November 23, 1999

(2) Budget justification to accompany the Project Budget. Allowable costs for this demonstration project include, the prevention specialist position(s), significant travel, training, general startup costs (e.g., furniture, computer, supplies) if desired. Please **Note:** The prevention specialist position must have appropriate clinical licensure (e.g. LCSW, MFCC, MFT). OA will consider exceptions on a case-by-case basis for master's prepared individuals actively pursuing licensure.

The justification should include, for each budget line item, a breakdown of the specific items included and any supportive information or explanations necessary to demonstrate the appropriateness of the expenditures. Proposed budgets cannot be approved without-complete, detailed budget justifications.

By December 15, 1999 please mail or FAX the Transmission Prevention Project budget and justification to your designated EIP Program Coordinator at:

Early Intervention Section Office of AIDS P.O. Box 942732 Sacramento, CA 94234-7320 FAX: (916) 327-3177

If you have any questions or need assistance, please contact either Carol Crump at (916) 322-4635 or 'your ElPprogram coordinator

Sincere/ Vanessá Baird

Acting Chief

cc: See next page.



0400

2004

0407

Dr. George Wolfe Page 3 November 23, 1999

cc: Pat Ellerby P.O. Box 962 1080 Emeline Avenue Santa Cruz, CA 95060

> Ira Schwartz P.O. Box 962 1080 Emeline Avenue Santa Cruz, CA 95060

Carol Crump, MFCC Social Work Consultant Office of AIDS 611 N. 7" Street P.O. Box 942732 Sacramento, CA 94234-7320

Carol Russell, Chief Early Intervention Section Office of AIDS 611 N. 7<sup>th</sup> Street P.O. Box 942732 Sacramento, CA 94234-7320 BEFORE THE BOARD OF SUPERVISORS OF THE COUNTY OF SANTA CRUZ, STATE OF 'CALIFORNIA

RESOLUTION NO.

On the motion of Supervisor duly seconded by Supervisor the following resolution is adopted:

#### **RESOLUTION ACCEPTING UNANTICIPATED REVENUE**

WHEREAS, the County of Santa Cruz is a recipient of funds from <u>State of</u> <u>California</u> for <u>HIV Early Intervention</u> program; and

WHEREAS, the County is recipient of funds in the amount of \$ 180,000 which are either in excess of **those anticipated** or are not specifically set forth in the current fiscal year budget of the County; and

WHEREAS, pursuant to Government Code Section 29130(c)/29064(b), such funds may be made available for specific appropriation by a four-fifths vote of the Board of Supervisors;

NOW, THEREFORE, BE IT RESOLVED AND ORDERED that the Santa Cruz County Auditor-Controller accept funds in the amount of \$ 180,000 into

Department Health Services Agency

|     |                 | Revenue              |                     |        |
|-----|-----------------|----------------------|---------------------|--------|
| T/C | Index<br>Number | Subobj ect<br>Nunber | Account Name        | A      |
|     |                 | Number               | <u>Account Name</u> | Anount |

- SEE ATTACHED SHEET

and that such funds be and are hereby appropriated as follows:

|     |        | <b>Expendi ture</b> |         |              |        |
|-----|--------|---------------------|---------|--------------|--------|
|     | Index  | Subobject           |         |              |        |
| T/C | Nunber | Number              | PRJ/UCD | Account Name | Anount |
|     |        |                     |         |              |        |

- SEE ATTACHED SHEET -

| DEPARTMENT HEAD I hereby certify that the fis researched and that the Revenue(s) (has been) |      |          | e |
|---------------------------------------------------------------------------------------------|------|----------|---|
| current fiscal year.                                                                        |      | . [      |   |
| By Charles M. Mordy                                                                         | Date | 11/24/99 |   |
| Department Head                                                                             |      |          |   |

AUD60 (Rev 5/94)



0<sub>468</sub>

COUNTY ADMINISTRATIVE OFFICER

**Reco**mmended to Board

/\_\_/ Not Recommended to Board

PASSED AND ADOPTED by the Board of Supervisors of the **County** of Santa **Cruz**, State of California, this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_\_ by the following vote (requires three-fifths vote for approval):

AYES: SUPERVISORS

NOES: SUPERVISORS

ABSENT: SUPERVISORS

CHAIR OF THE BOARD

ATTEST:

Clerk of the Board

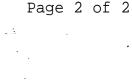
.

FORM: APPROVED. County Counsel

APPROVED AS TO ACCOUNTING DETAIL:

211/99 ontroller

Distribution: Auditor-Controller County Council County Administrative. Officer Originating Department





FISCAL YEAR 1999/00



#### HEALTH SERVICES AGENCY AUD-60 ATTACHMENT HIV EARLY INTERVENTION PROGRAM (EIP) - STATE EIP FUNDING

#### **ESTIMATED REVENUES:**

|     |        | Revenue   |                                  |            |
|-----|--------|-----------|----------------------------------|------------|
|     | Index  | Subobject |                                  |            |
| T/C | Number | Number    | Account Name                     | Amount     |
| 001 | 362300 | TBD       | ST AID - EARLY INTERVENTION PROG | \$ 120,000 |
| 001 | 362300 | 0996      | FED - HEALTH PROGRAMS            | 60,000     |

Total

### \$ 180,000

#### **APPROPRIATIONS:**

| T/C | Index<br>Number | Expenditure<br>Subobject<br>Numb& | PRJ/UCD | Account Name                  | Δ  | Mount  |
|-----|-----------------|-----------------------------------|---------|-------------------------------|----|--------|
| 021 | 362300          | 3100                              |         | REGULAR PAY                   | \$ | 85,140 |
| 021 | 362300          | 3150                              |         | FICA                          |    | 6,513  |
| 021 | 362300          | 3155                              |         | PERS                          |    | 11,107 |
| 021 | 362300          | 3160                              |         | INSURANCE                     |    | 8,581  |
| 021 | 362300          | 3484                              |         | DUPLICATING & PRINTING        |    | 3,000  |
| 021 | 362300          | 3493                              |         | SUPPLIES                      |    | 4,625  |
| 021 | 362300          | 3665                              |         | PROFESSIONAL & OTHER SERVICES |    | 36,550 |
| 021 | 362300          | 3975                              |         | MISCELLEANEOUS                |    | 11,134 |
| 021 | 362300          | 4150                              |         | AIRFARE                       |    | 140    |
| 021 | 362300          | 4154                              |         | EDUCATION & TRAINING          |    | 500    |
| 021 | 362300          | 4162                              |         | LODGING                       |    | 300    |
| 021 | 362300          | 4166                              |         | MILEAGE                       |    | 310    |
| 021 | 362300          | 4168                              |         | TRANS & TRAVEL - OTHER        |    | 100    |
| 021 | 362300          | 8404                              |         | EQUIPMENT                     |    | 12.000 |

Total

\$ 180,000