

Plan and Budget Required Documents Checklist

MODIFIED FY 2016-2017

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Agency Information Sheet

County/City: NEVADA COUNTY

Fiscal Year: 2016-17

Official Agency

Name:	Nevada County Public Health	Address:	500 Crown Point Circle, Ste 110 Grass Valley, CA 95945
Health Officer	Ken Cutler, MD, MPH		500 Crown Point Circle, Ste 110 Grass Valley, CA 95945

CMS Director (if applicable)

Name:	Ken Cutler	Address:	500 Crown Point Circle, Ste 110 Grass Valley, CA 95945
Phone:	(530)265-1450		
Fax:	(530)271-0894	E-Mail:	Ken.Cutler@co.nevada.ca.us

CCS Administrator

Name:	Cindy Wilson	Address:	500 Crown Point Circle, Ste 110 Grass Valley, CA 95945
Phone:	(530)265-7269		
Fax:	(530)271-0894	E-Mail:	Cynthia.Wilson@co.nevada.ca.us

CHDP Director

Name:	Ken Cutler	Address:	500 Crown Point Circle, Ste 110 Grass Valley, CA 95945
Phone:	(530)265-1450		
Fax:	(530)271-0894	E-Mail:	Ken.Cutler@co.nevada.ca.us

CHDP Deputy Director

Name:	Cindy Wilson	Address:	500 Crown Point Circle, Ste 110 Grass Valley, CA 95945
Phone:	(530)265-7269		
Fax:	(530)271-0894	E-Mail:	Cynthia.Wilson@co.nevada.ca.us

Clerk of the Board of Supervisors or City Council

Name:	Julie Patterson Hunter	Address:	950 Maidu Avenue Nevada City, CA 95959
Phone:	(530)265-1480		
Fax:	(530)265-9836	E-Mail:	Julie.Patterson-Hunter@co.nevada.ca.us

Director of Social Services Agency

Name:	Mike Dent	Address:	950 Maidu Avenue Nevada City, CA 95959
Phone:	(530)265-1340		
Fax:	(530)265-9860	E-Mail:	Mike.Dent@co.nevada.ca.us

Chief Probation Officer

Name:	Michael Ertola	Address:	109 ½ North Pine Street Nevada City, CA 95959
Phone:	(530)265-1200		
Fax:	(530)265-6280	E-Mail:	Michael.Ertola@co.nevada.ca.us

Children's Medical Services Plan and Fiscal Guidelines

State of California - Health and Human Services Agency

Department of Health Care Services - Children's Medical Services

Certification Statement - Child Health and Disability Prevention (CHDP) Program

County/City: NEVADA COUNTY Fiscal Year: **2016-17**

I certify that the CHDP Program will comply with all applicable provisions of Health and Safety Code, Division 106, Part 2, Chapter 3, Article 6 (commencing with Section 124025), Welfare and Institutions Code, Division 9, Part 3, Chapters 7 and 8 (commencing with Section 14000 and 14200), Welfare and Institutions Code Section 16970, and any applicable rules or regulations promulgated by DHCS pursuant to that Article, those Chapters, and that section. I further certify that this CHDP Program will comply with the Children's Medical Services Plan and Fiscal Guidelines Manual, including but not limited to, Section 9 Federal Financial Participation. I further certify that this CHDP Program will comply with all federal laws and regulations governing and regulating recipients of funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further agree that this CHDP Program may be subject to all sanctions or other remedies applicable if this CHDP Program violates any of the above laws, regulations and policies with which it has certified it will comply.

Ken Cutler

9/23/16

Signature of CHDP Director
Ken Cutler, MD, MPH

Date Signed

Jill Blake

09/24/16

Signature of Director of Health Officer
Jill Blake, Public Health Director

Date Signed

Cynthia Wilson

9/23/16

Signature of CHDP Deputy Director
Cynthia Wilson, Director of Nursing

Date Signed

I certify that this plan has been approved by the local governing body.

Signature of Local Governing Body Chairperson

Date Signed

Dan Miller,
Chair of the Board of Supervisors

Children's Medical Services Plan and Fiscal Guidelines

State of California - Health and Human Services Agency

Department of Health Care Services - Children's Medical Services

Certification Statement - California Children's Services (CCS)

County/City: NEVADA COUNTY Fiscal Year: **2016-17**

I certify that the CCS Program will comply with all applicable provisions of Health and Safety Code, Division 106, Part 2, Chapter 3, Article 5, (commencing with Section 123800) and Chapters 7 and 8 of the Welfare and Institutions Code (commencing with Sections 14000-14200), and any applicable rules or regulations promulgated by DHCS pursuant to this article and these Chapters. I further certify that this CCS Program will comply with the Children's Medical Services Plan and Fiscal Guidelines Manual, including but not limited to, Section 9 Federal Financial Participation. I further certify that this CCS Program will comply with all federal laws and regulations governing and regulating recipients of funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.) and recipients of funds allotted to states for the Maternal and Child Health Services Block Grant pursuant to Title V of the Social Security Act (42 U.S.C. Section 701 et seq.). I further agree that this CCS Program may be subject to all sanctions or other remedies applicable if this CCS Program violates any of the above laws, regulations and policies with which it has certified it will comply.

<u>Cynthia D. Wilson</u> Signature of CCS Administrator Cynthia Wilson, Director of Nursing	<u>9/23/2016</u> Date Signed
<u>Jill Blake</u> Signature of Director or Health Officer Jill Blake, Public Health Director	<u>09/20/16</u> Date Signed
<u>Suzanne Doyle</u> Signature of Administrative Services Officer Suzanne Doyle, HHSA Administrative Services Officer	<u>9/26/16</u> Date Signed

I certify that this plan has been approved by the local governing body.

<u>Dan Miller</u> Signature of Local Governing Body Chairperson	<u>9/23/2016</u> Date Signed
Dan Miller, Chair of the Board of Supervisors	

Nevada County Public Health
Children's Medical Service

Agency Description
FY 2016-17

Brief Narrative

Nevada County is located in the rural Sierra Nevada Foothills and has a population of just less than 100,000. The three primary aggregated areas of population, Grass Valley, Nevada City, and the town of Truckee, comprise roughly 30% of the county population with the remaining 70% of the residents living in small towns and unincorporated areas.

The county has five geographical districts. Each district elects one representative to serve as a member of the Board of Supervisors, which is the legislative and executive body of county government.

Nevada County Health and Human Services Agency (HHSA) is supervised by Michael Heggarty, MFT. The HHSA is comprised of Public Health, Child Support Services, Social Services, and Behavioral Health Departments. Since December 2012, Ken Cutler, M.D., MPH, has held the position of Public Health Officer, and Jill Blake, MPA has been the Director of Public Health since November 2014. During this FY Cindy Wilson, PHN, Director of Public Health Nursing, has successfully reclassified the CMS Coordinator/Sr. PHN position to a Supervising PHN with the duties of supervising the CCS and CHDP Program and staff. This position is currently filled by Maryellen Beauchamp PHN II as Acting Supervising PHN.

Within the Public Health Department, the CMS program consists of: California Children's Services (CCS) which includes the Medical Therapy Unit; Child Health and Disability Prevention (CHDP); and the Health Care Program for Children in Foster Care (HCPCFC).

Nursing and support staff for this FY year include the following: Maryellen Beauchamp, PHN, as the Acting Supervising PHN and CCS Nurse Case Manager; with Irene Jimenez, PHN, assisting on a temporary basis; Maryellen Beauchamp PHN and Charlene Weiss-Wenzl in CHDP, focusing on case management follow-up, Sherry Armstrong PHN in HCPCFC Case Management services; Kathryn Kestler, PHN, also in HCPCFC; Debra Pierson, HT, Lisa Lehr HT, and Dawn Graves, HT, providing clerical and administrative support.

Staffing at the Medical Therapy Unit is as follows: Carne Barsotti, PT, Senior Therapist. Rebecca Giammona, PTA; and the part-time OT position is vacant. Nevada County contracts with Permanente Medical Group for Lawrence Manhart, MD, to provide physiatrist services for quarterly clinics.

Accomplishments for FY 2015-2016:

- Conducted 3586 CHDP Health Assessments and appropriate follow-up for low income children
- Case managed an average of approximately 337 active CCS clients per month
- Case managed 158 children placed in Foster Care
- Continued a contract with Permanente Medical Group for continuity of physiatrist services for MTU children
- Maintained a contract/MOU with Medical Managed Care through California Health and Wellness
- MTU provided OT and PT services to approximately 45 children
- MTU staff provided equipment and orthotic clinics on a quarterly basis, with multi-disciplinary providers participating and case-conferencing with families
- Hired Acting Supervising PHN/CMS Coordinator
- Hired new part time HT

Anticipated Changes for FY 2016-2017:

- Conduct extensive orientation for new part time HT
- Hire and conduct extensive orientation for new part time OT
- Conduct extensive orientation and training for Acting Supervising PHN
- Programmatic changes in CCS and CHDP as directed by California DHCS
- Develop contract/MOU with Medi-Cal Managed Care through Anthem Blue Cross
- Evaluate clinical practice and fiscal activity processes to enhance efficiencies and effectiveness throughout the CMS program.
- Significantly reduce the number of “9M” CCS only cases within the CCS Program.
- Increase the number of OTLICP qualified clients in the CCS Program.
- Partner with a new Orthoptist/Prosthetist for the MTU

Children's Medical Services Plan and Fiscal Guidelines

State of California - Health and Human Services Agency

Department of Health Care Services - Children's Medical Services

Incumbent List - California Children's Services

For FY 2016-17, complete the table below for all personnel listed in the CCS budgets. Use the same job titles for both the budget and the incumbent list. Total percent for an individual incumbent should **not be over 100 percent**.

Specify whether job duty statements or civil service classification statements have been revised or changed. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

County/City:

NEVADA COUNTY

Fiscal Year: 2016-17

Job Title	Incumbent Name	FTE % on CCS Admin Budget	Have Job Duties Changed? (Yes or No)	Has Civil Service Classification Changed? (Yes or No)
Director of Nursing	Cindy Wilson, MS, RN, PHN, IBCLC	10%	N	N
PHN Supervisor, Acting (CMS Coord.)	Maryellen Beauchamp	12.5%	Y	N
PHN II, Case Manager	Maryellen Beauchamp	72.5%	N	N
Public Health Nurse II, Temporary	Irene Jimenez	10%	N	N
Health Technician I	Lisa Lehr	39%	N	N
Health Technician II	Debra Pierson	95%	N	N
Health Technician II	Dawn Graves	50%	N	N
Senior OT/PT	Carme Barsotti	5%	N	N

Incumbent List - Child Health and Disability Prevention Program

For FY 2015-16, complete the table below for all personnel listed in the CHDP budgets. Use the same job titles for both the budget and the incumbent list. Total percent for an individual incumbent should **not be over 100 percent**.

Specify whether job duty statements or civil service classification statements have been revised or changed. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

County/City:

NEVADA COUNTY

Fiscal Year: 2016-17

Job Title	Incumbent Name	FTE % on CHDP No County/ City Match Budget	FTE % on CHDP County/City Match Budget	FTE % in Other Programs (Specify)	Have Job Duties Changed? (Yes or No)	Has Civil Service Classification Changed? (Yes or No)
Director of PHN's	Cindy Wilson	15%	0%	85% Various	N	N
PHN Supervisor, Acting	Maryellen Beauchamp	15%	0%	50% CCS	Y	N
PHN II	Various	15%	0%	85% Various	N	N
PHN II, Temp	Vacant	48%	0%	52% Various	N	N
Health Technician I	Lisa Lehr	11%	0%	25% CCS	N	N
Health Technician II	Debra Pierson	5%	0%	75% CCS	N	N
Senior Health Technician	Judith Caldwell	10%	0%	85% Various	N	N
Admin Assistant I	Carol Smith	5%	0%	90% Various	N	N

Children's Medical Services Plan and Fiscal Guidelines

State of California - Health and Human Services Agency

Department of Health Care Services - Children's Medical Services

Incumbent List - Health Care Program for Children in Foster Care

For FY 2015-16, complete the table below for all personnel listed in the HCPCFC and CHDP Foster Care Administrative (County/City) budgets. Use the same job titles for both the budget and the incumbent list. Total percent for an individual incumbent should not be over 100 percent.

Specify whether job duty statements or civil service classification statements have been revised or changed. Only submit job duty statements and civil service classification statements that are new or have been revised. This includes (1) changes in job duties or activities, (2) changes in percentage of time spent for each activity, and (3) changes in percentage of time spent for enhanced and non-enhanced job duties or activities.

County/City:

NEVADA COUNTY

Fiscal Year: 2016-17

Job Title	Incumbent Name	FTE % on HCPCFC Budget	FTE % on FC Admin County/City Match Budget	FTE % in Other Programs (Specify)	Have Job Duties Changed? (Yes or No)	Has Civil Service Classification Changed? (Yes or No)
Public Health Nurse II	Kathryn Kestler	38.44%	61.56%	0% Other	N	N
Senior PHN	Donna Fry	0%	10%	90% Various	Y	N
Public Health Nurse II	Sherry Armstrong	0%	60%	40% Lead	N	N



Senior Public Health Nurse Bargaining

Unit: Professional--Exempt

Class Code:
G295

.10 FTE HCPCFC, Senior PHN, CMS Program

COUNTY OF NEVADA
Revision Date: Jul 15, 2015

SALARY RANGE

\$2,757.60 - \$3,366.40 Biweekly

\$5,974.80 - \$7,293.87 Monthly

\$71,697.60 - \$87,526.40 Annually

DEFINITION AND CLASS CHARACTERISTICS:

Under direction, plans, assigns and directs the work of nursing and/or service delivery staff in an assigned area and/or is responsible for coordination and implementation of a specialized program(s); performs related work as required.

This is the advanced journey level classification in the Public Health Nurse series. Incumbents in this class function with minimal supervision in providing lead direction and training to professional, technical and support staff, and providing public health nursing and case management services for an assigned client caseload(s) or program (s). Incumbents typically have primary responsibility for the development, implementation, administration, and/or service delivery coordination of a specialized program(s).

Incumbents may have lead responsibility over the more complex client caseloads or over several programs. This class is distinguished from the Public Health Nurse II class by its lead worker and program coordination responsibilities. It is distinguished from the Director of Public Health Nursing, which is a management classification with broader responsibility and authority for all public health nursing programs.

EXAMPLES OF DUTIES:

Essential:

- Organizes, coordinates, schedules, assigns, directs and reviews the day-to-day work of public health staff; provides on-site consultation to program staff; assures quality of care and coordinates nursing services with other providers and programs; ensures smooth and efficient operation of program services
- Plans, organizes and coordinates the day-to-day operations of a specialized program; monitors program to ensure compliance with contract provisions, funding source regulations, and relevant laws, codes and regulations; performs or coordinates service delivery to target population
- Represents the program to community-based organizations and other service providers, other County departments, State or other funding sources, and community and business organizations; participates in a variety of internal and

external meetings, committees and coalitions to coordinate program activities and operations; serves as primary liaison and resource, and provides training and technical assistance

- Serves as key participant in program design, development and evaluation; drafts program budgets, contracts, grant applications, funding proposals, periodic narrative and statistical reports, and other required program documentation
- Provides public health nursing and case management services to individuals and families in homes, community facilities, and specialized clinics, independently or as part of a multidisciplinary team, by assessing health care requirements, counseling, teaching, and providing or coordinating follow-up health and social services; may provide direct client care; develops and monitors care plans; acts as client advocate
- Directs or takes lead role in epidemiological investigations and communicable disease control activities, including contact tracing and surveillance
- Develops and implements community health education programs; makes presentations
- Participates in community outreach and health promotion events such as health fairs, blood pressure and flu clinics, radio shows, etc.; provides preventive health care services and promotes public awareness of program; drafts and/or distributes newspaper articles, educational pamphlets and related information
- Collaborates and coordinates nursing activities with other community social and health agencies and programs
- Monitors the implementation of nursing standards and practices for quality assurance and legal compliance; evaluates the effectiveness of current nursing policies and practices and participates in their formulation and revision; develops and revises nursing procedure manuals and guides; disseminates information and advises staff on the interpretation and application of laws, regulations, policies and procedures

Important:

- Maintains, prepares, and orders supplies, equipment, and medications
- Compiles and maintains records, reports, charts and statistics

KNOWLEDGE AND SKILLS REQUIRED:

Knowledge of:

- Principles and practices of work supervision, including work planning, assignment, and review
- Basic principles of program coordination, including program planning, development and implementation, grant writing, and program documentation
- Principles, practices, methods and procedures of public health nursing, health promotion, and disease prevention and control
- General nursing principles, practices and techniques, including assessment, client care planning and delivery, patient education, and evaluation of outcomes
- Laws, rules and regulations governing the practice of public health nursing
- Medical terminology and equipment

- Nursing routines and protocols specific to area of assignment
- Principles and techniques of drug administration, and uses and effects of medications
- Principles, practices and techniques of safety and infection control
- Community medical and social agencies and resources
- Environmental, sociological and psychological problems affecting public health nursing

Skill in:

- Planning, developing, implementing, and coordinating public health nursing programs in the assigned area of specialty
- Assigning, directing and reviewing the work of others in a lead capacity
- Representing the program to individuals, groups, and governing bodies, and making effective verbal and written presentations
- Assessing community, individual and family health needs and problems
- Developing and implementing client care plans and/or referrals
- Administering medications, performing skilled nursing treatments and procedures, and adapting nursing skills to various environments and situations
- Applying teaching principles and providing education and counseling
- Exercising sound independent judgment within scope of authority and practice
- Preparing and maintaining organized, detailed and accurate medical records
- Collaborating with other members of the health care team on an ongoing basis
- Establishing and maintaining effective working relationships and demonstrating sensitivity with individuals from various cultural, ethnic, physical, behavioral, socioeconomic and environmental settings

EDUCATION AND EXPERIENCE REQUIRED:

Bachelor's degree from an accredited college or university in nursing or related degree. Three years of nursing experience comparable to Nevada County's Public Health Nurse II, one of which must have included supervision.

LICENSES AND CERTIFICATES:

Possession of a valid license as a Registered Nurse issued by the California Board of Registered Nursing and a valid certificate as a Public Health Nurse issued by the California State Department of Public Health.

Possession of a valid California driver's license within 30 days of hire.

PHYSICAL DEMANDS AND WORKING CONDITIONS:

Mobility and manual dexterity to work in both office and clinical settings, and to travel to various sites; strength to lift, carry and position supplies and equipment; touch and dexterity to conduct physical health assessments; vision to read handwritten and

printed materials, and examine and observe clients; hearing and speech to converse in person and by telephone.

Working in exposure to communicable disease and/or blood-borne pathogens.

Some positions may require work outside normal daytime business hours.

Some accommodations may be made for some physical demands for otherwise qualified individuals who require and request such accommodations.

OTHER REQUIREMENTS:

This class description lists the major duties and requirements of the job and is not all-inclusive. Not all duties are necessarily performed by each incumbent. Incumbents may be expected to perform job-related duties other than those contained in this document and may be required to have specific job-related knowledge and skills.



Public Health Nurse Supervisor

Bargaining Unit: Management Employees'
Association

Class Code:
C293

.90 FTE PHN Supervisor, CMS Program

COUNTY OF NEVADA
Revision Date: Apr 29, 2016

SALARY RANGE

\$3,087.20 - \$3,768.80 Biweekly

\$6,688.93 - \$8,165.73 Monthly

\$80,267.20 - \$97,988.80 Annually

DEFINITION AND CLASS CHARACTERISTICS:

Under direction, plans, supervises, reviews and evaluates the work of assigned professional and other support staff; performs complex public health nursing duties and/or has responsibility for a specialized health care program.

This is a managerial level position in public health, responsible for major specialized public health program areas, supervising and training of public health nursing staff, and advising on complex client cases. This class is distinguished from the Director of Public Health Nursing in that the latter has overall responsibility for public health nursing services in the entire department.

EXAMPLES OF DUTIES:

Essential:

- Plans, organizes, supervises and reviews the work of assigned professional and support staff.
- Provides leadership and quality review for specialized health programs, such as California Children's Services, Children's Health and Disability Program, and Health Care Program for Children in Foster Care; monitors health assessment completeness and validates medical programs found; monitors frequency and nature of services provided.
- Conducts fiscal planning and budget or grant preparation including strategic planning for budget or grant implementation.
- Provides technical consultation and guidance to staff members on difficult client cases; and/or evaluates the health needs of individuals and special population groups from a wide variety of cultural and economic backgrounds and recent immigrant populations and those choosing alternate lifestyles; and/or identifies the symptoms of physical, mental or emotional problems and refers individuals and families to appropriate financial, medical or other support services; performs follow-

up on such referrals.

- Coordinates services provided by private, public and community voluntary health and social service agencies; serves as liaison to community groups, assisting them in identifying health needs, and providing public health education.
- May serve as primary staff in communicable disease clinics or assists in other clinics; may give immunizations and conduct immunization clinics.
- Monitors and evaluates programs, projects and special services; prepares a variety of periodic and special reports for appropriate management review.
- Represents the County and the department in meetings with community councils and groups, other agencies and the public.

KNOWLEDGE AND SKILLS REQUIRED:

Knowledge of:

- Leadership and coaching for optimal performance
- Program planning, development and implementation, grant writing, and program documentation
- Principles, practices, methods and procedures of public health nursing, health promotion, and disease prevention and control
- Advanced public health nursing principles, practices and techniques, including assessment, client care planning and delivery, patient education, and evaluation of outcomes
- Laws, rules and regulations governing the practice of public health nursing in California
- Medical terminology and equipment
- Nursing routines and protocols specific to area of assignment
- Principles and techniques of drug administration, and uses and effects of medications
- Principles, practices and techniques of safety and infection control
- Community medical and social agencies and resources
- Environmental, sociological and psychological problems affecting public health nursing

Skill in:

- Planning, developing, implementing, and coordinating public health nursing programs in the assigned area of specialty
- Assigning, directing and reviewing the work of others in a supervisory capacity
- Managing a complex caseload and establishing priorities for case management, treatment and referrals.
- Applying the principles of epidemiology to a wide range of social and health problems.
- Representing the program to individuals, groups, and governing bodies, and making effective verbal and written presentations
- Assessing community, individual and family health needs and problems
- Developing and implementing client care plans and/or referrals
- Administering medications, performing skilled nursing treatments and procedures,

- and adapting nursing skills to various environments and situations
- Applying teaching principles and providing education and counseling
 - Exercising sound independent judgment within scope of authority and practice
 - Preparing and maintaining organized, detailed and accurate medical records
 - Collaborating with other members of the health care team on an ongoing basis
 - Establishing and maintaining effective working relationships and demonstrating sensitivity with individuals from various cultural, ethnic, physical, behavioral, socioeconomic and environmental settings

EDUCATION AND EXPERIENCE REQUIRED:

Bachelor's degree from an accredited college or university in nursing or related degree. Three years of senior public health nursing experience, preferably in a community setting, one year of which included supervision.

LICENSES AND CERTIFICATES:

Possession of a valid license as a Registered Nurse and valid Public Health Nurse certificate issued by the California Board of Registered Nursing.

Possession of a valid California driver's license within 30 days of hire.

PHYSICAL DEMANDS AND WORKING CONDITIONS:

Mobility and manual dexterity to work in both office and clinical settings, and to travel to various sites; strength to lift, carry and position supplies and equipment; touch and dexterity to conduct physical health assessments; vision to read handwritten and printed materials, and examine and observe clients; hearing and speech to converse in person and by telephone.

Working in exposure to communicable disease and/or blood-borne pathogens.

Some positions may require work outside normal daytime business hours.

Some accommodations may be made for some physical demands for otherwise qualified individuals who require and request such accommodations.

OTHER REQUIREMENTS:

This class description lists the major duties and requirements of the job and is not all-inclusive. Not all duties are necessarily performed by each incumbent. Incumbents may be expected to perform job-related duties other than those contained in this document and may be required to have specific job-related knowledge and skills.

California Children's Services Caseload Summary Form

County: NEVADA

Fiscal Year: 2016-17

	CCS Caseload 0 to 21 Years	A		B		15-16 Actual Caseload	% of Grand Total
		13-14 Actual Caseload	% of Grand Total	14-15 Actual Caseload	% of Grand Total		
MEDI-CAL							
1	Average of Total Open (Active) Medi- Cal Children	211	69	225	69	259	73
2	Potential Case Medi-Cal	4	1	3	1	7	2
3	TOTAL MEDI-CAL (Row 1 + Row 2)	215	70	228	70	266	75
NON MEDI-CAL							
Healthy Families (OTLICP)							
4	Average of Total Open (Active) Healthy Families/TLI	64	21	61	19	56	15.5
5	Potential Cases Healthy Families/TLI	12	4	3	1	6	1.5
6	Total Healthy Families/TLI (Row 4 + Row 5)	76	25	64	20	62	17
Straight CCS							
7	Average of Total Open (Active) Straight CCS Children	14	4	31	9.5	24	7
8	Potential Cases Straight CCS Children	2	1	2	.5	3	1
9	Total Straight CCS (Row 7 + Row 8)	16	5	33	10	27	8
10	TOTAL NON MEDI- CAL (Row 6 + Row 9)	92	30	97	30	89	25
GRAND TOTAL							
11	(Row 3 + Row 10)	307	100.00	325	100.00	355	100.00

CHDP Program Referral Data
Fiscal Year 2016-17

County/City: NEVADA COUNTY	FY 13-14		FY 14-15		FY 15-16	
Basic Informing and CHDP Referrals						
1. Total number of CalWORKs/Medi-Cal cases informed and determined eligible by Department of Social Services	CalWORKs 838	Medi-Cal 3342	CalWORKs 583	Medi-Cal 3630	CalWORKs 522	Medi-Cal 3014
2. Total number of cases and recipients in "1" requesting CHDP services	Cases	Recipients	Cases	Recipients	Cases	Recipients
a. Number of CalWORKs cases/recipients	1	1	1	1	1	1
b. Number of Foster Care cases/recipients	0	0	0	0	0	0
c. Number of Medi-Cal only cases/recipients	0	30	3	5	1	1

3. Total number of EPSDT eligible recipients and unborn, referred by Department of Social Services' workers who requested the following:	31	5	3
a. Medical and/or dental services	9	2	2
b. Medical and/or dental services with scheduling and/or transportation	0	0	0
c. Information only (optional)	22	3	0
4. Number of persons who were contacted by telephone, home visit, face-to-face, office visit, or written response to outreach letter	31	5	3
Results of Assistance			
5. Number of recipients actually provided scheduling and/or transportation assistance by program staff	0	0	0
6. Number of recipients in "5" who actually received medical and/or dental services	0	0	0

Children's Medical Services Plan and Fiscal Guidelines

State of California - Health and Human Services Agency

Department of Health Care Services - Children's Medical Services

Memoranda of Understanding/Interagency Agreement List

List all current Memoranda of Understanding (MOU) and/or Interagency Agreements (IAA) in California Children's Services, Child Health and Disability Prevention Program, and Health Care Program for Children in Foster Care. Specify whether the MOU or IAA has changed. Submit only those MOU and IAA that are new, have been renewed, or have been revised. For audit purposes, counties and cities should maintain current MOU and IAA on file.

County/City: **NEVADA COUNTY**

Fiscal Year: **2016-17**

Title or Name of MOU/IAA	Is this a MOU or an IAA?	Effective Dates From/To	Date Last Reviewed by County/ City	Name of Person Responsible for this MOU/IAA?	Did this MOU/IAA Change? (Yes or No)
Nevada County IAA	IAA	7/1/15-6/30/17	6/15	Cynthia Wilson	No
CHDP/Behavioral Health	MOU	9/1/15-8/31/17	8/15	Cynthia Wilson	No
CHDP/WIC MOU	MOU	9/1/15-8/31/17	8/15	Cynthia Wilson	No
HCPCFC MOU	MOU	7/1/15-6/30/17	6/15	Cynthia Wilson	No
CHDP/Head Start	MOU	7/1/16-6/30/18	6/16	Cynthia Wilson	Yes
SELPA MOU	MOU	7/1/15-6/30/18	7/15	Cynthia Wilson	No

Children's Medical Services Plan and Fiscal Guidelines

County/City: NEVADA COUNTY

Fiscal Year: 2016-17

Title or Name of MOU/IAA	Is this a MOU or an IAA?	Effective Dates From/To	Date Last Reviewed by County/ City	Name of Person Responsible for this MOU/IAA?	Did this MOU/IAA Change? (Yes or No)
Blue Cross CCS/HF	MOU	2/99-present	2/99	Cynthia Wilson	No
Blue Shield CCS/HF	MOU	2/99-present	2/99	Cynthia Wilson	No
Access Dental CCS/HF	MOU	2/99-present	2/99	Cynthia Wilson	No
Delta Dental CCS/HF	MOU	2/99-present	2/99	Cynthia Wilson	No
EyeMed Vision Care CCS/HF	MOU	7/1/05 - present	10/05	Cynthia Wilson	No
SafeGuard Vision CCS/HF	MOU	7/1/05 - present	10/05	Cynthia Wilson	No
VSP Vision Svc CCS/HF	MOU	2/99-present	2/99	Cynthia Wilson	No
California Health & Wellness	MOU	11/1/13-present	11/13	Cynthia Wilson	No

**Interagency Agreement
Nevada County CHDP and
KidZKount, Placer Community Action Council, Inc.
Serving Nevada County Head Start and Early Head Start**

Fiscal Years 7/1/16 – 6/30/17 and 7/1/17 – 6/30/18

This Interagency Agreement (“Agreement”) is entered on July 1, 2016, between the Nevada County Department of Public Health through its CHDP Program (herein referred to as “Nevada County CHDP Program”) and KidZKount, Placer Community Action Council, Inc. (herein referred to as “KidZKount”).

The purpose of this Interagency Agreement is to define arrangements for cross-referral and to specify services the respective participating agencies will provide in order to facilitate access to health care services for eligible individuals.

Nevada County CHDP Program agrees to offer the following services to KidZKount, Placer Community Action Council, serving the Nevada County Head Start and Early Head Start program:

1. In-services for Head Start community workers (Family Advocates and Home Visitors) and Health Service Staff. The frequency of In-service training will be at the discretion of Nevada County CHDP Program, based on resource and staff availability.
 - a. Annual CHDP Program overview to include state and federal regulations, CHDP periodicity, use of CHDP provider and dental lists and responsibilities and coordination of CHDP and Head Start programs.
2. Strive to assure adequate availability of health care resources for the screening and follow-up of eligible individuals within the Head Start population:
 - a. Recruit and train CHDP providers in accordance with CHDP regulations.
 - b. Provide updated CHDP provider and dental lists.
 - c. Assist with scheduling and problem-solving transportation barriers with the Medi-Cal population in accordance with federal regulations.
 - d. Provide health education materials per supply availability.
 - e. Coordinate case-management services with Head Start Health Services staff to maximize service delivery to eligible recipients.
3. Attend the Health Services Advisory Board meetings at least 4 times per year for consultation and technical assistance on children’s health issues.

Head Start staff agrees to provide the following services to the CHDP Program staff:

1. Conduct Head Start in-services as needed.

2. Ensure care coordination services between CHDP staff and the Head Start Health Services staff.
3. Coordinate care services to include treatment follow-up, assistance with scheduling and transportation, and plan future follow-up.

Joint Responsibilities:

1. Both parties shall comply with all State and Federal laws and regulations concerning safeguarding information deemed confidential and/or protected under federal, state, or local law.
2. Both parties shall comply with all federal, state, and local laws, rules, regulations and ordinances, and shall not engage in discriminatory practices in the performance of this Agreement because of race, sex, sexual orientation, color, ancestry, religion or religious creed, national origin or ethnic group identification, political affiliation, mental disability, physical disability, medical condition, age, or marital status.
3. It is agreed that staff from both parties shall meet as needed to discuss the progress of the partnership and strategies for any necessary improvements.
4. Review this Agreement annually. Address changes to Agreement as needed, which shall only be amended or modified by mutual written, fully executed agreement of the Parties.

Duration of Agreement:

This Agreement will remain in effect from July 1, 2016, to June 30, 2018, unless otherwise terminated by either party by providing a minimum of thirty (30) days written notice to the other.

Insurance

Each party shall maintain at all times during the term of this Agreement insurance coverage or self-insurance in the amounts of not less than One Million Dollars (\$1,000,000) to cover all of its operations, including general liability, automobile liability, and workers' compensation.

Indemnity:

KidZKount agrees to indemnify, defend, and hold harmless Nevada County CHDP Program and the County of Nevada, including its officers, officials, employees, agents and volunteers thereof, from any and all liabilities, claims, demands, damages, losses, and expenses (including, without limitation, defense costs and attorney fees of litigation) which result from the negligent act, willful misconduct, or error or omission of KidZKount, except such loss or damage which was caused by the sole negligence or willful misconduct of Nevada County CHDP Program or its officers, officials, employees, agents and volunteers thereof.

Parties as Independent

In providing services herein, the Parties, and their agents and employees thereof, shall each act in an independent capacity as independent contractors and not as agents or employees of the other. Each Party agrees that neither its agents nor employees have any right, entitlement, or claim against the other Party for any type of employment benefits or workers' compensation or other programs afforded to the other Party, and each Party shall hold harmless and indemnify the other against any such claim by its agents or employees.

Notices

All notice by and between the Parties shall be given by first-class mail or personal service to the other at the addresses set forth below, and shall be deemed received the fifth (5th) day following the date of mailing or the earlier date of personal services, as the case may be:

Nevada County CHDP Program
Attn. Jill Blake, Director of Public Health
500 Crown Point Circle, Suite 110
Grass Valley, CA 95945

Placer Community Action Council, KidZKount
Attn. Denyse Cardoza, Executive Director
1166 High Street
Auburn, CA 95603

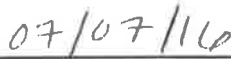
Authority

All individuals executing this Agreement represent and warrant that they are authorized to execute and deliver this Agreement on behalf of their respective Party.

We the undersigned on behalf of Nevada County Child Health and Disability Prevention Program and KidZKount, Placer Community Action Council, Inc. approve this document.



Jill Blake, MPA
Director of Public Health



Date

Denyse Cardoza
Executive Director
Placer Community Action Council

Date

Approved as to Form

A handwritten signature in black ink, consisting of a large, stylized 'S' followed by a horizontal line and a long, sweeping tail.

County Counsel

CHDP Administrative Budget Summary for FY 2016-2017
No County/City Match

County/City Name: **NEVADA**

Category/Line Item	1 Total Budget (2 + 3)	2 Total CHDP Budget	3 Total Medi-Cal Budget (4 + 5)	4 Enhanced State/Federal (25/75)	5 Nonenhanced State/Federal (50/50)
I. Total Personnel Expenses	\$136,683	\$0	\$136,683	\$99,856	\$36,827
II. Total Operating Expenses	\$3,718	\$0	\$3,718	\$0	\$3,718
III. Total Capital Expenses	\$0	\$0	\$0		\$0
IV. Total Indirect Expenses	\$34,171	\$0	\$34,171		\$34,171
V. Total Other Expenses	\$0	\$0	\$0		\$0
Budget Grand Total	\$174,572	\$0	\$174,572	\$99,856	\$74,716

Source of Funds	1 Total Funds	2 Total CHDP Budget	3 Total Medi-Cal Budget	4 Enhanced State/Federal	5 Nonenhanced State/Federal
State General Funds	\$0	\$0			
Medi-Cal Funds:					
State	\$62,322		\$62,322	\$24,964	\$37,358
Federal (Title XIX)	\$112,249		\$112,249	\$74,892	\$37,357
	\$174,572				

James Kraywinkel
 Prepared By (Signature)

9/23/16

(530) 470-2415

James.Kraywinkel@co.nevada.ca.us

Date Prepared Phone Number Email Address

Cynthia D. Wilson
 CHDP Director or Deputy
 Director (Signature)

9/23/16

(530) 265-7269

Cynthia.Wilson@co.nevada.ca.us

Date Phone Number Email Address

CHDP Administrative Budget Worksheet for FY 2016-2017
No County/City Match
State and State/Federal

County/City Name: NEVADA

Column	1A	1B	1	2A	2	3A	3	4A	4	5A	5
Category/Line Item	% or FTE	Annual Salary	Total Budget (1A x 1B or 2 + 3)	CHDP % or FTE	Total CHDP Budget	Total Medi-Cal %	Total Medi-Cal Budget (4 + 5)	% or FTE	Enhanced State/Federal (25/75)	% or FTE	Nonenhanced State/Federal (50/50)
Personnel Expenses											
Director/DPHN - Wilson, C.	15.00%	\$114,891	\$17,234	0.000%	\$0	100.00%	\$17,234	85.000%	\$14,649	15.000%	\$2,585
Acting Supervising PHN - Beauchamp	15.00%	\$88,179	\$13,227	0.000%	\$0	100.00%	\$13,227	85.000%	\$11,243	15.000%	\$1,984
Public Health Nurse - Various	15.00%	\$80,163	\$12,024	0%	\$0	100.00%	\$12,024	85.000%	\$10,221	15.000%	\$1,804
Public Health Nurse - Temp	48.00%	\$80,163	\$38,478	0%	\$0	100.00%	\$38,478	85.000%	\$32,707	15.000%	\$5,772
Senior Health Technician - Caldwell	10.00%	\$47,721	\$4,772	0%	\$0	100.00%	\$4,772	0.0%	\$0	100.00%	\$4,772
Health Technician - Pierson	5.00%	\$43,190	\$2,160	0%	\$0	100.00%	\$2,160	0.0%	\$0	100.00%	\$2,160
Health Technician - Lehr	11.00%	\$35,823	\$3,941	0%	\$0	100.00%	\$3,941	0.0%	\$0	100.00%	\$3,941
Admin Assistant - Smith	5.00%	\$47,291	\$2,365	0%	\$0	100.00%	\$2,365	0.0%	\$0	100.00%	\$2,365
9.											
10.											
Total Salaries and Wages											
Less Salary Savings											
Net Salaries and Wages			\$94,200		\$0		\$94,200		\$68,819		\$25,381
Staff Benefits (Specify %) 45.10%			\$42,483		\$0		\$42,483		\$31,037		\$11,446
I. Total Personnel Expenses			\$136,683		\$0		\$136,683		\$99,856		\$36,827
II. Operating Expenses											
Travel			\$390		\$0		\$390		\$0		\$390
2. Training - conference fees			\$0		\$0		\$0		\$0		\$0
Office - Supplies, Postage, Duplication			\$1,000		\$0		\$1,000				\$1,000
4. Equipment Maint. - Internet connection \$2,815			\$2,078		\$0		\$2,078				\$2,078
5. County Direct - Recruitment			\$250		\$0		\$250				\$250
II. Total Operating Expenses			\$3,718		\$0		\$3,718				\$3,718

CHDP Administrative Budget Worksheet for FY 2016-2017
No County/City Match
State and State/Federal

County/City Name: **NEVADA**

Column	1A	1B	1	2A	2	3A	3	4A	4	5A	5
Category/Line Item	% or FTE	Annual Salary	Total Budget (1A x 1B or 2 + 3)	CHDP % or FTE	Total CHDP Budget	Total Medi-Cal %	Total Medi-Cal Budget (4 + 5)	% or FTE	Enhanced State/Federal (25/75)	% or FTE	Nonenhanced State/Federal (50/50)
III. Capital Expenses											
1.											
2.											
3.											
4.											
5.											
IV. Total Capital Expenses											
IV. Indirect Expenses											
1. Internal (Specify %)	9.00%		\$12,301		\$0		\$12,301				\$12,301
2. External (Specify %)	16.00%		\$21,869		\$0		\$21,869				\$21,869
IV. Total Indirect Expenses			\$34,171		\$0		\$34,171				\$34,171
V. Other Expenses											
1.											
2.											
3.											
4.											
5.											
V. Total Other Expenses											
Budget Grand Total			\$174,572		\$0		\$174,572		\$99,856		\$74,716

James Krawinkel
 Prepared By (Signature)

7/23/16

(530) 470-2415
 Date Prepared Phone Number

James.Krawinkel@co.nevada.ca.us
 Email Address

Cynthia Wilson
 CHDP Director or Deputy Director (Signature)

9/23/16

(530) 265-7269
 Date Phone Number

Cynthia.Wilson@co.nevada.ca.us
 Email Address

NEVADA COUNTY
Children's Medical Services
FY 2016-2017 No Match CHDP Budget Justification Narrative

(1) Personnel Expense	Justification Narrative
Total Salaries	\$94,200
Total Benefits	\$42,483
Total Personnel Expense	\$ 136,683

Personnel Positions

1. Director of Public Health Nursing(Wilson)	This position is budgeted for 15%, when added to the 15% PHN Supervisor, is a reduction of 20% from FY 15/16
2. CMS Coordinator/Acting PHN Supervisor (Beauchamp)	This position is budgeted for 15%, when added to the 15% Director of Public Health Nursing, is a reduction of 20% from FY 15/16
3. PHN II (Kestler)	This position is budgeted for 15%, which when added to the PHN Temp, is an increase of .03% from FY 15/16
4. PHN II (Temp-TBD)	This position is budgeted for 48%, which when added to the PHN, is an increase of .03% from FY 15/16
5. Senior Health Tech (Caldwell)	This position is budgeted for 10%, which is a decrease of 15% from FY 15/16. This position was budgeted in the county match budget in FY 15/16.
6. Health Tech II (Pierson)	This position is budgeted for 5%, which is a decrease of 20% from FY 15/16.
7. Health Tech II (Lehr)	This position is budgeted at 11%, which is a decrease of 14% from FY 15/16. This position was budgeted in the county mathc budget in FY 15/16.
8. Administrative Assistant (Smith)	This position is budgeted at 5%, which is a reduction of 5% from FY 15/16.

(2) Operating Expenses

(2) Operating Expenses	Justification Narrative
Travel	\$390 Includes travel to statewide conferences, regional meetings, travel for approved training, daily program activities, personal vehicle use mileage and actual cost for lodging and meals for overnight travel. This, with the \$0 in training, is a reduction of \$610 from FY 15/16
Training	\$0 This, with \$390 training, is a reduction of \$610 from FY 15/16
Office Supplies	\$1,000 Includes office supplies, postage, printing, copying, etc. This, when last year's county match budget is included, is an overall reduction of \$856.
Equipment Maintenance	\$2,078 Includes county charges for computers and internet connections. This is a reduction of \$737 from FY 15/16.
County Direct - Recruitment	\$250 Anticipated recruitment costs for vacant temp PHN position.

Total Operating Expenses **\$3,718**

(3) Capital Expense \$ -

(4) Indirect Expense

(4) Indirect Expense	Justification Narrative
Internal - 9.00%	\$12,301 CHDP Program's share of costs based on 9.00% of Personnel costs (136,683 X 9.00%) and reflects anticipated program costs as shown in the 16/17 County budget.
External - 16.00%	\$21,869 CHDP program's share of costs is based on the County's Indirect Cost Allocation Plan (A-87) and HHS Agency Cost Allocation as budgeted for FY 16/17. (136,693 X 16.00%)

Total Indirect Expense **\$ 34,171**

(5) Other Expenses \$ -

Budget Grand Total **\$ 174,572**

Foster Care Administrative Budget Summary Fiscal Year 2016-2017

County/City Match

County/Title XIX Federal Funds

County/City Name: NEVADA

Column	1	2	3
Category/Line Item	Total Budget (2 + 3)	Enhanced County/City/Federal (25/75)	Nonenhanced County/City/Federal (50/50)
I. Total Personnel Expense	\$165,145	\$130,925	\$34,220
II. Total Operating Expense	\$2,500	\$0	\$2,500
III. Total Capital Expense			
IV. Total Indirect Expense	\$70,690		\$70,690
V. Total Other Expense			
Budget Grand Total	\$238,336	\$130,925	\$107,410

Column	1	2	3
Source of Funds	Total Funds	Enhanced County- City/Federal (25/75)	Nonenhanced County- City/Federal (50/50)
County-City Funds	\$86,436	\$32,731	\$53,705
Federal Funds (Title XIX)	\$151,899	\$98,194	\$53,705
Budget Grand Total	\$238,336		

Source County-City Funds: County Realignment

Prepared By (Signature) James Kraywinkel Date Prepared 9/23/16 Phone Number (530) 470-2415 Email Address James.Kraywinkel@co.nevada.ca.us

CHDP Director or Deputy Cynthia Wilson Date 9/23/16 Phone Number (530) 265-7269 Email Address Cynthia.Wilson@co.nevada.ca.us

Foster Care Administrative Budget Worksheet Fiscal Year 2016-2017
County-City/Federal Match
County/Title XIX Federal Funds
County/City Name: NEVADA

Column	1A	1B	1	2A	2	3A	3
Category/Line Item	% or FTE	Annual Salary	Total Budget (1A x 1B or 2 + 3)	% or FTE	Enhanced County-City/Federal (25/75)	% or FTE	Nonenhanced County-City/Federal (50/50)
I. Personnel Expenses							
1. Public Health Nurse - Kestler	61.56%	\$80,163	\$49,348	75%	\$37,011	25%	\$12,337
2. Public Health Nurse - Armstrong	60.00%	\$72,553	\$43,532	85%	\$37,002	15%	\$6,530
3. Senior PHN - Fry	10.00%	\$88,572	\$8,857	75%	\$6,643	25%	\$2,214
4.							
5.							
6.							
7.							
8.							
9.							
10.							
Total Salaries and Wages							
Less Salary Savings							
Net Salaries and Wages			\$101,737		\$80,656		\$21,081
Staff Benefits (Specify %) 62.33%			\$63,408		\$50,269		\$13,139
I. Total Personnel Expenses			\$165,145		\$130,925		\$34,220
II. Operating Expenses							
1. Travel			\$2,500		\$0		\$2,500
2. Training							
II. Total Operating Expenses			\$2,500		\$0		\$2,500
III. Capital Expenses							
1.							
2.							
III. Total Capital Expenses							
IV. Indirect Expenses							
1. Internal (Specify %) 42.805%			\$70,690				\$70,690
2. External							
IV. Total Indirect Expenses			\$70,690				\$70,690
V. Other Expenses							
1.							
2.							
V. Total Other Expenses							
Budget Grand Total			\$238,336		\$130,925		\$107,410

James Kraywinkel
 Prepared By (Signature)

9/23/16
 Date Prepared

(530) 470-2415 James.Kraywinkel@co.neva
 Phone Number Email Address

Cynthia Wilson
 CHDP Director or Deputy Director (Signature)

9/23/16
 Date

(530) 265-7269 Cynthia.Wilson@co.nevada
 Phone Number Email Address

**Nevada County
Children's Medical Services
FY 2016-2017 HCPCFC Administrative Budget Justification Narrative**

(1) Personnel Expenses

		<u>Justification Narrative</u>
Total Salaries	\$101,737	Salaries are based actual individual HCPCFC staff salaries from the FY 16/17 County HCPCFC budget.
Total Benefits	\$63,408	Benefits are based actual individual HCPCFC staff benefits from the FY 16/17 County HCPCFC budget.
Total Personnel Expenses	\$165,145	

Personnel Positions

PHN II (Kestler)	This position is budgeted for 61.56% under Match budget and 38.44% under the No County Match budget for a total of 100%, which is the same as FY 15/16.
PHN I (Armstrong)	This position is budgeted for 60%, which is 10% higher than the FY 15/16 budget
Senior PHN - Fry	This position is budgeted at 10%, which is the same as FY 15/16.

(2) Operating Expenses

		<u>Justification Narrative</u>
Travel	\$2,500	Travel expense is \$2,500, which is an increase of \$1,000 from FY 15/16.
Training	\$0	
Total Operating Expenses	\$2,500	

(3) Capital Expense

\$0

(4) Indirect Expense

		<u>Justification Narrative</u>
Internal 42.805%	\$70,690	Indirect is based upon total Match and No Match salaries X indirect rate of 32.75 as approved by CDPH for FY 16/17. $165,145 + 50,705 = 215,850 \times .3275 = \$70,690$
Total Indirect Expense	\$70,690	

(5) Other Expenses

\$0

Budget Grand Total \$238,336

HCPCFC Administrative Budget Summary Fiscal Year 2016-2017

County/City Name: **NEVADA**

Column	1	2	3
Category/Line Item	Total Budget (2 + 3)	Enhanced State/Federal (25/75)	Nonenhanced State/Federal (50/50)
I. Total Personnel Expenses	\$50,706	\$50,706	\$0
II. Total Operating Expenses	\$0	\$0	\$0
III. Total Capital Expenses			
IV. Total Indirect Expenses	\$0		\$0
V. Total Other Expenses			
Budget Grand Total	\$50,706	\$50,706	\$0

Column	1	2	3
Source of Funds	Total Funds	Enhanced State/Federal (25/75)	Nonenhanced State/Federal (50/50)
State Funds	\$12,676	\$12,676	\$0
Federal Funds (Title XIX)	\$38,029	\$38,029	\$0
Budget Grand Total	\$50,705		

Prepared By (Signature) *James Kraywinkel* Date Prepared *9/23/16* Phone Number (530) 470-2415 Email Address James.Kraywinkel@co.nevada.ca.us

CHDP Director or Deputy Director (Signature) *Cynthia Wilson* Date *9/23/16* Phone Number (530) 265-7269 Email Address Cynthia.Wilson@co.nevada.ca.us

HCPCFC Administrative Budget Worksheet Fiscal Year 2016-2017

County/City Name: **NEVADA**

Column	1A	1B	1	2A	2	3A	3
Category/Line Item	% or FTE	Annual Salary	Total Budget (1A x 1B or 2 + 3)	% or FTE	Enhanced State/Federal (25/75)	% or FTE	Nonenhanced State/Federal (50/50)
I. Personnel Expenses							
1. Public Health Nurse - Kestler	38.44%	\$80,163	\$30,815	100%	\$30,815	0%	\$0.00
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
Total Salaries and Wages							
Less Salary Savings							
Net Salaries and Wages			\$30,815		\$30,815		\$0
Staff Benefits (Specify %)	64.55%		\$19,891		\$19,891		\$0
I. Total Personnel Expenses			\$50,706		\$50,706		\$0
II. Operating Expenses							
1. Travel			\$0	0%	\$0	100%	\$0
2. Training							
II. Total Operating Expenses			\$0		\$0		\$0
III. Capital Expenses							
1.							
2.							
II. Total Capital Expenses							
IV. Indirect Expenses							
1. Internal (Specify %)	0.00%		\$0				\$0
2. External							
IV. Total Indirect Expenses			\$0				\$0
V. Other Expenses							
1.							
2.							
V. Total Other Expenses							
Budget Grand Total			\$50,706		\$50,706		\$0

Prepared By (Signature) *James Kraywinkel* Date prepared *9/23/16* Phone Number (530) 470-2415 Email Address *James.Kraywinkel@co.nevada.ca.us*

Director or Deputy Director (Signature) *Cynthia Wilson* Date *9/23/16* Phone Number (530) 265-7269 Email Address *Cynthia.Wilson@co.nevada.ca.us*

CCS Administrative Budget Summary

Fiscal Year: **2016-17**

County: **NEVADA**

CCS CASELOAD	Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS - Total Cases of Open (Active) Straight CCS Children	22.17	6.60%
OTLICP - Total Cases of Open (Active) OTLICP Children	90.33	26.91%
MEDI-CAL - Total Cases of Open (Active) Medi-Cal (non-OTLICP) Children	223.19	66.49%
TOTAL CCS CASELOAD	335.69	100%

Category/Line Item	Medi-Cal (non-OTLICP) (Column 4 = Columns 5 + 6)					
	Col 1 = Col 2+3+4 1	Straight CCS State/County (50/50) 2	OTLICP Optional Targeted Low Income Children's Program (OTLICP) State/County/Federal (6,016,088) 3	Medi-Cal State/Federal (25775) 4	Enhanced Medi-Cal State/Federal (25775) 5	Non-Enhanced Medi-Cal State/Federal (50/50) 6
I. Total Personnel Expense	310,066	20,478	83,435	206,155	72,484	133,671
II. Total Operating Expense	19,092	1,260	5,138	12,694	291	12,403
III. Total Capital Expense	0	0	0	0	0	0
IV. Total Indirect Expense	93,020	6,143	25,030	61,846	61,846	61,846
V. Total Other Expense	5,400	357	1,453	3,590	3,590	3,590
Budget Grand Total	427,578	28,238	115,056	284,285	72,775	211,510

Source of Funds	Medi-Cal (non-OTLICP) (Column 4 = Columns 5 + 6)					
	Col 1 = Col 2+3+4 1	Straight CCS State/County (50/50) 2	OTLICP Optional Targeted Low Income Children's Program (OTLICP) State/County/Federal (6,016,088) 3	Medi-Cal State/Federal (25775) 4	Enhanced Medi-Cal State/Federal (25775) 5	Non-Enhanced Medi-Cal State/Federal (50/50) 6
Total Budget	14,119	14,119	14,119	14,119	14,119	14,119
State	14,119	14,119	14,119	14,119	14,119	14,119
County	14,119	14,119	14,119	14,119	14,119	14,119
OTLICP	6,903	6,903	6,903	6,903	6,903	6,903
State	6,903	6,903	6,903	6,903	6,903	6,903
County	6,903	6,903	6,903	6,903	6,903	6,903
Federal (Title XXI)	101,250	101,250	101,250	101,250	101,250	101,250
Federal	123,949	123,949	123,949	123,949	123,949	123,949
State	160,336	160,336	160,336	160,336	160,336	160,336
Federal (Title XIX)	18,194	18,194	18,194	18,194	18,194	18,194
Federal	105,755	105,755	105,755	105,755	105,755	105,755

Prepared By (Signature) *James Kraywinkel*

Prepared By (Printed Name) **James Kraywinkel**
 Date **9/12/2016**
 Email Address **James.Kraywinkel@co.nevada.ca.us**

Prepared By (Signature) *Cynthia Wilson*
 Date **9/23/16**
 Email Address **Cynthia.Wilson@co.nevada.ca.us**

CCS Administrative Budget Worksheet

Fiscal Year: 2016-17

County: NEVADA

CCS CASELOAD	Actual Caseload	Percent of Total CCS Caseload
STRAIGHT CCS -		
Total Cases of Open (Active) Straight CCS Children	22,17	6.60%
OTLICP -		
Total Cases of Open (Active) OTLICP Children	90,33	26.91%
MEDI-CAL -		
Total Cases of Open (Active) Medi-Cal (OTLICP) Children	223,19	66.49%
TOTAL CCS CASELOAD	335.69	100%

Column	Straight CCS			Optional Targeted Low Income Children's Program (OTLICP)			Medi-Cal (Non-OTLICP)			
	4A Caseload %	4 Straight CCS County/State (50/50)	5A Caseload %	5 Optional Targeted Low Income Children's Program (OTLICP) State/County/Federal (6,0/5,0/88)	6A Caseload %	6 Medi-Cal State/Federal	7A Enhanced % FTE	7 Enhanced Medi-Cal State/Federal (25/75)	8A Non-Enhanced % FTE	8 Non-Enhanced Medi-Cal State/Federal (50/50)
I. Personnel Expense										
Program Administration										
1. Cynthia Wilson, CCS Director, PHN Director	6.60%	759	26.91%	3,092	66.49%	7,639	100.00%		100.00%	7,639
2. Maryellen Beauchamp, CCS Coordinator, Supervising	6.60%	801	26.91%	3,263	66.49%	8,062	100.00%		100.00%	8,062
3. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	100.00%		100.00%	0
4. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	100.00%		100.00%	0
5. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	100.00%		100.00%	0
Subtotal		1,560		6,355		15,701				15,701
Medical Case Management										
1. Maryellen Beauchamp, CCS Coordinator, Supervising	6.60%	4,644	26.91%	18,923	66.49%	46,756	82.00%	38,340	18.00%	8,416
2. Irene Jimenez, PHN	6.60%	549	26.91%	2,239	66.49%	5,532	76.54%	4,234	23.46%	1,298
3. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	0.00%	0	100.00%	0
4. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	0.00%	0	100.00%	0
5. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	0.00%	0	100.00%	0
6. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	0.00%	0	100.00%	0
7. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	0.00%	0	100.00%	0
8. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	0.00%	0	100.00%	0
Subtotal		5,193		21,162		52,288		42,574		9,714
Other Health Care Professionals										
1. Carme Barotoli, Senior OT/PT	6.60%	238	26.91%	969	66.49%	2,394	0.00%	0	100.00%	2,394
2. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	0.00%	0	100.00%	0
3. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	0.00%	0	100.00%	0
Subtotal		238		969		2,394		0		2,394
Ancillary Support										
1. Debra Pierson, Health Tech II	6.60%	2,710	26.91%	11,041	66.49%	27,280	100.00%		100.00%	27,280
2. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	100.00%		100.00%	0
3. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	100.00%		100.00%	0
4. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	100.00%		100.00%	0
5. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	100.00%		100.00%	0
Subtotal		2,710		11,041		27,280				27,280
Clerical and Claims Support										
1. Dawn Graves, Health Tech II	6.60%	1,426	26.91%	5,811	66.49%	14,359	0.00%	0	100.00%	14,358
2. Lisa Lehr, Health Tech I	6.60%	901	26.91%	3,669	66.49%	9,066	0.00%	0	100.00%	9,066
3. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	0.00%	0	100.00%	0
4. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	0.00%	0	100.00%	0
5. Employee Name, Position	6.60%	0	26.91%	0	66.49%	0	0.00%	0	100.00%	0

Column	Straight CCS			Optional Targeted Low Income Children's Program (OTLICP)			Medi-Cal (Non-OTLICP)						
	1	2	3	4A	4	5A	5	6A	6	7A	7	8A	8
Category/Line Item	% FTE	Annual Salary	Total Budget (1 x 2 or 4 + 5 + 6 + 7)	CaseLoad %	Straight CCS County/State (50/50)	CaseLoad %	Optional Targeted Low Income Children's Program (OTLICP) State/County/Federal (6, 0/6, 0/6, 0)	CaseLoad %	Medi-Cal State/Federal	Enhanced % FTE	Enhanced Medi-Cal State/Federal (25/75)	Non-Enhanced % FTE	Non-Enhanced Medi-Cal State/Federal (50/50)
Subtotal		78,153	35,231		2,327	9,480		23,424			0		23,424
Total Salaries and Wages			182,120	6.60%	12,028	49,006		66.49%	121,087	35.16%	42,574	64.84%	78,513
Staff Benefits (Specify %)	70.25%		127,946	6.60%	8,450	34,429		66.49%	85,068		29,910		55,158
I. Total Personnel Expense			310,066	6.60%	20,478	83,435		66.49%	206,155		72,484		133,671
II. Operating Expense			1,247	6.60%	82	338		66.49%	829	35.16%	291	64.84%	538
1. Travel			0	6.60%	0	0		66.49%	0	35.16%	0	64.84%	0
2. Training			5,895	6.60%	389	1,586		66.49%	3,919		0	100.00%	3,919
3. Insurance - Worker's Comp			6,000	6.60%	396	1,615		66.49%	3,989		0	100.00%	3,989
4. Computers, connections, and software			3,400	6.60%	225	915		66.49%	2,261		0	100.00%	2,261
5. General Office/Postage/Duplication			1,350	6.60%	89	383		66.49%	898		0	100.00%	898
6. Direct county charges			1,200	6.60%	79	323		66.49%	798		0	100.00%	798
7. Communication			19,092	6.60%	1,260	5,138		66.49%	12,694		291		12,403
II. Total Operating Expense			0	6.60%	0	0		66.49%	0		0		0
III. Capital Expense			0	6.60%	0	0		66.49%	0		0		0
1. Internal	9.00%		27,906	6.60%	1,843	7,509		66.49%	18,554		0		18,554
2. External	21.00%		65,114	6.60%	4,300	17,521		66.49%	43,292		0		43,292
IV. Total Indirect Expense			93,020		6,143	25,030			61,846				61,846
V. Other Expense			5,400	6.60%	357	1,453		66.49%	3,590		0		3,590
1. Maintenance & Transportation			0	6.60%	0	0		66.49%	0		0		0
2.			0	6.60%	0	0		66.49%	0		0		0
3.			0	6.60%	0	0		66.49%	0		0		0
4.			0	6.60%	0	0		66.49%	0		0		0
5.			0	6.60%	0	0		66.49%	0		0		0
V. Total Other Expense			5,400	6.60%	357	1,453		66.49%	3,590		0		3,590
Budget Grand Total			427,578		28,238	115,066			284,285		72,775		211,510

Prepared By (Signature) *James Kraywinkel* Prepared By (Printed Name) **James Kraywinkel** 9/12/2016 Date Prepared (530) 470-2415 Telephone Number with Area Code
 Prepared By (Signature) *Cynthia Wilson* Prepared By (Printed Name) **Cynthia Wilson** 9/23/16 Date Signed (530) 265-7269 Telephone Number with Area Code
 Revised 8/25/2016 CCS Administrator (Signature) CCS Administrator (Printed Name) E-Mail address E-Mail address

**Children's Medical Services
Nevada County
CCS Budget Justification Narrative
Fiscal Year 2016-2017**

I. PERSONNEL EXPENSES		
Total Salaries:	\$182,120	Salaries are based actual individual CCS staff salaries from the FY 16-17 County CCS budget.
Total Benefits:	\$127,946	Benefits are based actual individual CCS staff benefits from the FY 16-17 County CCS budget.
Total Personnel Expenses:	\$310,066	

Director of PHN's (Wilson)	This position is budgeted at 10%, which is a 5% increase as budgeted in FY 15/16.	
CMS Coordinator/PHN Supervisor (Beauchamp)	This position is budgeted for 12.5% which is a 37.5% decrease as budgeted in FY 15/16.	
PHN II/ Case Manager (Beauchamp)	This position is budgeted for 72.5% which is a 17.5% decrease from the FY 14/15 budget.	
PHN II/ Case Manager (Jimenez)	This position is budgeted for 10.0% which is a decrease of 2.5% from FY 15/16.	
Supervising OT/PT	This position is budgeted at 5.0%, which is an increase of 2.5% from FY 15/16.	
Health Tech (Pierson)	This position is budgeted at 95%, which is an increase of 20% from FY 15/16.	
Health Tech (Graves)	This position is budgeted at 50% which is the same as that budgeted in FY 15/16.	
Health Tech (Lehr)	This position is budgeted at 39% which is an increase of 14% from FY 15/16.	

II. OPERATING EXPENSES		
Travel	\$1,250	When combined with training, this is a decrease of \$750 from FY 15/16.
Training	\$0	When combined with travel, this is a decrease of \$750 from FY 15/16.
Office Supplies/Printing/Postage	\$3,400	This is a decrease of \$1,600 from FY 15/16.
Insurance	\$5,895	Worker's Comp charges as stated in the County budgete. This is an increase of \$3,895 from FY 15/16.
IT Sup-Software, Internal, Ph/Rem	\$6,000	Equip Maint charges are decreased based upon charges to CCS by county administration/IS department. This is a decrease of \$1,000 from FY 15/16.
Other direct	\$1,350	Direct charges from county departments not included in the Cost Allocation which may include, but is not limited to HR and facilities charges. This is a reduction of \$150 from FY 15/16.
Communication/Fax	\$1,200	Independent fax line for CCS program. This is a decrease of \$150 from FY 15/16.
Total Operating Expenses:	\$19,095	

III. CAPITAL EXPENSES		
Total Capital Expenses:	0	None

IV. INDIRECT EXPENSES		
1. Internal (9.00%)	\$27,906	This amount includes charge from Public Health Administration. Remaining indirect charges will be absorbed by program realignment
2. External (21.00%)	\$65,114	This amount include charges from Nevada County administrative departments and HHS Agency charges. The remainder will be picked up by realignment.
Total Indirect Expenses:	\$93,020	

V. OTHER EXPENSES		
Maintenance & Transportation	\$5,400	Transportation, meals and lodging for CCS clients. This is a increase of \$330 from FY 15/16 county budget.
Total Other Expenses:	\$5,400	

Budget Grand Total	\$427,581
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