

County of Santa Cruz

0191

HUMAN RESOURCES AGENCY

Cecilia Espinola, Administrator
1000 Emeline Avenue, Santa Cruz, CA 95060
(83 1) 454-4130 or 454-4045 FAX: (83 1) 454-4642

October 5, 2000

AGENDA: October 24, 2000

BOARD OF SUPERVISORS

county of Santa Cruz
701 Ocean Street
Santa Cruz, CA. 95060

HEALTH CARE OUTREACH PROJECT

Dear Members of the Board:

Previously, your Board took action to accept unanticipated funds from the David and Lucile Packard Foundation and to execute contracts to conduct outreach to uninsured poor families in Santa Cruz County. These short-term contracts were approved while a funding decision for additional health care outreach funds was pending with the Department of Health Services (DHS). Once a DHS funding decision was reached, the Human Resources Agency was to return to your Board to amend the contracts and request approval for new contracts. The purpose of this letter is to recommend that your Board approve the new and amended contracts between the Human Resources Agency and collaborative members.

Background Information

As you may recall, the Human Resources Agency, in conjunction the Health Services Agency and the Health Care Outreach Coalition of Santa Cruz County, proposed a twelve month project to the Packard Foundation to improve access to no-cost or low-cost health care coverage for low-income Santa Cruz County residents. The Packard Foundation negotiated with DHS, the submission of a proposal for matching state funds based on the Packard's contribution. DHS has augmented the HSA 1931 (b) Medi-Cal Outreach grant in the amount of \$50,000. Packard has recently approved an additional \$6,171 in funding for the project.

Project Description

The total funding package for these contracts includes \$100,991 from the Packard Foundation, of which \$94,820 was accepted previously, \$97,754 from DHS Medi-Cal Outreach Grant held by HSA, transferred to HRA, and \$42,499 in TANF Incentive Funds. There are no additional County costs.

The project will conduct outreach and enrollment activities, assist families with the application process for different programs, and enroll them in the appropriate health care program. Outreach and enrollment for the following programs will be provided: Access for Infants and Mothers Program (AIM); California Children's Services (CCS); Child Health and Disability prevention (CHDP);

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Family PACT (Planning, Access, Care & Treatment); Pacific Health Advantage (**PacAdvantage**); Healthy Families Program; Managed Risk Medical Insurance Program (MRMIP); Medi-Cal and California Kids.

Recommendations

HRA is requesting that your Board approve and authorize the Human Resources Agency Administrator to execute the amended contracts with collaborative members in the following amounts and extend the term of the contracts through June 30, 2001: Food and Nutrition **Services/WIC** Program - \$24,038; Food and Nutrition **Services/Adelante** - \$19,190; Santa Cruz Community Counseling Center/youth Services - \$22,180; Valley Resource Center - \$18,048; Pajaro Valley Unified School District/Healthy Start - \$24,000; Community Action Board/Davenport Resource Service Center - \$8,968; Santa Cruz Office of Education - \$6,995; United Way of Santa Cruz County - \$27,349 and **Project Coordinator** - \$26,000. Approval and authorization for the Human Resources Agency Administrator to execute the following new contracts is also requested: All Rids by Two Immunization Coalition - \$8,730; Familia Center - \$11,600; Santa Cruz City Schools - **\$19,081**; Santa Cruz Women's Health Center - \$18,461. These contracts are on file with the Clerk of the Board.

IT IS THEREFORE RECOMMENDED that your Board:

1. Approve the attached resolution accepting unanticipated revenue in the amount of \$42,499 and appropriate these funds as described in the attached AUD 60;
2. Approve the attached resolution accepting unanticipated revenue from the Packard Foundation in the amount of \$6,171 and appropriate these funds as described in the attached AUD 60;
3. Approve and authorize the Human Resources Agency Administrator to sign the amended and new contracts for the Project Coordinator and the collaborative members as identified;
4. Approve the attached resolution accepting **intra-fund** transfer from HSA in the amount of \$97,754 and appropriate these funds as described in the attached AUD 74.

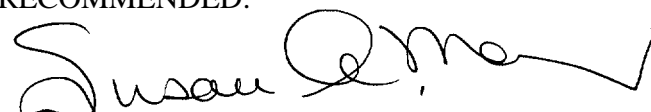
Very truly yours,



CECILIA ESPINOLA
 Administrator

CE/CW:cw/Packard Grant FY00-01 .doc
 Attachments

RECOMMENDED:



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BOARD OF SUPERVISORS
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Health Care Outreach Project

Susan A. Mauriello
County Administrative Officer

cc: Auditor-Controller
County Counsel
Risk Management
Packard Foundation
Collaborative Members

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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 TANF INCENTIVE FUNDS for HEALTHCARE OUTREACH & ENROLLMENT program; and

WHEREAS, the County is recipient of funds in the amount of \$ 42,499 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 \$ 47,499 t o

Department HRA- FAMILY RELATIONS

| T/C | Index Number | Revenue Subobject Number | Account Name | Amount |
|-----|--------------|--------------------------|--------------------------|--------|
| 001 | 392400 | 2372 | CONTRIBUTIONS, DONATIONS | 42,499 |

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

| T/C | Index Number | Expenditure Subobject Number | PRJ/UCD | Account Name | Amount |
|-----|--------------|------------------------------|---------|---------------------------------|--------|
| 321 | 392400 | 5191 | | CONTRIBUTIONS TO OTHER AGENCIES | 42,499 |

DEPARTMENT HEAD I hereby certify that the fiscal provisions have been researched and that the Revenue(s) (has been) (will be) received within the current. fiscal year.

By Francis Hill
Department Head

Date 10/5/00

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COUNTY ADMINISTRATIVE OFFICER

Recommended 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 four-fifths vote for approval):

AYES: SUPERVISORS

NOES : SUPERVISORS

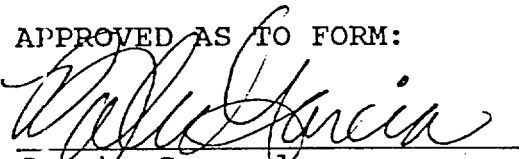
ABSENT: SUPERVISORS

Chairperson of the Board

ATTEST:

Clerk of the Board

APPROVED AS TO FORM:



County Counsel

APPROVED AS TO ACCOUNTING DETAIL:

 10/10/00

Auditor-Controller

Distribution:

- Auditor-Controller
- County Council
- County Administrative Officer
- Originating Department

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 PACKARD
FOUNDATION for HEALTHCARE OUTREACH & ENROLLMENT program; and

WHEREAS, the County is recipient of funds in the amount of \$ 6,171
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 \$ 6,171 n t o

Department HRA FAMILY RELATIONS

| T/C | Index Number | Revenue Subobject Number | Account Name | Amount |
|-----|--------------|--------------------------|--------------------------|--------|
| 001 | 392400 | 2372 | CONTRIBUTIONS, DONATIONS | 6,171 |

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

| T/C | Index Number | Expenditure Subobject Number | PRJ/UCD | Account Name | Amount |
|-----|--------------|------------------------------|---------|---------------------------------|--------|
| 021 | 392400 | 5191 | | CONTRIBUTIONS TO OTHER AGENCIES | 6,171 |

DEPARTMENT HEAD I hereby certify that the fiscal provisions have been researched and that the Revenue(s) (has been) (will be) received within the current fiscal year.

By Graves
Department Head

Date 10/5/02

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| PACKARD GRANT BUDGET | | | | | |
|--|--------------------|----------------------------|-----------|-----------------|----------------------------|
| Year 2 | | | | | |
| Budget Period 711101 - 6130102 | | | | | |
| BUDGET CATEGORIES | PACKARD FOUNDATION | OTHER MATCH (e.g., MAA) | IN-KIND | OTHER (specify) | TOTAL PROJECT BUDGET |
| Personnel | | | | | |
| Coordinator/\$25/.5 FTE | \$ 26,000 | | | | \$ 26,000 |
| Analyst/\$19.72/.25 FTE | | | \$ 10,254 | | \$ 10,254 |
| Mg./\$24.65/.20 FTE | | | \$ 10,344 | | \$ 10,344 |
| Outreach Wkr/\$12/1.5 FTE | \$ 86,000 | | | | |
| Total Salaries | \$ 112,000 | \$ - | \$ 20,598 | \$ - | \$ 132,598 |
| Fringe Benefits (30%) | \$ 7,200 | | \$ 6,177 | | \$ 13,377 |
| Total Personnel | \$ 119,200 | \$ - | \$ 26,775 | \$ - | \$ 145,975 |
| Operating Expenses | | | | | |
| General Expenses | \$ 3,829 | | | | \$ 3,829 |
| Space Rent/Lease | | | | | |
| Printing | \$ 2,500 | | | | \$ 2,500 |
| Equipment Rental | | | | | |
| Audit Costs | | | | | |
| Total Operating Expenses | \$ 6,329 | \$ - | \$ - | \$ - | \$ 6,329 |
| Equipment Purchase (laptops) | \$ 15,000 | | | | \$ 15,000 |
| Subcontracts (TRA amounts reflected in other categories) | | | | | |
| Travel & Per Diem | \$ 1,000 | | | | \$ 1,000 |
| Other Costs (Incentives) | \$ 10,000 | | | | \$ 10,000 |
| Indirect Costs | \$ 7,885 | | | | \$ 7,885 |
| TOTAL | \$ 159,414 | \$ - | \$ 26,775 | \$ - | \$ 186,189 |

