

RESOLUTION NO. 2005-288

A RESOLUTION BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, APPROVING THE TERMS, PROVISIONS, CONDITIONS, AND REQUIREMENTS OF AN AGREEMENT BETWEEN THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, AND STATE OF FLORIDA DEPARTMENT OF HEALTH FOR OPERATION OF THE ST. JOHNS COUNTY HEALTH DEPARTMENT, FOR CONTRACT YEAR 2005-2006, AND AUTHORIZING THE CHAIRPERSON OF THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA TO EXECUTE THE AGREEMENT ON BEHALF OF ST. JOHNS COUNTY.

WHEREAS, St. Johns County, Florida (County) currently has Contract with the State of Florida, Department of Health (State), in order to provide the necessary funds for the St. Johns County Health Department; and

WHEREAS, with respect to the provision of services and operation of the St. Johns County Health Department, the County has complied with the terms, provisions, conditions, and requirements of the current Contract for the operation of the St. Johns County Health Department; and

WHEREAS, the Contract between St. Johns County, and the State of Florida Department of Health, for operation of the St. Johns County Health Department, for Contract Year 2005-2006 (2005-2006 Contract) establishes the rights, duties, and responsibilities of both the State and County with respect to providing services and operating the County Health Department; and

WHEREAS, the County has reviewed the terms, provisions, conditions, and requirements of the 2005-2006 Contract; and

WHEREAS, the County has determined that accepting the terms of the 2005-2006 Contract, and entering into said 2005-2006 Contract will serve the interest of the County.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, AS FOLLOWS:

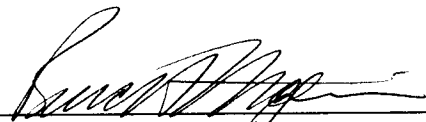
Section 1. The above Recitals are hereby incorporated into the body of this Resolution, and are adopted as Findings of Fact.

Section 2. The Board of County Commissioners hereby approves the terms, provisions, conditions, and requirements of the 2005-2006 Contract between the Board of County Commissioners of St. Johns County, Florida (on behalf of St. Johns County, Florida), and the State of Florida Department of Health, and authorizing the Chairperson of the Board of County Commissioners of St. Johns County, Florida to execute the 2005-2006 Contract on behalf of St. Johns. County.

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County, Florida, this 4th day of October, 2005.

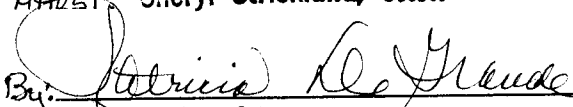
BOARD OF COUNTY COMMISSIONERS
OF ST. JOHNS COUNTY, FLORIDA

By:



Bruce A. Maguire, Chairman

Attest: Cheryl Strickland, Clerk


By: _____
Deputy Clerk

RENDITION DATE 10-6-05



**CONTRACT BETWEEN
ST JOHNS COUNTY BOARD OF COUNTY COMMISSIONERS
AND
STATE OF FLORIDA DEPARTMENT OF HEALTH
FOR OPERATION OF
THE ST. JOHNS COUNTY HEALTH DEPARTMENT
CONTRACT YEAR 2005-2006**

This agreement ("Agreement") is made and entered into between the State of Florida, Department of Health ("State") and the St. Johns County Board of County Commissioners ("County"), through their undersigned authorities, effective October 1, 2005.

RECITALS

A. Pursuant to Chapter 154, F.S., the intent of the legislature is to "promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated county health department services."

B. County Health Departments were created throughout Florida to satisfy this legislative intent through "promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations."

C. St. Johns County Health Department ("CHD") is one of the County Health Departments created throughout Florida. It is necessary for the parties hereto to enter into this Agreement in order to assure coordination between the State and the County in the operation of the CHD.

NOW THEREFORE, in consideration of the mutual promises set forth herein, the sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

1. RECITALS. The parties mutually agree that the forgoing recitals are true and correct and incorporated herein by reference.

2. TERM. The parties mutually agree that this Agreement shall be effective from October 1, 2005, through September 30, 2006, or until a written agreement replacing this Agreement is entered into between the parties, whichever is later, unless this Agreement is otherwise terminated pursuant to the termination provisions set forth in paragraph 8, below.

3. SERVICES MAINTAINED BY THE CHD. The parties mutually agree that the CHD shall provide those services as set forth on Part III of Attachment II hereof, in order to maintain the following three levels of service pursuant to Section 154.01(2), Florida Statutes, as defined below:

a. "Environmental health services" are those services which are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment which may contribute to the occurrence or transmission of disease. Environmental health services shall be supported by available federal, state and local

funds and shall include those services mandated on a state or federal level. Examples of environmental health services include, but are not limited to, food hygiene, safe drinking water supply, sewage and solid waste disposal, swimming pools, group care facilities, migrant labor camps, toxic material control, radiological health, occupational health.

b. "Communicable disease control services" are those services which protect the health of the general public through the detection, control, and eradication of diseases which are transmitted primarily by human beings. Communicable disease services shall be supported by available federal, state, and local funds and shall include those services mandated on a state or federal level. Such services include, but are not limited to, epidemiology, sexually transmissible disease detection and control, HIV/AIDS, immunization, tuberculosis control and maintenance of vital statistics.

c. "Primary care services" are acute care and preventive services that are made available to well and sick persons who are unable to obtain such services due to lack of income or other barriers beyond their control. These services are provided to benefit individuals, improve the collective health of the public, and prevent and control the spread of disease. Primary health care services are provided at home, in group settings, or in clinics. These services shall be supported by available federal, state, and local funds and shall include services mandated on a state or federal level. Examples of primary health care services include, but are not limited to: first contact acute care services; chronic disease detection and treatment; maternal and child health services; family planning; nutrition; school health; supplemental food assistance for women, infants, and children; home health; and dental services.

4. FUNDING. The parties further agree that funding for the CHD will be handled as follows:

a. The funding to be provided by the parties and any other sources are set forth in Part II of Attachment II hereof. This funding will be used as shown in Part I of Attachment II.

i. The State's appropriated responsibility (direct contribution excluding any state fees, Medicaid contributions or any other funds not listed on the Schedule C) as provided in Attachment II, Part II is an amount not to exceed \$ 2,988,645 (State General Revenue, Other State Funds and Federal Funds listed on the Schedule C). The State's obligation to pay under this contract is contingent upon an annual appropriation by the Legislature.

ii. The County's appropriated responsibility (direct contribution excluding any fees, other cash or local contributions) as provided in Attachment II, Part II is an amount not to exceed \$365,573 (amount listed under the "Board of County Commissioners Annual Appropriations section of the revenue attachment).

b. Overall expenditures will not exceed available funding or budget authority, whichever is less, (either current year or from surplus trust funds) in any service category. Unless requested otherwise, any surplus at the end of the term of this Agreement in the County Health Department Trust Fund that is attributed to the CHD shall be carried forward to the next contract period.

c. Either party may establish service fees as allowed by law to fund activities of the CHD. Where applicable, such fees shall be automatically adjusted to at least the Medicaid fee schedule.

d. Either party may increase or decrease funding of this Agreement during the term hereof by notifying the other party in writing of the amount and purpose for the change in funding. If the State initiates the increase/decrease, the CHD will revise the Attachment II and send a copy of the revised pages to the County and the Department of Health, Bureau of Budget Management. If the County initiates the increase/decrease, the County shall notify the CHD. The CHD will then revise the Attachment II and send a copy of the revised pages to the Department of Health, Bureau of Budget Management.

e. The name and address of the official payee to who payments shall be made is:

County Health Department Trust Fund
St. Johns County
1955 US 1 South, Suite 100
St. Augustine, FL 32086

5. CHD DIRECTOR/ADMINISTRATOR. Both parties agree the director/administrator of the CHD shall be a State employee or under contract with the State and will be under the day-to-day direction of the Deputy State Health Officer. The director/administrator shall be selected by the State with the concurrence of the County. The director/administrator of the CHD shall insure that non-categorical sources of funding are used to fulfill public health priorities in the community and the Long Range Program Plan. A report detailing the status of public health as measured by outcome measures and similar indicators will be sent by the CHD director/administrator to the parties no later than October 1 of each year (*This is the standard quality assurance "County Health Profile" report located on the Office of Planning, Evaluation & Data Analysis Intranet site*).

6. ADMINISTRATIVE POLICIES AND PROCEDURES. The parties hereto agree that the following standards should apply in the operation of the CHD:

a. The CHD and its personnel shall follow all State policies and procedures, except to the extent permitted for the use of county purchasing procedures as set forth in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel rules and procedures. Employees will report time in the Client Information System/Health Management Component compatible format by program component as specified by the State.

b. The CHD shall comply with all applicable provisions of federal and state laws and regulations relating to its operation with the exception that the use of county purchasing procedures shall be allowed when it will result in a better price or service and no statewide Department of Health purchasing contract has been implemented for those goods or services. In such cases, the CHD director/administrator must sign a justification therefore, and all county-purchasing procedures must be followed in their entirety, and such compliance shall be documented. Such justification and compliance documentation shall

be maintained by the CHD in accordance with the terms of this Agreement. State procedures must be followed for all leases on facilities not enumerated in Attachment IV.

c. The CHD shall maintain books, records and documents in accordance with those promulgated by the Generally Accepted Accounting Principles (GAAP) and Governmental Accounting Standards Board (GASB), and the requirements of federal or state law. These records shall be maintained as required by the Department of Health Policies and Procedures for Records Management and shall be open for inspection at any time by the parties and the public, except for those records that are not otherwise subject to disclosure as provided by law which are subject to the confidentiality provisions of paragraph 6.i., below. Books, records and documents must be adequate to allow the CHD to comply with the following reporting requirements:

- i.* The revenue and expenditure requirements in the Florida Accounting System Information Resource (FLAIR).
- ii.* The client registration and services reporting requirements of the minimum data set as specified in the most current version of the Client Information System/Health Management Component Pamphlet;
- iii.* Financial procedures specified in the Department of Health's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda;
- iv.* The CHD is responsible for assuring that all contracts with service providers include provisions that all subcontracted services be reported to the CHD in a manner consistent with the client registration and service reporting requirements of the minimum data set as specified in the Client Information System/Health Management Component Pamphlet.

d. All funds for the CHD shall be deposited in the County Health Department Trust Fund maintained by the state treasurer. These funds shall be accounted for separately from funds deposited for other CHDs and shall be used only for public health purposes in St. Johns County.

e. That any surplus/deficit funds, including fees or accrued interest, remaining in the County Health Department Trust Fund account at the end of the contract year shall be credited/debited to the state or county, as appropriate, based on the funds contributed by each and the expenditures incurred by each. Expenditures will be charged to the program accounts by state and county based on the ratio of planned expenditures in the core contract and funding from all sources is credited to the program accounts by state and county. The equity share of any surplus/deficit funds accruing to the state and county is determined each month and at contract year-end. Surplus funds may be applied toward the funding requirements of each participating governmental entity in the following year. However, in each such case, all surplus funds, including fees and accrued interest, shall remain in the trust fund until accounted for in a manner which clearly illustrates the amount which has been credited to each participating governmental entity. The planned use of

surplus funds shall be reflected in Attachment II, Part I of this contract, with special capital projects explained in Attachment V.

f. There shall be no transfer of funds between the three levels of services without a contract amendment unless the CHD director/administrator determines that an emergency exists wherein a time delay would endanger the public's health and the Deputy State Health Officer has approved the transfer. The Deputy State Health Officer shall forward written evidence of this approval to the CHD within 30 days after an emergency transfer.

g. The CHD may execute subcontracts for services necessary to enable the CHD to carry out the programs specified in this Agreement. Any such subcontract shall include all aforementioned audit and record keeping requirements.

h. At the request of either party, an audit may be conducted by an independent CPA on the financial records of the CHD and the results made available to the parties within 180 days after the close of the CHD fiscal year. This audit will follow requirements contained in OMB Circular A-133 and may be in conjunction with audits performed by county government. If audit exceptions are found, then the director/administrator of the CHD will prepare a corrective action plan and a copy of that plan and monthly status reports will be furnished to the contract managers for the parties.

i. The CHD shall not use or disclose any information concerning a recipient of services except as allowed by federal or state law or policy.

j. The CHD shall retain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this Agreement for a period of five (5) years after termination of this Agreement. If an audit has been initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings.

k. The CHD shall maintain confidentiality of all data, files, and records that are confidential under the law or are otherwise exempted from disclosure as a public record under Florida law. The CHD shall implement procedures to ensure the protection and confidentiality of all such records and shall comply with sections 384.29, 381.004, 392.65 and 456.057, Florida Statutes, and all other state and federal laws regarding confidentiality. All confidentiality procedures implemented by the CHD shall be consistent with the Department of Health Information Security Policies, Protocols, and Procedures, dated September 1997, as amended, the terms of which are incorporated herein by reference. The CHD shall further adhere to any amendments to the State's security requirements and shall comply with any applicable professional standards of practice with respect to client confidentiality.

l. The CHD shall abide by all State policies and procedures, which by this reference are incorporated herein as standards to be followed by the CHD, except as otherwise permitted for some purchases using county procedures pursuant to paragraph 6.b. hereof.

m. The CHD shall establish a system through which applicants for services and current clients may present grievances over denial, modification or termination of services. The

CHD will advise applicants of the right to appeal a denial or exclusion from services, of failure to take account of a client's choice of service, and of his/her right to a fair hearing to the final governing authority of the agency. Specific references to existing laws, rules or program manuals are included in Attachment I of this Agreement.

n. The CHD shall comply with the provisions contained in the Civil Rights Certificate, hereby incorporated into this contract as Attachment III.

o. The CHD shall submit quarterly reports to the county that shall include at least the following:

i. The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report;

ii. A written explanation to the county of service variances reflected in the DE385L1 report if the variance exceeds or falls below 25 percent of the planned expenditure amount. However, if the amount of the service specific variance between actual and planned expenditures does not exceed three percent of the total planned expenditures for the level of service in which the type of service is included, a variance explanation is not required. A copy of the written explanation shall be sent to the Department of Health, Bureau of Budget Management.

p. The dates for the submission of quarterly reports to the county shall be as follows unless the generation and distribution of reports is delayed due to circumstances beyond the CHD's control:

i. March 1, 2006 for the report period October 1, 2005 through December 31, 2005;

ii. June 1, 2006 for the report period October 1, 2005 through March 31, 2006;

iii. September 1, 2006 for the report period October 1, 2005 through June 30, 2006; and

iv. December 1, 2006 for the report period October 1, 2005 through September 30, 2006.

7. FACILITIES AND EQUIPMENT. The parties mutually agree that:

a. CHD facilities shall be provided as specified in Attachment IV to this contract and the county shall own the facilities used by the CHD unless otherwise provided in Attachment IV.

b. The county shall assure adequate fire and casualty insurance coverage for County-owned CHD offices and buildings and for all furnishings and equipment in CHD offices through either a self-insurance program or insurance purchased by the County.

c. All vehicles will be transferred to the ownership of the County and registered as county vehicles. The county shall assure insurance coverage for these vehicles is available through either a self-insurance program or insurance purchased by the County. All vehicles will be used solely for CHD operations. Vehicles purchased through the County Health Department Trust Fund shall be sold at fair market value when they are no longer needed by the CHD and the proceeds returned to the County Health Department Trust Fund.

8. TERMINATION.

a. Termination at Will. This Agreement may be terminated by either party without cause upon no less than one-hundred eighty (180) calendar days notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.

b. Termination Because of Lack of Funds. In the event funds to finance this Agreement become unavailable, either party may terminate this Agreement upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.

c. Termination for Breach. This Agreement may be terminated by one party, upon no less than thirty (30) days notice, because of the other party's failure to perform an obligation hereunder. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery. Waiver of breach of any provisions of this Agreement shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the terms of this Agreement.

9. MISCELLANEOUS. The parties further agree:

a. Availability of Funds. If this Agreement, any renewal hereof, or any term, performance or payment hereunder, extends beyond the fiscal year beginning July 1, 2006, it is agreed that the performance and payment under this Agreement are contingent upon an annual appropriation by the Legislature, in accordance with section 287.0582, Florida Statutes.

b. Contract Managers. The name and address of the contract managers for the parties under this Agreement are as follows:

For the State:

Greg Ballard
Name

Administrative Services
Director III
Title

For the County:

Ben W. Adams, Jr.
Name

County Administrator
Title

1955 US 1 South, Suite, 100
St. Augustine, FL 32086
Address

(904) 825-5055 ext. 1006
Telephone

P.O. Drawer 349
St. Augustine, FL 32085-0349
Address

(904) 823-2505
Telephone

If different contract managers are designated after execution of this Agreement, the name, address and telephone number of the new representative shall be furnished in writing to the other parties and attached to originals of this Agreement.

c. Captions. The captions and headings contained in this Agreement are for the convenience of the parties only and do not in any way modify, amplify, or give additional notice of the provisions hereof.

In WITNESS THEREOF, the parties hereto have caused this 24 page agreement to be executed by their undersigned officials as duly authorized effective the 1st day of October, 2005.

**BOARD OF COUNTY COMMISSIONERS
FOR ST JOHNS COUNTY**

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

SIGNED BY: _____
NAME: _____
TITLE: _____
DATE: _____

ATTESTED TO:

SIGNED BY: _____
NAME: _____
TITLE: _____
DATE: _____

SIGNED BY: _____
NAME: John O. Agwunobi, M.D., M.B.A., M.P.H.
TITLE: Secretary
DATE: _____

SIGNED BY: _____
NAME: Dawn Allicock, MD, MPH
TITLE: CHD Director/Administrator
DATE: _____

ATTACHMENT I

ST. JOHNS COUNTY HEALTH DEPARTMENT

PROGRAM SPECIFIC REPORTING REQUIREMENTS AND PROGRAMS REQUIRING COMPLIANCE WITH THE PROVISIONS OF SPECIFIC MANUALS

Some health services must comply with specific program and reporting requirements in addition to the Personal Health Coding Pamphlet (DHP 50-20), Environmental Health Coding Pamphlet (DHP 50-21) and FLAIR requirements because of federal or state law, regulation or rule. If a county health department is funded to provide one of these services, it must comply with the special reporting requirements for that service. The services and the reporting requirements are listed below:

	<u>Service</u>	<u>Requirement</u>
1.	Sexually Transmitted Disease Program	Requirements as specified in FAC 64D-3, F.S. 381 and F.S. 384 and the CHD Guidebook.
2.	Dental Health	Monthly reporting on DH Form 1008*.
3.	Special Supplemental Nutrition Program for Women, Infants and Children.	Service documentation and monthly financial reports as specified in DHM 150-24* and all federal, state and county requirements detailed in program manuals and published procedures.
4.	Healthy Start/ Improved Pregnancy Outcome	Requirements as specified in the Healthy Start Standards and Guidelines 1998 and as specified by the Health Start Coalitions in contract with each county health department.
5.	Family Planning	Periodic financial and programmatic reports as specified by the program office and in the CHD Guidebook, Internal Operating Policy FAMPLAN 14*
6.	Immunization	Periodic reports as specified by the department regarding the surveillance/investigation of reportable vaccine preventable diseases, vaccine usage accountability, the assessment of various immunization levels and forms reporting adverse events following immunization and Immunization Module quarterly quality audits and duplicate data reports.
7.	Chronic Disease Program	Requirements as specified in the Community Intervention Program (CIP) and the CHD Guidebook.
8.	Environmental Health	Requirements as specified in DHP 50-4* and 50-21*
9.	HIV/AIDS Program	Requirements as specified in Florida Statue 384.25 and 64D-3.016 and 3.017 F.A.C. and the CHD Guidebook. Case reporting on CDC Forms 50.42B (Adult/ Adolescent) and 50.42A (Pediatric). Socio-demographic data on persons tested for HIV in CHD clinics should be reported on Lab Request Form 1628 or Post-Test Counseling Form 1633. These reports are to be sent to the Headquarters HIV/AIDS office within 5 days of the initial post-test counseling appointment or within 90 days of the missed post-test counseling appointment.

ATTACHMENT I (Continued)

10. School Health Services

HRSM 150-25*, including the requirement for an annual plan as a condition for funding.

*or the subsequent replacement if adopted during the contract period.

ATTACHMENT II

ST. JOHNS COUNTY HEALTH DEPARTMENT

PART I. PLANNED USE OF COUNTY HEALTH DEPARTMENT TRUST FUND BALANCES

	Estimated State Share of CHD Trust Fund Balance as of 09/30/05	Estimated County Share of CHD Trust Fund Balance as of 09/30/05	Total
1. CHD Trust Fund Ending Balance 09/30/05	\$ 706,493	\$ 796,683	\$ 1,503,176
2. Drawdown for Contract Year October 1, 2005 to September 30, 2006	\$ 199,300		\$ 199,300
3. Special Capital Project use for Contract Year October 1, 2005 to September 30, 2006	\$ 368,517		\$ 368,517
4. Balance Reserved for Contingency Fund October 1, 2005 to September 30, 2006	\$ 138,676	\$ 796,683	\$ 935,359

Note: The total of items 2, 3 and 4 must equal the ending balance in item 1.

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects, and mobile health vans.

Pursuant to 154.02, F.S., At a minimum, the trust fund shall consist of: an operating reserve, consisting of 8.5 percent of the annual operating budget, maintained to ensure adequate cash flow from nonstate revenue sources.

Working Copy ATTACHMENT II.

**SAINT JOHNS COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2005 to September 30, 2006

	Fund □(cash)	Fund □(cash)	Fund □(cash)	□Contributions	Total
1. GENERAL REVENUE - STATE					
015050	ALG/CESSPOOL IDENTIFICATION AND ELIMINATION	0	0	0	0
015050	ALG/CONTR TO CHDS	1,543,219	0	1,543,219	1,543,219
015050	ALG/CONTR TO CHDS-AIDS PATIENT CARE	100,000	0	100,000	100,000
015050	ALG/CONTR TO CHDS-AIDS PREV & SURV & FIELD STA	34,937	0	34,937	34,937
015050	ALG/CONTR TO CHDS-MIGRANT LABOR CAMP SANITA	3,149	0	3,149	3,149
015050	ALG/CONTR. TO CHDS-DENTAL PROGRAM	0	0	0	0
015050	ALG/CONTR. TO CHDS-IMMUNIZATION OUTREACH TEA	10,544	0	10,544	10,544
015050	ALG/CONTR. TO CHDS-INDOOR AIR ASSIST PROG	0	0	0	0
015050	ALG/CONTR. TO CHDS-MCH HEALTH - FIELD STAFF CO:	0	0	0	0
015050	ALG/CONTR. TO CHDS-SOVEREIGN IMMUNITY	0	0	0	0
015050	ALG/CONTRIBUTION TO CHDS-PRIMARY CARE	16,935	0	16,935	16,935
015050	ALG/FAMILY PLANNING	32,894	0	32,894	32,894
015050	ALG/IPO - OUTREACH SOCIAL WORKERS CAT. 050707	0	0	0	0
015050	ALG/IPO HEALTHY START	0	0	0	0
015050	ALG/IPO HEALTHY START/IPO CAT 050707	0	0	0	0
015050	ALG/IPO-INFANT MORTALITY PROJECT CAT. 050707	0	0	0	0
015050	ALG/MCH HEALTHY START/IPO CAT 050870	0	0	0	0
015050	ALG/MCH-INFANT MORTALITY PROJECT CAT. 050870	0	0	0	0
015050	ALG/MCH-OUTREACH SOCIAL WORKERS CAT 050870	0	0	0	0
015050	ALG/PRIMARY CARE	219,151	0	219,151	219,151
015050	ALG/SCHOOL HEALTH/SUPPLEMENTAL	0	0	0	0
015050	CHD SUPPORT SERVICES	65,814	0	65,814	65,814
015050	COMMUNITY INTERVENTION PROGRAM	0	0	0	0
015050	COMMUNITY TB PROGRAM	38,963	0	38,963	38,963
015050	CONTR TO CHDS - DUVAL TEEN PREGNANCY PREVENT	0	0	0	0
015050	ENHANCED DENTAL SERVICES	0	0	0	0
015050	FL HEPATITIS & LIVER FAILURE PREVENTION/CONTRO	0	0	0	0
015050	HEALTH PROMOTION & EDUCATION INITIATIVES	0	0	0	0
015050	HEALTHY BEACHES MONITORING	13,771	0	13,771	13,771
015050	HEALTHY START - DATA COLLECTION PROJECT STAFF	0	0	0	0
015050	LA LIGA CONTRA EL CANCER	0	0	0	0
015050	MEDIVAN PROJECT	0	0	0	0
015050	METRO ORLANDO URBAN LEAGUE TEENAGE PREG PRI	0	0	0	0
015050	RED LEGISLATION - GAP GRANT (CAT 050310)	0	0	0	0
015050	SPECIAL NEEDS SHELTER PROGRAM	0	0	0	0
015050	STD GENERAL REVENUE	0	0	0	0
015050	VOLUNTEER SCHOOL HEALTH NURSE GRANT	0	0	0	0
	GENERAL REVENUE TOTAL	2,079,377	0	2,079,377	2,079,377
2. NON GENERAL REVENUE - STATE					
015010	ALG/CONTR TO CHDS-REBASING TOBACCO TF	27,854	0	27,854	27,854
015010	BASIC SCHOOL HEALTH - TOBACCO TF	101,088	0	101,088	101,088
015010	CHD SUPPORT SERVICES	0	0	0	0
015010	FL HEPATITIS & LIVER FAILURE PREVENTION/CONTRO	0	0	0	0
015010	FULL SERVICE SCHOOLS - TOBACCO TF	83,005	0	83,005	83,005

015010	ONSITE SEWAGE RESEARCH FUND	0	0	0	0	0
015010	WELL SURVEILLANCE REIMB-PESTICIDE	600	0	600	0	600
015010	SUPER ACT PROGRAM ADM TF	4,000	0	4,000	0	4,000

Working Copy ATTACHMENT II.

**SAINT JOHNS COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2005 to September 30, 2006

	Fund (cash)	Fund (cash)	Fund (cash)	Contributions	Total
2. NON GENERAL REVENUE - STATE					
015010	SUPPLEMENTAL/COMPREHENSIVE SCHOOL HEALTH -	0	0	0	0
015010	VARICELLA IMMUNIZATION REQUIREMENT TOBACCO	5,643	0	5,643	5,643
015020	ALG/CONTR. TO CHDS-BIOMEDICAL WASTE/DEP ADM	0	0	0	0
015020	ALG/CONTR. TO CHDS-SAFE DRINKING WATER PRG/DE	0	0	0	0
015020	FOOD AND WATERBORNE DISEASE PROGRAM ADM TF	0	0	0	0
NON GENERAL REVENUE TOTAL		222,190	0	222,190	0
3. FEDERAL FUNDS - State					
007000	AIDS PREVENTION	50,000	0	50,000	50,000
007000	AIDS SEROPREVALENCE	0	0	0	0
007000	AIDS SURVEILLANCE	0	0	0	0
007000	BIOTERR SURVEILLANCE & EPIDEMIOLOGY	44,627	0	44,627	44,627
007000	BIOTERRORISM HOSPITAL PREPAREDNESS	0	0	0	0
007000	BIOTERRORISM NETWORK COMMUNICATIONS	0	0	0	0
007000	BIOTERRORISM PLANNING & READINESS	66,313	0	66,313	66,313
007000	CHD SUPPORT SERVICES	0	0	0	0
007000	CHILDHOOD LEAD POISONING PREVENTION	0	0	0	0
007000	COASTAL BEACH MONITORING PROGRAM	12,472	0	12,472	12,472
007000	COMP COMMUNITY CARDIO - PHBG 2004-2005	0	0	0	0
007000	COMPREHENSIVE CARDIOVASCULAR PROGRAM	0	0	0	0
007000	FGTF/AIDS MORBIDITY	0	0	0	0
007000	FGTF/BREAST & CERVICAL CANCER-ADMIN/CASE MAN	0	0	0	0
007000	FGTF/FAMILY PLANNING TITLE X SPECIAL INITIATIVES	0	0	0	0
007000	FGTF/FAMILY PLANNING-TITLE X	54,306	0	54,306	54,306
007000	FGTF/IMMUNIZATION ACTION PLAN	16,658	0	16,658	16,658
007000	FGTF/WIC ADMINISTRATION	296,623	0	296,623	296,623
007000	HEALTH PROGRAM FOR REFUGEES	0	0	0	0
007000	HOUSING OPPORTUNITIES FOR PEOPLE WITH AIDS (HO	0	0	0	0
007000	IMMUNIZATION SUPPLEMENTAL	0	0	0	0
007000	IMMUNIZATION-WIC LINKAGES	0	0	0	0
007000	MCH BGTF-GADSDEN SCHOOL CLINIC	0	0	0	0
007000	MCH BGTF-HEALTHY START IPO	0	0	0	0
007000	MCH BGTF-INFANT MORTALITY PROJECT	0	0	0	0
007000	MCH BGTF-MCH/CHILD HEALTH	9,826	0	9,826	9,826
007000	MCH BGTF-MCH/DENTAL PROJECTS	119,622	0	119,622	119,622
007000	MCH BGTF-OUTREACH SOCIAL WORKERS	0	0	0	0
007000	PHP-CITIES RESPONSE INITIATIVE 2004-2005	0	0	0	0
007000	REDUCING BURDEN OF ARTHRITIS & RHEUMATIC CON	0	0	0	0
007000	REFUGEE HEALTH TB TARGETED TESTING	0	0	0	0
007000	RISK COMMUNICATIONS	0	0	0	0

007000	RYAN WHITE	0	0	0	0	0
007000	RYAN WHITE - EMERGING COMMUNITIES	0	0	0	0	0
007000	RYAN WHITE-AIDS DRUG ASSIST PROG-ADMIN	16,631	0	16,631	0	16,631
007000	RYAN WHITE-CONSORTIA	0	0	0	0	0
007000	STATE PROGRAMS TO PREVENT OBESITY 2003-04	0	0	0	0	0
007000	STD FEDERAL GRANT - CSPTS	0	0	0	0	0
007000	STD PROGRAM - PHYSICIAN TRAINING CENTER	0	0	0	0	0
007000	STD PROGRAM - SYPHILIS ELIMINATION (SE)	0	0	0	0	0

Working Copy ATTACHMENT II.

**SAINT JOHNS COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2005 to September 30, 2006

	Fund □(cash)	Fund □(cash)	Fund □(cash)	□Contributions	Total
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3. FEDERAL FUNDS - State

007000	STD PROGRAM INFERTILITY PREVENTION PROJECT (IP)	0	0	0	0	0
007000	STD PROGRAM-INFERTILITY PREVENTION PROJECT (IP)	0	0	0	0	0
007000	STRATEGIC NATIONAL STOCKPILE	0	0	0	0	0
007000	TRAINING AND EDUCATION	0	0	0	0	0
007000	TUBERCULOSIS CONTROL - FEDERAL GRANT	0	0	0	0	0
007000	WIC BREASTFEEDING PEER COUNSELING PROG FFY 20	0	0	0	0	0
007000	WIC INFRASTRUCTURE GRANT 2005-2006	0	0	0	0	0
015009	MEDIPASS WAIVER-HLTHY STRT CLIENT SERVICES	0	0	0	0	0
015009	MEDIPASS WAIVER-SOBRA	0	0	0	0	0
015009	SCHOOL HEALTH-SUPPLEMENT-TANF	0	0	0	0	0
015075	CHD SUPPORT SERVICES	0	0	0	0	0
015075	TITLEXXI/SCHOOL HEALTH/SUPPLEMENTAL	0	0	0	0	0
015075	REFUGEE SCREENING REIMBURSEMENT	0	0	0	0	0
FEDERAL FUNDS TOTAL		687,078	0	687,078	0	687,078

4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE

001020	MIGRANT HOUSING PERMIT	725	0	725	0	725
001020	MOBILE HOME AND PARKS	9,050	0	9,050	0	9,050
001020	FOOD HYGIENE PERMIT	13,750	0	13,750	0	13,750
001020	BIOHAZARD WASTE PERMIT	0	0	0	0	0
001020	SWIMMING POOLS	52,000	0	52,000	0	52,000
001020	PRIVATE WATER CONSTR PERMIT	0	0	0	0	0
001020	PUBLIC WATER ANNUAL OPER PERMIT	18,000	0	18,000	0	18,000
001020	PUBLIC WATER CONSTR PERMIT	0	0	0	0	0
001020	NON-SDWA SYSTEM PERMIT	0	0	0	0	0
001020	SAFE DRINKING WATER	0	0	0	0	0
001021	TANNING FACILITIES	4,500	0	4,500	0	4,500
001021	BODY PIERCING	0	0	0	0	0
001092	NON SDWA LAB SAMPLE	0	0	0	0	0
001092	OSDS VARIANCE FEE	600	0	600	0	600
001092	ENVIRONMENTAL HEALTH FEES	275,000	0	275,000	0	275,000
001092	OSDS REPAIR PERMIT	0	0	0	0	0
001092	OSDS PERMIT FEE	0	0	0	0	0
001092	I & M ZONED OPERATING PERMIT	0	0	0	0	0
001092	AEROBIC OPERATING PERMIT	0	0	0	0	0

001092	SEPTIC TANK SITE EVALUATION	0	0	0	0	0
001170	LAB FEE CHEMICAL ANALYSIS	0	0	0	0	0
001170	NONPOTABLE WATER ANALYSIS	0	0	0	0	0
001170	WATER ANALYSIS-POTABLE	0	0	0	0	0
010304	MQA INSPECTION FEE	0	0	0	0	0
010403	FEES-COPY OF PUBLIC DOC	0	0	0	0	0
FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL		373,625	0	373,625	0	373,625

5. OTHER CASH CONTRIBUTIONS - STATE

010304	STATIONARY POLLUTANT STORAGE TANKS	115,443	0	115,443	0	115,443
090001	DRAW DOWN FROM PUBLIC HEALTH UNIT	174,282	0	174,282	0	174,282
OTHER CASH CONTRIBUTIONS TOTAL		289,725	0	289,725	0	289,725

Working Copy ATTACHMENT II.

**SAINT JOHNS COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2005 to September 30, 2006

	Fund □(cash)	Fund □(cash)	Fund □(cash)	□Contributions	Total
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6. MEDICAID - STATE/COUNTY

001080	CHD INCM:MEDICAID-NURSING	0	0	0	0	0
001080	CHD INCM:MEDICAID-STD	3,699	5,301	9,000	0	9,000
001080	MEDICAID AIDS	11,097	15,903	27,000	0	27,000
001080	MEDICAID HMO RATE	0	0	0	0	0
001080	CHD INCM:MEDICAID MATERNITY	230,340	330,099	560,439	0	560,439
001080	CHD INCM:MEDICAID COMP. CHILD	443,880	636,120	1,080,000	0	1,080,000
001080	CHD INCM:MEDICAID COMP. ADULT	0	0	0	0	0
001080	MEDICAID-LAB	0	0	0	0	0
001080	CHD INCM:MEDICAID-PHARMACY	0	0	0	0	0
001080	MEDICAID-TB	0	0	0	0	0
001080	MEDICAID-ADMINISTRATION VACCINE	17,015	24,385	41,400	0	41,400
001080	MEDICAID-CASE MANAGEMENT	33,291	47,709	81,000	0	81,000
001080	CHD INCM:MEDICAID-OTHER	0	0	0	0	0
001080	CHD INCM:MEDICAID-CHILD HEALTH CHECKUP	103,067	147,705	250,772	0	250,772
001080	CHD INCM:MEDICAID-DENTAL	244,134	349,866	594,000	0	594,000
001083	CHD INCM:MEDICAID-FP	8,281	74,532	82,813	0	82,813
001208	MEDIPASS \$3.00 ADM. FEE	15,261	21,871	37,132	0	37,132
MEDICAID TOTAL		1,110,067	1,653,489	2,763,556	0	2,763,556

7. ALLOCABLE REVENUE - STATE

018000	REFUNDS, SALARY	0	0	0	0	0
018000	REFUNDS, OTHER PERSONAL SERVICES	0	0	0	0	0
018000	REFUNDS, EXPENSES	0	0	0	0	0
018000	REFUNDS, OPERATING CAPITAL OUTLAY	0	0	0	0	0
018000	REFUNDS, SPECIAL CATEGORY	0	0	0	0	0
018000	REFUNDS, OTHER	0	0	0	0	0
018000	DMS REFUNDS BY JOURNAL TRANSFER-65900	0	0	0	0	0
018000	REFUNDS, CERTIFIED FORWARD	0	0	0	0	0
037000	PRIOR YEAR WARRANT	0	0	0	0	0
038000	12 MONTH OLD WARRANT	0	0	0	0	0

ALLOCABLE REVENUE TOTAL	0	0	0	0	0
8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE					
STATE PHARMACY SERVICES	0	0	0	218,024	218,024
STATE LABORATORY SERVICES	0	0	0	158,853	158,853
STATE TB SERVICES	0	0	0	0	0
STATE IMMUNIZATION SERVICES	0	0	0	182,081	182,081
STATE STD SERVICES	0	0	0	0	0
STATE CONSTRUCTION/RENOVATION	0	0	0	0	0
WIC FOOD	0	0	0	1,328,503	1,328,503
OTHER-FAMILY PLANNING	0	0	0	57,968	57,968
OTHER-DENTAL	0	0	0	119,622	119,622
OTHER-INSULIN	0	0	0	30,647	30,647
OTHER (SPECIFY)	0	0	0	0	0
OTHER STATE CONTRIBUTIONS TOTAL	0	0	0	2,095,698	2,095,698

9. DIRECT COUNTY CONTRIBUTIONS - COUNTY

Working Copy ATTACHMENT II.

**SAINT JOHNS COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2005 to September 30, 2006

	Fund □(cash)	Fund □(cash)	Fund □(cash)	□Contributions	Total
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9. DIRECT COUNTY CONTRIBUTIONS - COUNTY

008030	GRANTS-COUNTY TAX DIRECT	0	365,573	365,573	0	365,573
008034	GRANTS CNTY COMMSN-PRIMARY CARE CONTRACT	0	1,684,800	1,684,800	0	1,684,800
BOARD OF COUNTY COMMISSIONERS TOTAL		0	2,050,373	2,050,373	0	2,050,373

10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY

001060	VITAL STATISTICS FEES OTHER	0	0	0	0	0
001077	RABIES VACCINE	0	5,000	5,000	0	5,000
001077	CHILD CAR SEAT PROG	0	0	0	0	0
001077	PRIMARY CARE FEES	0	71,025	71,025	0	71,025
001077	COMMUNICABLE DISEASE FEES	0	57,800	57,800	0	57,800
001094	ENVIRONMENTAL HEALTH FEES	0	204,580	204,580	0	204,580
001094	ADULT ENTER. PERMIT FEES	0	0	0	0	0
001114	NEW BIRTH CERTIFICATES	0	21,000	21,000	0	21,000
001115	DEATH CERTIFICATES	0	55,000	55,000	0	55,000
001117	VITAL STATS-ADM. FEE 50 CENTS	0	1,200	1,200	0	1,200
FEES AUTHORIZED BY COUNTY TOTAL		0	415,605	415,605	0	415,605

11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY

001009	DEBIT MEMO-BAD CHECKS	0	0	0	0	0
001009	RECOVERY-BAD CHECKS	0	0	0	0	0
001009	RECOVERY OF COLLECTION OF AGENCY PLACEMENTS	0	0	0	0	0
001009	RETURNED CHECK FEE	0	0	0	0	0
001029	THIRD PARTY REIMBURSEMENT	0	45,788	45,788	0	45,788
001029	HEALTH MAINTENANCE ORGAN. (HMO)	0	0	0	0	0
001077	RYAN WHITE LOCAL REVENUES	0	0	0	0	0
001077	RYAN WHITE TITLE II	0	0	0	0	0

001090	MEDICARE	0	50,000	50,000	0	50,000
005040	INTEREST EARNED	0	0	0	0	0
005041	INTEREST EARNED-STATE INVESTMENT ACCOUNT	0	54,000	54,000	0	54,000
007010	U.S. GRANTS DIRECT	0	0	0	0	0
010300	SALE OF GOODS AND SERVICES	0	86,958	86,958	0	86,958
010301	EXP WITNESS FEE CONSULTNT CHARGES	0	0	0	0	0
010403	FEES-COPIES OF DOCUMENTS	0	1,000	1,000	0	1,000
010405	SALE OF PHARMACEUTICALS	0	0	0	0	0
010409	SALE OF GOODS OUTSIDE STATE GOVERNMENT	0	0	0	0	0
010500	SALES OF SERVICES OUTSIDE STATE GOVERNMENT	0	0	0	0	0
011000	RAPID AIDS TESTING - JAIL INMATES 2003	0	0	0	0	0
011001	HEALTHY START COALITION CONTRIBUTIONS	0	0	0	0	0
011007	CASH DONATIONS PRIVATE	0	0	0	0	0
012020	FINES AND FORFEITURES	0	0	0	0	0
012021	RETURN CHECK CHARGE	0	50	50	0	50
028020	INSURANCE RECOVERIES-OTHER	0	0	0	0	0
090002	DRAW DOWN FROM PUBLIC HEALTH UNIT	0	0	0	0	0
011000	RAPID AIDS TESTING	0	0	0	0	0
011000	GRANT-DIRECT-IMMUNIZATIONS	0	2,000	2,000	0	2,000
011000	GRANT-DIRECT-SUSAN G KOMEN	0	49,904	49,904	0	49,904
011000	GRANT-DIRECT-HEALTHY START	0	262,040	262,040	0	262,040

Working Copy ATTACHMENT II.

**SAINT JOHNS COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2005 to September 30, 2006

	Fund ☐(cash)	Fund ☐(cash)	Fund ☐(cash)	☐Contributions	Total	
11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY						
011000	GRANT-DIRECT-RYAN WHITE TITLE I & II	0	269,366	269,366	0	269,366
011000	GRANT-DIRECT-BRAIDS	0	4,286	4,286	0	4,286
011000	GRANT-DIRECT-RYAN WHITE TITLE III	0	365,985	365,985	0	365,985
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT-SCHOOL BOARD	0	25,000	25,000	0	25,000
010408	COPY FEES INTRA/INTER AGENCY	0	1,600	1,600	0	1,600
OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL		0	1,217,977	1,217,977	0	1,217,977
12. ALLOCABLE REVENUE - COUNTY						
018000	REFUNDS, SALARY	0	0	0	0	0
018000	REFUNDS, OTHER PERSONAL SERVICES	0	0	0	0	0
018000	REFUNDS, EXPENSES	0	170	170	0	170
018000	REFUNDS, OPERATING CAPITAL OUTLAY	0	0	0	0	0
018000	REFUNDS, SPECIAL CATEGORY	0	0	0	0	0
018000	REFUNDS, OTHER	0	0	0	0	0
018000	DMS REFUNDS BY JOURNAL TRANSFER-65900	0	0	0	0	0
018000	REFUNDS, CERTIFIED FORWARD	0	0	0	0	0
037000	PRIOR YEAR WARRANT	0	0	0	0	0
038000	12 MONTH OLD WARRANT	0	0	0	0	0
COUNTY ALLOCABLE REVENUE TOTAL		0	170	170	0	170
13. BUILDINGS - COUNTY						

ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	656,625	656,625
MAINTENANCE	0	0	0	65,000	65,000
OTHER (SPECIFY)	0	0	0	0	0
OTHER (SPECIFY)	0	0	0	0	0
OTHER (SPECIFY)	0	0	0	0	0
OTHER (SPECIFY)	0	0	0	0	0
OTHER (SPECIFY)	0	0	0	0	0
BUILDINGS TOTAL	0	0	0	721,625	721,625
14. OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST FUND - COUNTY					
OTHER COUNTY CONTRIBUTION OF SOME UNKNOW O	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTIONS TOTAL	0	0	0	0	0
GRAND TOTAL CHD PROGRAM	4,762,062	5,337,614	10,099,676	2,817,323	12,916,999

Working Copying ATTACHMENT II.

SAINT JOHNS COUNTY HEALTH DEPARTMENT

Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service

October 1, 2005 to September 30, 2006

	FTE's (0.00)	Clients Units	Quarterly Expenditure Plan				Grand County	Grand State	Total	
			1st Services	2nd	3rd (Whole dollars only)	4th				
A. COMMUNICABLE DISEASE CONTROL:										
IMMUNIZATION (101)	7.05	8,000	15,000	177,686	117,251	26,478	119,669	227,665	213,419	441,084
STD (102)	5.18	750	4,500	76,197	87,004	75,300	88,798	104,747	222,552	327,299
A.I.D.S. (103)	16.67	350	13,000	241,759	276,049	238,914	281,739	714,578	323,883	1,038,461
TB CONTROL SERVICES (104)	1.36	400	1,100	18,304	20,900	18,088	21,330	15,580	63,042	78,622
COMM. DISEASE SURV. (106)	2.78	0	600	43,681	49,877	43,167	50,904	53,001	134,628	187,629
HEPATITIS PREVENTION (109)	0.01	400	1,000	154	175	152	179	290	370	660
PUBLIC HEALTH PREP AND RESP (116)	2.95	0	25	41,960	47,911	41,466	48,899	21,034	159,202	180,236
VITAL STATISTICS (180)	1.63	0	0	18,334	20,934	18,118	21,365	78,751	0	78,751
COMMUNICABLE DISEASE SUBTOTAL	37.63	9,900	35,225	618,075	620,101	461,683	632,883	1,215,646	1,117,096	2,332,742
B. PRIMARY CARE:										
CHRONIC DISEASE SERVICES (210)	3.37	8,300	800	36,509	41,688	36,080	42,548	156,825	0	156,825
TOBACCO PREVENTION (212)	0.00	0	0	0	0	0	0	0	0	0
HOME HEALTH (215)	0.00	0	0	0	0	0	0	0	0	0
W.I.C. (221)	10.45	4,100	24,000	120,690	137,808	119,269	140,648	152,909	365,506	518,415
FAMILY PLANNING (223)	8.49	2,250	14,000	120,663	137,778	119,243	140,617	305,379	212,922	518,301
IMPROVED PREGNANCY OUTCOME (225)	5.87	800	8,500	108,150	123,490	106,877	126,035	234,212	230,340	464,552
HEALTHY START PRENATAL (227)	5.05	550	9,000	62,785	71,691	62,046	73,169	201,878	67,813	269,691
COMPREHENSIVE CHILD HEALTH (229)	22.61	3,000	20,000	298,315	340,628	294,805	347,650	591,320	690,078	1,281,398
HEALTHY START INFANT (231)	3.49	350	6,000	40,005	45,679	39,534	46,620	69,210	102,628	171,838
SCHOOL HEALTH (234)	5.59	0	45,000	86,373	98,624	85,356	100,656	186,916	184,093	371,009
COMPREHENSIVE ADULT HEALTH (237)	3.85	0	0	380,026	433,928	375,553	442,872	1,514,336	118,043	1,632,379
DENTAL HEALTH (240)	12.27	1,900	16,000	208,927	238,560	206,468	243,478	402,861	494,572	897,433
PRIMARY CARE SUBTOTAL	81.04	21,250	143,300	1,462,443	1,669,874	1,445,231	1,704,293	3,815,846	2,465,995	6,281,841
C. ENVIRONMENTAL HEALTH:										
Water and Onsite Sewage Programs										
COASTAL BEACH MONITORING (347)	0.22	416	430	7,320	8,358	7,234	8,531	1,588	29,855	31,443
LIMITED USE PUBLIC WATER SYSTEMS (357)	0.32	140	500	4,890	5,584	4,833	5,698	9,005	12,000	21,005
PUBLIC WATER SYSTEM (358)	0.98	50	915	14,344	16,378	14,175	16,716	36,642	24,971	61,613
PRIVATE WATER SYSTEM (359)	1.12	90	375	14,775	16,871	14,602	17,220	17,950	45,518	63,468
INDIVIDUAL SEWAGE DISP. (361)	9.20	1,625	7,400	118,930	135,798	117,530	138,597	184,362	326,493	510,855
Group Total	###	2,321	9,620	160,259	182,989	158,374	186,762	249,547	438,837	688,384
Facility Programs										
FOOD HYGIENE (348)	0.76	112	760	10,915	12,463	10,787	12,720	9,597	37,288	46,885
BODY ART (349)	0.01	0	0	100	114	99	115	121	307	428
GROUP CARE FACILITY (351)	0.41	170	300	6,220	7,102	6,147	7,249	14,525	12,193	26,718
MIGRANT LABOR CAMP (352)	0.15	7	110	2,270	2,591	2,243	2,645	1,715	8,034	9,749
HOUSING.PUBLIC BLDG SAFETY.SANITATION	0.00	0	0	0	0	0	0	0	0	0
MOBILE HOME AND PARKS SERVICES (354)	0.17	75	240	2,241	2,559	2,215	2,611	294	9,332	9,626
SWIMMING POOLS/BATHING (360)	0.91	410	1,950	3,680	5,620	3,519	45,943	2,563	56,199	58,762
BIOMEDICAL WASTE SERVICES (364)	0.00	0	0	0	0	0	0	0	0	0
TANNING FACILITY SERVICES (369)	0.03	20	50	418	477	413	488	32	1,764	1,796

SAINT JOHNS COUNTY HEALTH DEPARTMENT

Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service

October 1, 2005 to September 30, 2006

	FTE's (0.00)	Clients Units	1st Services	Quarterly Expenditure Plan				County	Grand State	Total
				2nd	3rd (Whole dollars only)	4th				
C. ENVIRONMENTAL HEALTH:										
Group Total	2.44	794	3,410	25,844	30,926	25,423	71,771	28,847	125,117	153,964
Groundwater Contamination										
STORAGE TANK COMPLIANCE (355)	2.15	454	2,500	35,863	40,949	35,440	41,794	12,187	141,859	154,046
SUPER ACT SERVICE (356)	0.24	25	250	3,087	3,525	3,051	3,597	3,785	9,475	13,260
Group Total	2.39	479	2,750	38,950	44,474	38,491	45,391	15,972	151,334	167,306
Community Hygiene										
OCCUPATIONAL HEALTH (344)	0.00	0	0	0	0	0	0	0	0	0
CONSUMER PRODUCT SAFETY (345)	0.00	0	0	0	0	0	0	0	0	0
INJURY PREVENTION (346)	0.00	0	0	0	0	0	0	0	0	0
LEAD MONITORING SERVICES (350)	0.01	2	45	206	235	201	241	276	607	883
PUBLIC SEWAGE (362)	0.00	0	0	31	35	30	36	38	94	132
SOLID WASTE DISPOSAL (363)	0.00	0	0	0	0	0	0	0	0	0
SANITARY NUISANCE (365)	0.25	100	280	3,627	4,141	3,584	4,227	4,423	11,156	15,579
RABIES SURVEILLANCE/CONTROL SERVICES	0.20	10	40	5,186	5,921	5,125	6,043	6,201	16,074	22,275
ARBOVIRUS SURVEILLANCE (367)	0.03	0	0	493	563	487	575	597	1,521	2,118
RODENT/ARTHROPOD CONTROL (368)	0.00	0	0	59	68	59	68	72	182	254
WATER POLLUTION (370)	0.00	0	0	0	0	0	0	0	0	0
AIR POLLUTION (371)	0.00	0	0	67	77	66	79	82	207	289
RADIOLOGICAL HEALTH (372)	0.00	0	0	0	0	0	0	0	0	0
TOXIC SUBSTANCES (373)	0.00	0	0	55	63	54	64	67	169	236
Group Total	0.49	112	365	9,724	11,103	9,606	11,333	11,756	30,010	41,766
ENVIRONMENTAL HEALTH SUBTOTAL	17.16	3,706	16,145	234,777	269,492	231,894	315,257	306,122	745,298	1,051,420
D. SPECIAL CONTRACTS:										
SPECIAL CONTRACTS (599)	0.00	0	0	100,961	115,281	99,773	117,658	0	433,673	433,673
SPECIAL CONTRACTS SUBTOTAL	0.00	0	0	100,961	115,281	99,773	117,658	0	433,673	433,673
TOTAL CONTRACT	135.83	34,856	194,670	2,416,256	2,674,748	2,238,581	2,770,091	5,337,614	4,762,062	#####

ATTACHMENT III

ST. JOHNS COUNTY HEALTH DEPARTMENT

CIVIL RIGHTS CERTIFICATE

The applicant provides this assurance in consideration of and for the purpose of obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance to programs or activities receiving or benefiting from federal financial assistance. The provider agrees to complete the Civil Rights Compliance Questionnaire, DH Forms 946 A and B (or the subsequent replacement if adopted during the contract period), if so requested by the department.

The applicant assures that it will comply with:

1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C., 2000 Et seq., which prohibits discrimination on the basis of race, color or national origin in programs and activities receiving or benefiting from federal financial assistance.
2. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of handicap in programs and activities receiving or benefiting from federal financial assistance.
3. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits discrimination on the basis of sex in education programs and activities receiving or benefiting from federal financial assistance.
4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
5. The Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.
6. All regulations, guidelines and standards lawfully adopted under the above statutes. The applicant agrees that compliance with this assurance constitutes a condition of continued receipt of or benefit from federal financial assistance, and that it is binding upon the applicant, its successors, transferees, and assignees for the period during which such assistance is provided. The applicant further assures that all contracts, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the applicant understands that the grantor may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

ATTACHMENT IV

FACILITIES UTILIZED BY THE ST JOHNS COUNTY HEALTH DEPARTMENT

<u>Facility Description</u>	<u>Location</u>	<u>Owned By</u>
St. Johns County Health & Human Services Center 42,500 sq.ft.	1955 U.S. 1 South St. Augustine, FL	St. Johns County
St. Johns County Administration Building	Lewis Speedway St. Augustine, FL	St. Johns County
Hastings Elementary School 1 portable	400 East Harris St. Hastings, FL	SJC School Board

ATTACHMENT V
ST JOHNS COUNTY HEALTH DEPARTMENT
SPECIAL PROJECTS SAVINGS PLAN

IDENTIFY THE AMOUNT OF CASH THAT IS ANTICIPATED TO BE SET ASIDE ANNUALLY FOR THE PROJECT.

<u>CONTRACT YEAR</u>	<u>STATE</u>	<u>COUNTY</u>	<u>TOTAL</u>
2003-2004	\$ _____	\$ _____	\$ _____ -
2004-2005	\$ _____	\$ _____	\$ _____ -
2005-2006	\$ 368,517	\$ _____	\$ 368,517
2006-2007	\$ _____	\$ _____	\$ _____ -
2007-2008	\$ _____	\$ _____	\$ _____ -
PROJECT TOTAL	\$ 368,517	\$ -	\$ 368,517

SPECIAL PROJECT CONSTRUCTION/RENOVATION PLAN

PROJECT NAME: Main Clinic Renovations

LOCATION/ ADDRESS: 1955 South US 1, St. Augustine

PROJECT TYPE: NEW BUILDING ROOFING
 RENOVATION PLANNING STUDY
 NEW ADDITION OTHER

SQUARE FOOTAGE: 5796

PROJECT SUMMARY: *Describe scope of work in reasonable detail.*

Renovate administrative area to enhance security and create additional office space. Renovate break room to create meeting space capable of seating all SJCHD staff. Renovate existing exam rooms to create a negative airflow room.

ESTIMATED PROJECT INFORMATION:

START DATE (*initial expenditure of funds*): 11/1/2005

COMPLETION DATE: 3/31/2006

DESIGN FEES: \$ _____

CONSTRUCTION COSTS: \$ 358,517

FURNITURE/EQUIPMENT \$ 10,000

TOTAL PROJECT COST: \$ 368,517

COST PER SQ FOOT: \$ 61.85593513

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects and mobile health vans.

ATTACHMENT VI

Primary Care

“Primary Care” as conceptualized for the county health departments and for the use of categorical Primary Care funds (revenue object code 015011) is defined as:

“Health care services for the prevention or treatment of acute or chronic medical conditions or minor injuries of individuals which is provided in a clinic setting and may include family planning and maternity care.”

Indicate below the county health department programs that will be supported at least in part with categorical Primary Care funds this contract year:

- Comprehensive Child Health (229/29)
- Comprehensive Adult Health (237/37)
- Family Planning (223/23)
- Maternal Health/IPO (225/25)
- Laboratory (242/42)
- Pharmacy (241/93)
- Other Medical Treatment Program (please identify) _____

Describe the target population to be served with categorical Primary Care funds.

Does the health department intend to contract with other providers for the delivery of primary health care services using categorical (015011) Primary Care funds? If so, please identify the provider(s), describe the services to be delivered, and list the anticipated contractual amount by provider. In addition, contract providers are required to provide data on patients served and the services provided so that the patients may be registered and the service data entered into HCMS.