

# APPLICATION

## Local Public Health Preparedness & Response to Bioterrorism Program Supplemental Award Funding For Fiscal Year 2003-04

### SAN MATEO COUNTY

**San Mateo County Health Services Agency**  
**<Name of Local Health Department>**

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Upon execution, this document shall meet the Application requirement as set forth in Section 101315 et seq. of the Health and Safety Code.

The Local Health Department of San Mateo County (hereinafter called the LHD), hereby applies to the California Department of Health Services (hereinafter called CDHS), for Public Health Preparedness and Response to Bioterrorism funding.

- I. The term of this Application is July 1, 2003 through June 30, 2004.
- II. Amount payable under this Application is:

Category 2 – Focus Areas A, B, E, F, G	\$843,047
Category 2 – Smallpox	\$90,230
Category 3 – Focus Area C (Public Health Laboratory)	\$85,416
Other – Strategic National Stockpile	\$83,727
<b>Maximum Amount Payable Under This Application:</b>	<b>\$1,102,420</b>

- III. Funding Categories:

Category 2 (FY 2003-04) Funds: These funds are being awarded to eligible LHDs to plan for and implement the core public health capacities and benchmarks required in CDHS' Application to the federal Centers for Disease Control and Prevention (CDC) and in accordance with the local Bioterrorism Preparedness Plan.

Category 3 (FY 2003-04) Funds: LHDs that maintain either a Level A or Level B Public Health Laboratory may receive Category 3 Funds. These funds are

issued to plan and complete specific biologic laboratory training activities and for specific approved laboratory enhancements.

Other - Strategic National Stockpile (SNS) Funds: All LHDs must be prepared to accept and distribute materials from the SNS, should it be deployed in your jurisdiction or region. The SNS funds are issued to LHDs to assist in planning and coordination activities, and to complete training activities. SNS funds must be budgeted separately and expenditures must be tracked separately from Category 2 and 3 funds.

#### IV. Expenditure and Program Requirements

- A. Funds shall only be used for the purposes specified in Section 101317 of the Health and Safety Code and may not be used to supplant existing levels of services.
- B. In accordance with CDHS' procedures and formats, the LHD will submit a FY 2003-04 Application, Statement of Work and Budgets (including justification). The materials will be due **on or before December 79, 2003**. The Application will include a certification signed by the Chairperson of the LHD's Board of Supervisors or the Mayor of the LHD's City to certify that the funds will not be used to supplant existing levels of funding and services and will only be used for the purposes specified in Section 101317.
- C. In submitting this Application, the LHD assures that it will comply with the provisions set forth in statute and that its application is in accordance with the LHD Workplan, approved by CDHS in SFY 2002-03.
- D. Funds made available through this Application are limited to activities that support the development and implementation of CDC's critical capacities, as described in the LHD's Local Bioterrorism Preparedness Plan and Budget. The Application and Budget are subject to review and approval by CDHS. Upon approval of the Application and Budget, CDHS will develop a formal Agreement with each LHD.
- E. Carryover of unspent/unencumbered funds from the previous SFY is at the discretion of CDHS and subject to approvals from CDC (if necessary) and must follow CDHS carryover policies. Carryover funds are limited to activities that support the development and implementation of CDC's critical capacities, as described in the LHD's Local Bioterrorism Preparedness Plan, Budget and Statement of Work.

V. Payment Schedule

- A. C.DHS will make quarterly payments to the LHD, as authorized in statute and the annual expenditure authority granted to CDHS in the Budget Act. This payment schedule is contingent upon timely submission and approval of the following documents:

Document	Due Date	Percent Released	Payment Released
Application	December 19,2003	50%	1 <sup>st</sup> and 2 <sup>nd</sup> Quarter
Signed Agreement	January – March 2004	25%	3 <sup>rd</sup> Quarter
First Progress Report	February 02, 2004		
Final Report	September 15,2004	11 %	4 <sup>th</sup> Quarter

- B. Reconciliation of quarterly payments shall be through two semi-annual expenditure reports and an annual reconciliation report. These reports shall be submitted in accordance with timelines, formats and specifications to be provided by CDHS. An invoice may be required to release quarterly payments. Expenditure reports, cost reconciliation reports, and invoices, (if needed) should be directed to:

California Department of Health Services  
 Emergency Preparedness Office  
 Attn: LHD Allocation Award Program  
 601 No. 7<sup>th</sup> Street, MS 7002  
 P.O. Box 942732  
 Sacramento, CA 94234-7320

VI. Local Public Health Preparedness Trust Fund

- A. The LHD shall deposit all funds received from CDHS into an interest-bearing Local Public Health Preparedness Trust Fund (hereafter called the Fund) established solely for this purpose before transferring or expending the funds for any uses allowed pursuant to Article 6 (commencing with section 101315), Chapter 3 of Part 3 of Division 101 of the Health and Safety Code.

- B. The Interest earned on moneys in the Fund shall accrue to the benefit of the Fund and shall be expended for the same purposes as other moneys in the Fund.
- C. The LHD must submit a budget and budget justification prior to expending any interest earned in the Fund. Use of the funds is subject to prior approval by CDHS.

VII. Reporting Requirements

- A. The LHD will submit semi annual Progress Reports. Due dates for the Progress Reports are, February 02,2004 and September 152004. The September 152004 report will serve as the final year-end report.
- B. Specific reporting requirements will be established by CDHS, in consultation with LHDs. Reports shall be submitted according to the procedures and format set forth by CDHS.
- C. Semi Annual Reports shall include, but not be limited to:
  - 1) Progress Report
    - A description of progress made toward achieving the goals objectives set forth in your approved BT Plan and Statement of Work.
    - Data and information needed to implement Article 6 (commencing with section 101315), Chapter 3 of Part 3 of Division 101 of the Health and Safety Code.
  - 2) Expenditure Report
    - Documentation of all expenditures by focus area, category (i.e. smallpox, SNS), and line item as approved in each budget.
  - 3) Trust Fund Report
    - Documentation all deposits, expenditures, interest earned, and any other transactions occurring within the Fund.

4) Certification Form

- The Chairperson of the County Board of Supervisors, or the Mayor of the City is required to sign this form. However, for the purpose of semi annual reporting, this function may be delegated by the Chairperson of the Board of Supervisors or the Mayor of the City. If this function is delegated, the delegation order must accompany the completed certification form.

- D. A SFY 2003-2004 Cost Reconciliation Report is due by November 1, 2004. The LHD must reconcile actual expenditures, allowable costs, and budgets. Budgets must be reconciled by focus area, category (i.e. smallpox, SNS) and line items within the budgets. Unspent funds must also be identified by focus area and category.

VIII. Accountability Requirements

- A. CDHS may recoup funds expended by the LHD in violation of subdivision (d) of Section 101315 of the Health and Safety Code. CDHS will meet with local health officials prior to recouping such funds.
- B. CDHS may withhold payments if the LHD is not in compliance with the terms and conditions of this Application, the approved Plan and Budget or the formal Agreement. CDHS will meet with local health officials prior to withholding such payments.
- C. The LHD shall maintain financial records, of expenditures for at least four years after the end of the budget period. These financial records are subject to review and audit by the State of California and the Federal government.
- D. The LHD shall return unexpended funds from FY 2003-04 unless carry over of such funds is approved by CDHS.

IX. Project Representatives during the term of this Application will be:

California Department of Health Services Emergency Preparedness Office	San Mateo County Health Services Agency Public Health
Attention: Patricia G. Felten	Attention: John Conley
601 North 7 <sup>th</sup> Street, MS 7002	225 37 <sup>th</sup> Avenue
P.O. Box 942732	
Sacramento, CA 94234-7320	San Mateo, CA 94403
Telephone: (916) 324-7804	Telephone: (650) 573-2757
Fax: (916) 324-7806	Fax: (650) 573-2397

X. Submit **the** original signed Application (pages I-6, inclusive) to:

California Department of Health Services  
 Emergency Preparedness Office  
 Attention: LHD Allocation Award Program  
 601 North 7th Street, MS 7002  
 PO Box 942732  
 Sacramento, CA 94234-7320

In submitting this Application, the LHD assures the CDHS that it will comply with all provisions set forth in this document.

**THIS APPLICATION HAS BEEN APPROVED BY THE BOARD OF SUPERVISORS OR DULY AUTHORIZED REPRESENTATIVE\* AND IS HEREBY EXECUTED.**

<b><i>State of California</i></b>	<b><i>11 San Mateo County</i></b>
Signature:	Signature:
Printed Name: ; ; / Printed Name:	Mark Church
Title:	Title: President, Board of Supervisors
Date: 1 - D a t e :	

***\*If signed by a representative, please enclose a copy of the official Board resolution authorizing his/her signature.***

**CERTIFICATION FORM**

**Public Health Preparedness & Response to Bioterrorism  
Local Health Department Funding  
Fiscal Year 2003-04**

**San Mateo County Health Services Agency**

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(County/City and Name of Local Health Department)

I hereby certify that the above-named local health department shall not use funds allocated by the California Department of Health Services to supplant funding for existing levels of service and that funds shall only be used for the purposes specified in the local health department's Bioterrorism Preparedness Plan as approved by the California Department of Health Services.

I further certify that funds received shall be deposited in an interest-bearing Local Public Health Preparedness Trust Fund and expended only for the purposes stated in the local health department's Bioterrorism Preparedness Plan and Budget, as approved by the California Department of Health Services.

Chairperson, Board of Supervisors or the Mayor of a City

Signature:
Printed Name: Mark Church
Title: President, Board of Supervisors
Phone: 650-363-4653
Date:

Please return the original certification with the Application to:

California Department Health Services  
Emergency Preparedness Office  
Attn: LHD Allocation Award Program  
601 No. 7<sup>th</sup> Street, M.S. 7002  
P.O. Box 942732  
Sacramento, CA 94234-7320