



County of Santa Cruz

HEALTH SERVICES AGENCY

P.O. BOX 962, 1080 EMELINE AVENUE
SANTA CRUZ, CA 95061
(831) 454-4066 FAX: (831) 454-4770

HEALTH SERVICES AGENCY ADMINISTRATION

August 24, 2001

AGENDA: September 18, 2001

BOARD OF SUPERVISORS
Santa Cruz County
701 Ocean Street
Santa Cruz, CA 95060

RE: Adopt Resolution Accepting and Appropriating Unanticipated Revenue for the Homeless Persons Health Project

Dear Members of the Board:

The Health Services Agency (HSA) has been notified that it will receive an additional \$58,333 this fiscal year for the Homeless Persons Health Project (HHP) through a federal grant from the Health Resources and Services Administration (HRSA). These funds will be used to augment HHP staffing resources and for one-time expenditures.

The increased grant allocation from HRSA includes \$23,333 for one-time expenditures and a \$35,000 addition to the annual base grant award for a new base grant of \$578,762. The one-time expenditures include funds for the purchase of modular furniture (\$3,500), laptop computer system (\$5,000), refrigerator necessary for the storage of vaccines and medications (\$1,400), ergonomic chairs (\$3,700), outreach supplies (\$5,000), and additional urgent dental and medical care for clients (\$4,733).

HHP will utilize the \$35,000 in ongoing funds to expand services to homeless youth. The current youth services team includes a Public Health Nurse and a Mental Health Client Specialist, who are assigned to work with the population in South County. The new grant augmentation will fund an additional .75 FTE Senior Mental Health Client Specialist position for the homeless youth in North County.

HHP and HSA Mental Health and Substance Abuse Programs have entered into a collaboration to implement a new program for homeless mentally ill. This program, funded through a grant from the State Department of Mental Health, assists homeless mentally ill individuals in Santa Cruz County to access and remain stable in permanent housing. **HSA** recommends the deletion of a vacant 1.00 FTE Health Program Specialist position and the addition of a 1.00 FTE Senior Mental Health Client Specialist position to provide the integrated support services necessary for this new effort.

The award of a supplemental allocation in the amount of \$58,333 will assist HPHP in meeting its goals. The newly expanded programs and enhancements will complement HPHP's on-going efforts to work collaboratively with the local community and in partnership with homeless adults and youth in Santa Cruz County.

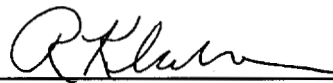
It is therefore RECOMMENDED that your Board:

1. Adopt the attached resolution accepting and appropriating \$58,333 of unanticipated Health Resources and Services Administration federal funds into the Homeless Persons Health Project budget; and
2. Approve the fixed asset purchase of modular furniture for \$3,500 and a laptop computer system for \$5,000; and
3. Approve the deletion of 1.00 FTEs and the addition of 1.75 FTEs as follows and direct Personnel to study and appropriately classify:

Delete: 3620 – 1.00 Health Program Specialist (NX5001AA)

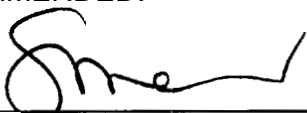
Add: 3620 – 1.75 Senior Mental Health Client Specialist

Sincerely,



Rama Khalsa, Ph.D.
Health Services Administrator

RECOMMENDED:



Susan A. Mauriello
County Administrative Officer

Attachments: AUD-60 Resolution Accepting and Appropriating Unanticipated Revenue

cc: County Administrative Office
Auditor-Controller
County Counsel
County Personnel
HSA Administration
Mental Health Administration
Public Health Administration

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 Health Resources and Services Admin. for Homeless Persons Health Project program; and

WHEREAS, the County is recipient of funds in the amount of \$ 58,333 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 \$ 58,333 into

Department Health Services Agency

T/C	Index Number	Revenue Subject Number	Account Name	Amount
-----	--------------	------------------------	--------------	--------

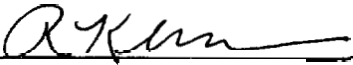
see attached

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

T/C	Index Number	Expenditure Subject Number	PRJ/UCD	Account Name	Amount
-----	--------------	----------------------------	---------	--------------	--------

see attached

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 
Department Head

Date 9-5-01

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

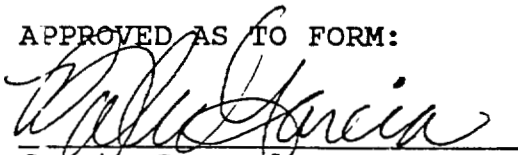
ABSENT: SUPERVISORS

Chairperson of the Board

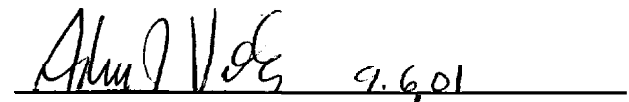
ATTEST:

Clerk of the Board

APPROVED AS TO FORM:


County Counsel

APPROVED AS TO ACCOUNTING DETAIL:

 9.6.01
Auditor/Controller

Distribution:

Auditor-Controller
County Council
County Administrative Officer
Originating Department

HEALTH SERVICES AGENCY
 AUD-60 ATTACHMENT
 PUBLIC HEALTH - HOMELESS PERSONS HEALTH PROJE

FISCAL YEAR 2001-2002

REVENUES:

T/C	Index Number	Revenue Subobject Number	Account Name	Amount
001	362950	996	FEDERAL HEALTH PROGRAMS	\$ 58,333
Total				\$ 58,333

APPROPRIATIONS:

T/C	Index Number	Expenditure Subobject Number	PRJ/UCD	Account Name	Amount
021	362950	3100		REGULAR PAY	\$ 26,764
021	362950	3150		FICA	2,047
021	362950	3155		PERS	3,491
021	362950	3160		INSURANCE	2,698
021	362950	3493		SUPPLIES	5,000
021	362950	3614		MEDICAL AND DENTAL CARE	4,733
021	362950	3975		SPECIAL DEPTL EXPENSE	5,100
021	362950	8404		EQUIPMENT	8,500
Total					\$ 58,333