

95-21

MARIPOSA COUNTY
BOARD OF SUPERVISORS

AGENDA
ACTION FORM

DATE: Jan. 17, 1995
AGENDA ITEM NO.: CA 2

DEPARTMENT: BY: PHONE:
Public Health Charles B. Mosher, M.D., Health Officer 966-3689
RECOMMENDED ACTION AND JUSTIFICATION: (Policy Item: Yes___ No X)

Recommend resolution authorizing Health Officer to sign Agreement between Central San Joaquin Valley HIV Care Consortium and Mariposa County Health Department for Fiscal Year 1994-1995. These are federal funds used for social, medical, and psychological services for people with AIDS, and HIV disease and their families. Our AIDS Coordinator (Juanita Smith, RN) provides oversight and input from our County and \$5,000 of these funds are returned to help offset County general funds expenditure for her salary and travel.

The Health Department, in consultation with the County's AIDS Task Force, has previously recommended (and continues to recommend), and the Board has previously agreed, that these funds be turned over to the Multi-County "Consortium" to administer rather than administering them here because:

1. The Health Department wants to focus on AIDS prevention, and disbursing funds is not a prevention activity;
2. The "Consortium" has much more experience in managing AIDS and HIV cases than anyone in Mariposa County, thus providing better service to our citizens who need care;
3. The Specialist experts in HIV and AIDS are located out of County (with one exception in the Yosemite Medical Clinic);
4. Clients have repeatedly told us that they prefer to seek care out of County and will avoid using in-County services for reasons of confidentiality;
5. We require the Consortium to provide us with periodic reports and a portion of the funds (\$5,000) to provide oversight;
6. We can change this arrangement at any time that the County decides to do so.

BOARD AND HISTORY OF BOARD ACTIONS:

Resolutions 92-66, 93-120, and 94-5 took similar action with these funds for prior fiscal years. Resolution 94-124 approved the letter of intent to apply for these funds.

(Continued from Page 1)

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

- 1. Do not authorize Health Officer to sign Agreement and have the County administer the funds.
- 2. Return all Ryan White funds which may reduce future allocations.
- 3. Other direction.

COSTS: () Not Applicable

A. Budgeted current FY	\$ 5,000
B. Total anticipated costs	\$ 5,000
C. Required additional funding	\$ 0
D. Internal transfers	\$ _____

SOURCE: () 4/5ths Vote Required

A. Unanticipated revenues	\$ _____
B. Reserve for contingencies	\$ _____
C. Source description:	_____
Balance in Reserve for Contingencies,	_____
if approved: \$	_____

SPECIAL INSTRUCTIONS:
List the attachments and number the pages consecutively:

CLERK'S USE ONLY:

Res. No.: 95-21 Ord. No. _____

Vote - Ayes: _____ Does: _____

Absent: _____ Abstained: _____

Approved: _____ Denied: _____

Minute Order Attached () No Action Necessary

ADMINISTRATIVE OFFICER'S RECOMMENDATION:
This item on agenda as:

Recommended

Not Recommended

For Policy Determination

Submitted with Comment

Returned for Further Action

Comment: _____

A.O. Initials: AW

The foregoing instrument is a correct copy of the original on file in this office.

Date: _____

ATTEST: MARGIE WILLIAMS, Clerk of the Board
County of Mariposa, State of California

By: _____
Deputy