Resolution No	
MCAH State	Grant FY18/19

BOARD OF DIRECTORS, LAKE COUNTY SANITATION DISTRICT COUNTY OF LAKE, STATE OF CALIFORNIA

RESOLUTION NO __

RESOLUTION APPROVING A REQUEST FROM COUNTY OF LAKE HEALTH SERVICES DEPARTMENT TO SUBMIT A RENEWAL APPLICATION AND CERTIFICATION STATEMENT FOR THE MATERNAL, CHILD AND ADOLESCENT HEALTH (MCAH GRANT WITH THE STATE OF CALIFORNIA, DEPARTMENT OF PUBLIC HEALTH FOR FISCAL YEAR 2018 THROUGH 2019, IN THE AMOUNT OF \$269,937 AND AUTHORIZING THE BOARD CHAIR TO SIGN SAID CERTIFICATION

WHERE AS, a request for an application to renew the Maternal, Child and Adolescent Health (MCAH) grant for FY2018-2019 in the amount of \$269,937 has been received from the State Department of Public Health; and

the County of Lake Health Services Department will operate this MCAH program in accordance with the State of California, Department of Public Health, Maternal Child Health Branch Policies, in reaching the goals and priorities of the California Title V Plan; and

WHEREAS, the County of Lake Health Services Department will increase access and utilization of health and social services, improve preconception health by decreasing risk factors for adverse life course events among women of reproductive age, and reduce infant morbidity and mortality.

NOW THEREFORE, BE IT RESOLVED BY THE BOARD OF SUPERVISORS OF THE COUNTY OF LAKE, STATE OF CALIFORNIA, THAT IT FINDS, DETERMINES AND HEREBY DECLARES that the application for renewal of the MCAH program and FY18/19 Grant is hereby approved and that the Chair of the Board of Supervisors of the County of Lake is hereby authorized to sign said Certification Statement on behalf of-the County of Lake.

BE IT FURTHER RESOLVED, that the Board of Supervisors of the County of Lake hereby authorizes the Health Services Director to sign said MCAH application and Grant and any necessary amendments to this Grant on behalf of the County of Lake.

Resolution No		
MCAH State Grant FY18/19		

1	THIS RESOLUTION WAS PASSED A Supervisors of the County of Lake at a regular me	AND ADOPTED by the Board o
2	by the following vote:	
3		
4	AYES:	
5	NOES:	
6	ABSENT OR NOT VOTING:	
7		
8		
9		ATTEST:
10	COUNTY OF LAKE	CAROL J. HUCHINGSON
11		Clerk of the Board of Supervisors
12		
13	Ву:	By:
14	Chair, Board of Supervisors	Deputy
15		
16		
17		
18	APPROVED AS TO FORM: ANITA L. GRANT	
19	County Counsel	
20	110000	
21	By:	
22		
23		
24		
25		