



Legislation Text

File #: 20-485, Version: 1

Memorandum

**Date:** June 2, 2020

**To:** The Honorable Moke Simon, Chair, Lake County Board of Supervisors

**From:** Denise Pomeroy, Health Services Director

**Subject:** Adopt Resolution Approving County of Lake Health Services to Apply for Grant Funding in the Amount of \$176,856 through the County Medical Services Program Governing Board (CMSP) for Fiscal Year 19/20

**Executive Summary:**

The Health Services Department is requesting Board approval to apply for funding in the amount of \$176,856 in support of our COVID-19 emergency response effort.

This funding may be used for Personal Protection Equipment (PPE) supplies, supportive quarantine services, non-profit human services providers and administrative and overhead expenses (limited to 15%).

Should you have questions, or require further information, please contact me at 263-1090.

**If not budgeted, fill in the blanks below only:**

Estimated Cost: \_\_\_\_\_ Amount Budgeted: \_\_\_\_\_ Additional Requested: \_\_\_\_\_ Future Annual Cost: \_\_\_\_\_

**Consistency with Vision 2028 and/or Fiscal Crisis Management Plan** (check all that apply):

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> Well-being of Residents | <input checked="" type="checkbox"/> Public Safety    | <input type="checkbox"/> Infrastructure   | <input type="checkbox"/> Not applicable      |
| <input type="checkbox"/> Economic Development               | <input type="checkbox"/> Disaster Recovery           | <input type="checkbox"/> County Workforce | <input type="checkbox"/> Technology Upgrades |
| <input checked="" type="checkbox"/> Community Collaboration | <input type="checkbox"/> Business Process Efficiency | <input type="checkbox"/> Clear Lake       | <input type="checkbox"/> Revenue Generation  |
|   |  |   | <input type="checkbox"/> Cost Savings        |

**If request for exemption from competitive bid in accordance with County Code Chapter 2 Sec. 2-38, fill in blanks below:**

Which exemption is being requested?  
 How long has Agreement been in place?  
 When was purchase last rebid?  
 Reason for request to waive bid?

**Recommended Action:** Adopt Resolution Approving County of Lake Health Services to Apply for Grant Funding in the Amount of \$176,856 through the County Medical Services Program Governing Board (CMSP) for Fiscal Year 19/20

