

### **Public Health** Administration

Joshua Dugas, MBA, REHS Director

> Jennifer Osorio, REHS **Assistant Director**

> > Janki Patel, MPH **Assistant Director**

Michael A. Sequeira, M.D. Health Officer

September 26, 2023

Paddy Asgari, MPH CPH Public Health Advisor and Project Officer Centers for Disease Control and Prevention Center for Surveillance, Epidemiology, and Laboratory Services

Ms. Asgari:

Thank you for the opportunity to submit this Non-Competing Continuation and Annual Progress Report for our Strengthening Public Health Infrastructure grant. We acknowledge our Strategy A2, Infrastructure, Budget Period 2 as \$1,688,651.

Please allow this letter to serve as my support and approval of the associated documents for submission. We believe this continuation will greatly enhance the Department of Public Health's infrastructure and directly support its mission to promote and improve health, wellness, safety and quality of life in San Bernardino County.

We appreciate the Center for Disease Control and Prevention's support in addressing our infrastructure needs and have included the following items in the budget: two community health workers; Public Health Accreditation Board fees; Public Health Alliance of Southern California membership fees; health information exchange membership fees; a performance management system; clinic assessment; governance, risk and compliance software; two mobile medical clinics; and indirect costs.

Attachments to this cover letter include a Performance Progress and Monitoring Report, Performance Narrative, Budget Narrative Justification, SF-424, SF-424A, SF-424B, SF-425 (interim), Indirect Cost Rate Letter, Disclosure of Lobbying Activities, Public Health Infrastructure Virtual Engagement (PHIVE) portal Budget Extracts (3), PHIVE Work Plan Extracts (3), PHIVE Performance Measures Extract, and a letter supporting the purchase of two Mobile Medical Clinics.

Sincerely,

Dawn Rowe

Chair, Board of Supervisors

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# Performance Progress and Monitoring Report

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Expiration Date: 3/31/2026			Page	of Pages
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1.Federal Agency and Organ Which Report is Submitted	rganization Element to	1.Federal Agency and Organization Element to Assigned by Federal Agency  Mhich Report is Submitted  Assigned by Federal Agency	3a. DUNS Number	
Centers for Disease Control and		1NE11OE000070	1063768610000	
Prevention			3b. EIN	
			95-6002748	
4. Recipient Organization	(Name and complete a	4. Recipient Organization (Name and complete address including zip code)	5. Recipient Identifying	5. Recipient Identifying Number or Account Number
San Bernardino County, Department of Public Health 351 N. Mt. View San Bernardino, CA 92415	nty, Department of F Bernardino, CA 924	Public Health 115	۷ ۷	
6. Project/Grant Period		7. Reporting Period End Date	8. Final Yes	
Start Date: (Month, Day, Year)	End Date: (Month, Day, Year)	ar) (Month, Day, Year)	ON DEPO	
12/01/2022	11/30/2027	07/15/2023	9. Report	semi 🗸 annual
				other, (if other, describe)
10. Performance Narra	itive (attach performar.	 10. Performance Narrative (attach performance narrative as instructed by the awarding Federal Agency)	deral Agency)	
11. Other Attachment	s (attach other docun	11. Other Attachments (attach other documents as needed or as instructed by the awarding Federal Agency)	ing Federal Agency)	
12. Certification: I certify to the best of my purposes set forth in the award documents	rtify to the best of methe award documen	12. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.	correct and complete f	or performance of activities for the

# Performance Progress and Monitoring Report

12a. Typed or Printed Name and Title of Authorized Certifying Official	12c. Telephone (area code, number and extension)
Dawn Rowe	(909) 387-4855
Chair, Board of Supervisors	12d. Email Address
(	Dawn.Rowe@bos.sbcounty.gov
12b. Signature of Authorized Certifying Official	12e. Date Report Submitted (Month, Day, Year)
() awyom Kowe	09/26/2023
	13. Agency use only

Public reporting burden of this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS E-11, Atlanta, Georgia 30333; ATTN: PRA (0920-1132).



### OE22-2203

Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems
NOFO: CDC-RFA-OE22-2203CONT24
Award: NE110E000070
CFDA: 93.967

### Non-Competing Continuation and Annual Progress Report Strategy A1, Workforce Strategy A2, Foundational Capabilities

### 1. Cover Letter signed by the Authorized Organization Representative (AOR)

A Cover Letter signed by our AOR is attached. Our Board of Supervisors, County Administrative Office, Chief Elected Official, and AOR are in full support.

### 2. Performance Progress and Monitoring Report (PPMR)

Our PPMR is attached. All items indicated in the PPMR template have been included below, on the following pages, or are attached.

### 3. SF-424, SF-424A, Application for Federal Assistance, Budget Information, and Narrative

Our SF-424 and SF-424A are attached. All required information is included in the SF-424. All budgeted items are included in the SF-424A and formatted as per the guidance.

A budget narrative is also attached, including detailed justifications, which follows the CDC specified Budget Preparation Guidelines.

### **Analysis of Remaining Time and Funds**

As we are less than one year into the grant, expenditures will substantially increase when employment contracts are in place. 20 for Strategy A1 and 2 for Strategy A2. Current under-expenditures are primarily due to not having hired two community health workers under A2, several staff under A1, and not having received an invoice from the Public Health Alliance of Southern California under A2.

We expect to have these two positions filled by December 30, 2023, as their employment contracts are in development. A1 employment contracts are also in development. Staff members are researching to see when the annual Public Health Alliance of Southern California invoice will be received.

This should be mitigated by program staff having prorated the year 1 staffing budget to account for hiring not to be expected at the start of the grant.

Further expenditure detail and analysis is included on the following pages.

### 4. Interim Federal Financial Report (FFR) SF-425

Our Interim SF-425 is attached.

### **Summary of Activities Completed**

To date, for Strategy A1, we have in place:

- Workforce Director Scott Rigsby, Public Health Program Manager (funded under Strategy A1)
- Evaluation Lead Monica Garcia, Statistical Analyst (not funded by the grant, but supporting)
- Staff Analyst II/Accountant III Enrique Salazar, Accountant III (funded under Strategy A1)
- No Data Modernization Initiative Director is in place, as we were not funded for Strategy A3, Data Modernization.

To date, for Strategy A1, we have expended \$18,175.85 for staffing, travel, and indirect.

To date, for Strategy A2, we have made payment to the Public Health Accreditation Board in the amount of \$14,000 for our annual accreditation fee. Employment contacts for two community health workers are in development. Staff are researching to see when the annual Public Health Alliance of Southern California invoice will be received. We have also expended \$1,400 for indirect.

Therefore, total expenditures for Strategy A2 total \$15,400.

Combined, under A1 and A2, we have expended \$33,575.85.

Expenditures will substantially increase when employment contracts are in place. 20 for Strategy A1 and two for Strategy A2.

### 5. Indirect Cost Rate

Our approach to Indirect Costs is attached. We will be utilizing the de minimis rate. This is being done per CDC guidance and 45 CFR Part 75.414 concerning indirect costs and the de minimis rate of 10%.

### 6. Performance Narrative

### **Section I. Current Budget Period Progress**

Provide a brief report addressing the following elements of each objective or activity.

Our year 2, Strategy A1 budget remains unchanged from our year 1 submission.

Our year 1, Strategy A2 budget included funding for:

- Two community health workers
- Annual Public Health Accreditation Board fees
- Annual Public Health Alliance of Southern California membership fees
- Health information exchange membership fees
- Indirect

Our new year 2, Strategy A2 budget includes funding for:

- Two community health workers
- Annual Public Health Accreditation Board fees
- Annual Public Health Alliance of Southern California membership fees
- Health information exchange membership fees
- Health center/clinic assessments
- Government Risk and Compliance software
- Two mobile medical clinics
- Indirect

To date, under A2, we have expended \$14,000 for one annual payment to the Public Health Accreditation Board and indirect of \$1,400, for a total of \$15,400. Our annual payment to the Public Health Alliance of Southern California is pending receipt of an invoice, and two community health workers are pending approval of their employment contract templates.

While hiring of multiple positions under A1 and A2 has not yet taken place, employment contract templates are in development. As funding is limited term in nature, we must utilize contract staffing in lieu of regular budgeted positions. We are processing contract templates to expedite the recruitment and hiring process.

The positions were originally projected to be presented to our Board of Supervisors for approval in July of 2023; however, an unexpected retirement of contract development staff impacted this date. This will be mitigated by prorating the staffing budget to account for not hiring at the start of the grant.

Staff will communicate any challenges to the Project Officer for effective technical assistance provision or referral to outside contracted technical assistance providers.

### **Performance Measures**

Report on performance measures for each budget period. Recipients should confirm that they have submitted their performance measure data to PHIVE during the last reporting due date and upload the report to GrantSolutions.

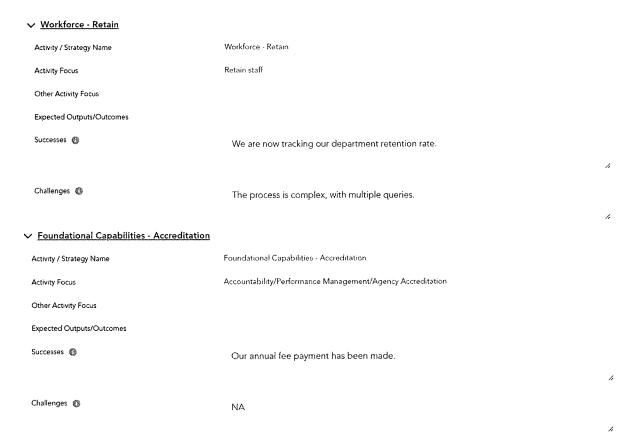
All performance measures have been reported in the Public Health Infrastructure Virtual Engagement (PHIVE) portal for the most recent reporting period and a download of the information is attached.

### They include:

- Hiring
- Retention
- Hiring Timeliness
- Procurement Timeliness
- Accreditation Involvement and Readiness

Example snips (Procurement and Hiring) are included for reference:

Procurement Ti	meliness (1)			
Procurement Timeliness	Min Days from Procure	Median Days from Proc	Max Days from Procure	
PTL-000085	259	302	404	$\forall$
Hiring Timeline	ess (1)			
Hiring Timeliness	Min Days to Fill Position	Median Days to Fill Pos	Max Days to Fill Positions	
HT-000085	26	79	159	$\Psi$



### **Evaluation Results**

Separate from the full recipient evaluation plan due November 15, 2023, Component A recipients will submit a report that details the status of hiring on key workforce positions.

In lieu of the full evaluation plan due in November, and as indicated as reportable for this measure, we now have in place:

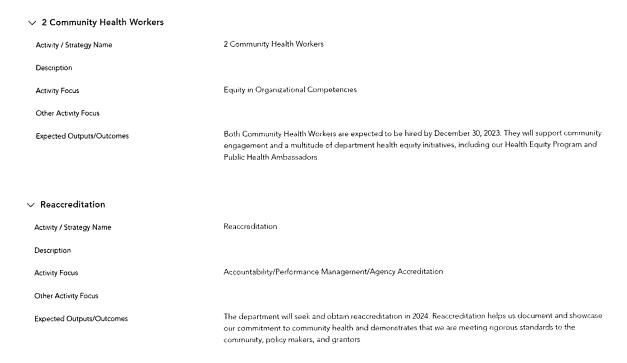
- Workforce Director Scott Rigsby, Public Health Program Manager (funded under Strategy A1)
- Evaluation Lead Monica Garcia, Statistical Analyst (not funded by the grant, but supporting)
- Staff Analyst II/Accountant III Enrique Salazar, Accountant III (funded under Strategy A1)
- No Data Modernization Initiative Director is in place, as we were not funded for Strategy A3, Data Modernization.

### **Work Plan**

Recipients must complete the work plan for Year 2 in PHIVE and include the export of the work plan as a part of the narrative in GrantSolutions.

Our year 2 work plan has been completed in PHIVE and is included as an attachment to this application. We have also included year 1 for both Strategy A1 and A2.

Example snips (Hiring and Reaccreditation) are included for reference:



### **Successes**

Recipients must report progress on completing activities outlined in the work plan.

We have successfully processed payment to the Public Health Accreditation Board for annual fees associated with accreditation/reaccreditation. This was in the amount of \$14,000 and will be paid annually. This fee will allow us to maintain our current accreditation status and apply for reaccreditation in 2024.

Accreditation/Reaccreditation helps us to document and showcase our department's commitment to community health and demonstrates to the public and policy makers that services being provided meet rigorous standards.

### Benefits include:

- A commitment to Continuous Quality Improvement
- Strengthened community partnerships
- Improved accountability to external stakeholders
- Better identification of strengths and opportunities for improvement

 A commitment and assurance to external funders which favor accredited programs in relation to competitive grants

We also have several employment contracts in process for staffing.

### Challenges

Recipients must describe any challenges that might affect their ability to achieve annual and project-period outcomes, make progress toward performance measures, or complete the activities in the work plan.

As funding is limited term in nature, we must utilize contract staffing in lieu of regular budgeted positions. We are processing contract templates to expedite the recruitment and hiring process. When these employment contract templates are in place, staffing and expenditures will quickly progress.

Staff are currently following up on receipt of an invoice from the Public Health Alliance of Southern California, as it has not yet been received. Our membership is not in jeopardy and it is believed to just be a timing issue of the invoice having not yet being received.

### **CDC Program Support to Recipients**

Recipients must describe how CDC could help them overcome challenges to achieving annual and project-period outcomes and performance measures, and completing activities outlined in the work plan.

CDC guidance has been very helpful. We regularly consult with our Project Officer for technical assistance and we have a formal meeting on a monthly basis. She also refers us to additional technical assistance from contracted providers, provides updates, shares pertinent information, connects us to neighboring jurisdictions with similar scopes of work, and acts as our go-to or single point of contact for most items in relation to the grant.

Program staff will continue to work with their Project Officer to overcome any obstacles presented.

### **Data Management Plan**

Projects that involve collection or generation of new public health data are required to develop a Data Management Plan (DMP). The data management plan is not required unless a recipient chooses to allocate funding to an activity that involves the collection, generation, or analysis of data.

As we are not allocating funding to the collection or analysis of public health data, and as per the guidance, we are not reporting on this topic area.

### Section II. New Budget Period Proposed Objectives and Activities

List proposed activities for the upcoming budget period.

Each budget objective directly supports our work plan, contributes to foundational capabilities, and a PHIVE download for year 2 is attached. We have also included year 1 for both Strategy A1 and A2.

### Budget Item/Activity:

Two Community Health Workers

Milestone: Two community health workers are expected to be hired by December 30, 2023. They will provide culturally competent and equity-focused outreach and education, engage directly with community members to identify health needs and barriers to health care, promote healthy behaviors, assist with navigating access and establishing linkage to health care and support services, and conduct case management as appropriate to help ensure individuals remain in care.

### Budget Item/Activity:

Public Health Accreditation Board fees

Milestone/Timeline: The San Bernardino County Department of Public Health was accredited by the Public Health Accreditation Board in 2019 and is seeking reaccreditation in 2024. Annual fees are required to maintain accreditation status, which demonstrates our commitment to community health and that we are meeting rigorous standards to community stakeholders, policy makers, and funders.

### **Budget Item/Activity:**

Public Health Alliance of Southern California

Milestone: The department will maintain membership in the Public Health Alliance of Southern California which affords many benefits to the department and community, including access to training, technical assistance and regional collaboration with other local health jurisdictions.

### **Budget Item/Activity:**

Performance Management

Milestone: The department seeks to develop a performance management and data system that will enhance sharing public health data and metrics internally and with the public to enhance productivity, transparency and accountability.

### **Budget Item/Activity:**

Health Information Exchange

Milestone: Membership in a health information exchange (HIE) allows health care professionals and patients to access and securely share medical information and history electronically, resulting in safer and more effective care.

### **Budget Item/Activity:**

Clinic Assessment

Milestone: The department will conduct a clinic assessment of three of its health centers to assess the efficiency, effectiveness, and appropriateness of client services as they relate to requirements for Federally Qualified Health Centers and adjust service provision based on results.

### **Budget Item/Activity:**

Governance, Risk and Compliance (GRC) Software

Milestone: The department seeks to purchase and implement a governance, risk and compliance system to centralize, standardize, automate and enhance its regulatory, policy and grant compliance functions. This will increase efficiencies related to policy lifecycle management, employee attestation and training, professional certification management, information privacy investigations, audit preparedness, and reporting.

### Budget Item/Activity:

Two Mobile Medical Clinics (support letter attached)

Milestone: These mobile units will support the delivery of grant related work under Strategy A2, Foundational Capabilities, by increasing equitable access to health care services in remote, rural and underserved areas of San Bernardino County's 20,000 square miles.

### **Budget Item/Activity:**

Indirect

Milestone: Our approach to Indirect Costs is attached. We will be utilizing the de minimis rate. This is being done per CDC guidance and 45 CFR Part 75.414 concerning indirect costs and the de minimis rate of 10%. Billing will take place on a quarterly basis.

### **Redirection of Funds**

Identify any redirection of activities.

A redirection of funds below the allowable threshold has been made from Consulting to Equipment under Strategy A1, with no change to the original work plan. This was done in consultation with our Project Officer and Grants Management Officer. We will further consult with both if a larger redirection becomes necessary.

No redirection of funding is needed at this time under Strategy A2. However, as additional funds were offered via our Annual Progress Report Solicitation Guidance Letter for this cycle, we have elected to include:

- Two community health workers (ongoing from year 1)
- Public Health Accreditation Board fees (ongoing from year 1)
- Public Health Alliance of Southern California membership fees (ongoing from year 1)
- Health information exchange membership fees (new)
- Clinic assessment (new)
- Governance, risk and compliance software (new)
- Two mobile medical clinics (new)
- Indirect (ongoing from year 1)

These items will allow the department to improve our assessment capabilities, performance management, equity, and develop a data dashboard to more broadly share metrics both internal and externally.

### **Budgetary Issues**

Include comments pertaining to budgetary issues that might hamper the success or completion of the project as originally proposed and approved.

While hiring of multiple positions has not yet taken place, employment contract templates are in development. As funding is limited term in nature, we must utilize contract staffing in lieu of regular budgeted positions. We are processing contract templates to expedite the recruitment and hiring process.

The positions were originally projected to be presented to our Board of Supervisors for approval in July of 2023; however, an unexpected retirement of contract development staff impacted this date. This will be mitigated by prorating the staffing budget to account not hiring at the start of the grant. Staff will communicate any challenges to

the Project Officer for technical assistance provision or referral to outside contracted technical assistance providers.

### 7. Disclosure of Lobbying Activities

Our Disclosure of Lobbying Activities is attached.

### 8. SF-424B Assurances

Our SF-424B is attached.

### 9. Attachments

- Cover Letter signed by the Authorized Organization Representative (AOR)
- Performance Progress and Monitoring Report (PPMR)
- Budget Narrative Justification
- SF-424 Application for Federal Assistance
- SF-424A Budget Information
- SF-424B Assurances
- SF-425 Federal Financial Report Interim
- Indirect Cost Rate Letter
- Disclosure of Lobbying Activities
- Budget Extracts from PHIVE (3)
- Work Plan Extracts from PHIVE (3)
- Performance Measures Extract from PHIVE
- Letter Supporting Two Mobile Medical Clinics

### Salaries & Wages - A2

Position Title	Name	Time	Months	Annual Salary (Does not include Fringe)	Amount Requested
Community Health Worker	vacant	100%	12	\$54,269	\$54,269
Community Health Worker	vacant	100%	12	\$54,269	\$54,269
Total Personnel		2.00 FTE		\$ 108,538	\$ 108,538

Note: Salaries may reflect differently from actual as the department utilizes averages and individuals may be hires at a range of different salary steps.

### Salary and Wage Justification

Job Description: 2 Community Health Workers – (Vacant)

Community Health Workers are expected to be hired by December 30, 2023. They will support community engagement and a multitude of department health equity initiatives, specifically with a focus on improving health equity across the county.

### Fringe Benefits – A2

Position Title	Annual Fringe	Amount Requested	Fringe %
Community Health Worker	\$26,554	\$26,554	48.93%
Community Health Worker	\$26,554	\$26,554	48.93%
Total Personnel	\$53,108	\$53,108	48.93%

### Fringe Benefits Justification

Refers to non-wage compensation provided to employees such as, but not limited to, employer paid insurances, paid leaves, tuition reimbursement, Medical Emergency Leave, Voluntary Time Off, and Optout/Waive amounts.

48.93% of Total salaries = Fringe Benefits.

Fringe Benefit	Percentage of Salary	
Retirement - County match	28.38%	
Survivor's Benefits	0.03%	
Retirement - employee portion	0.00%	
SDI/Short Term Disability	1.16%	
Medicare	1.44%	
Workers Compensation	4.11%	
Vision Care	0.10%	
Group Health - county portion	12.25%	
Life Insurance	0.86%	
Dental Ins	0.27%	
Cafeteria Plan	0.34%	
Total Fringe	48.93%	

### Consultatant Costs - A2

We are seeking to secure consulting services for a Clinic Assessment and development of a Performance Management System.

- 1. Name of Consultant: TBD
- 2. **Organizational Affiliation:** Consultant will be affiliated with an organization competent and experienced with assessment and/or performance management in relation to population health and be selected via competitive procurement or another approved county process.
- 3. **Nature of Services to Be Rendered:** One or more consultants will support the department as Subject Matter Experts on a variety of infrastructure topics as they relate to our foundational capabilities. Specifically, these topics may cover assessment, performance management, and data dashboard development in relation to population health.
- 4. **Relevance of Service to the Project**: Each consultant will provide Public Health infrastructure support to the department in relation to our foundational capabilities.
- 5. Number of Days of Consultation (basis for fee): 365 (1 years).
- 6. Expected Rate of Compensation: \$300,000.
- 7. **Method of Accountability:** Fiscal, Program, and Contract monitoring will be conducted if an outside service vendor is utilized via contract

Equipment - A2

Item Requested	Number Needed	Unit Cost	Amount Requested
			1
Software - GRC	1	\$150,000	\$150,000
		_	
Software - HIE	1	\$60,440	\$60,440
Mobile Medical Clinic	2	\$450,000	\$900,000
TOTAL Equipment Cost			\$1,110,440

### Software - GRC

The department seeks to purchase and implement a Government Risk and Compliance system to automate and standardize compliance across the department. The department estimates it will cost \$150,000 to purchase and implement the software.

### Software - HIE

The department seeks to support a Health Information Exchange (HIE) that will allow for sharing of information across departments including clinic operations and our medical center. This HIE will supplement our EHR, but not take the place of. The department estimates a cost of \$60,440.

### Mobile Medical Clinic

Procurement of 2 Mobile Medical Clinics to support health equity efforts. These mobile units will support the delivery of grant related work under Strategy A2, Foundational Capabilities, providing healthcare access to remote areas of our over 20,000 square miles and our 2,195,000 population, many with limited healthcare access. The mobile medical clinics will allow the department to enter high-need and rural areas and reach populations that typically do not have access to healthcare services. Secondarily, they will be used as mobile distribution sites for health education material, outreach to unhoused individuals, and moved throughout the county during emergency operations. The San Bernardino County Department of Public Health (DPH) will have an invitation to Bid through our ePro system. If less than three bids are submitted due to the specialized scope of work, DPH will provide a justification. Also, If the higher bidder is selected DPH will provide a justification. A more detailed justification letter is attached, which describes lease vs. purchase, accountability, and disposition/disposal.

### Other - A2

Item Requested	Number of Months	Estimated Cost / month	Number of Staff	Amount Requested
			_	
Annual Accreditation Fees	N/A - Annual	N/A - Annual	0	\$14,000
Public Health Alliance of Southern California				
Membership	N/A - Annual	N/A - Annual	0	\$30,000
Professional Services	N/A	N/A	0	\$20,000
Total Other Costs				\$64,000

### Annual Accreditation/Reaccreditation Fee

The department will seek and obtain reaccreditation in 2024. Reaccreditation helps us document and showcase our commitment to community health and demonstrates that we are meeting rigorous standards to the community, policy makers, and grantors. Fees cost is \$14,000 per year, as required by PHAB. This will allow the department to seek and obtain annual reaccreditation. By retaining national accreditation status, the department will be able to qualify for additional grants and better serve the community and constituents.

### Professional Services

The San Bernardino County Central Imaging department will provide scanning services and electronic filing to the DPH Payroll Department. The Central Imaging department will scan and centralize all DPH personnel files in an online location. This will reduce manual document management and improve department operations, Data safety, and collaboration. The Department estimates to scan 18,300 documents for approximately 1,220 employee files. Each page scan by central imaging will have an estimated cost of \$0.84.

### Direct Costs - A2

Costs	Total
Salaries & Wages	\$108,538
Fringe Benefits	\$53,108
Consultant Costs	\$300,000
Equipment	\$1,110,440
Other	\$64,000
Total	\$1,636,086

### Indirect Costs - A2

Total \$52,565

CDC approved 10% Indirect Cost of modified total direct cost (MTDC). Modified Total Direct Cost (MTDC) means all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs.

### Total Grant Costs - A2

Costs	Total
Salaries & Wages	\$108,538
Fringe Benefits	\$53,108
Consultant Costs	\$300,000
Equipment	\$1,110,440
Other	\$64,000
Indirect Costs	\$52,565
Total	\$1,688,651

Application for Federal Assistance SF-424					
* 1. Type of Submission:  Preapplication Application Changed/Corrected Application	Preapplication  New  E: Other (specify)  Application  * Other (Specify):				
* 3. Date Received:	4. Applicant Identifier:				
5a. Federal Entity Identifier:	-	5b. Federal Award Identifier:  NE110E000070			
State Use Only:		-			
6. Date Received by State:	7. State Applicatio	n Identifier:			
8. APPLICANT INFORMATION:	•				
* a. Legal Name: San Bernardino	County, Department	of Public Health			
* b. Employer/Taxpayer Identification No.	ımber (EIN/TIN):	* c. Organizational DUNS: 1063768610000			
d. Address:					
* Street1: 351 N. Mt. V Street2:  * City: San Bernardi County/Parish:					
* State: CA: Californ Province:  * Country: USA: UNITED					
* Zip / Postal Code: 92415					
e. Organizational Unit:					
Department Name:		Division Name:			
f. Name and contact information of	person to be contacted on i	matters involving this application:			
Prefix:  Middle Name:  * Last Name: Rigsby  Suffix:	* First Nar	ne: Scott			
Title:					
Organizational Affiliation:					
* Telephone Number: (909) 841-5	* Telephone Number: (909) 841-5088 Fax Number:				
* Email: srigsby@dph.sbcounty	.gov				

Application for Federal Assistance SF-424
* 9. Type of Applicant 1: Select Applicant Type:
B: County Government
Type of Applicant 2: Select Applicant Type:
Type of Applicant 3: Select Applicant Type:
* Other (specify):
* 10. Name of Federal Agency:
Centers for Disease Control and Prevention
11. Catalog of Federal Domestic Assistance Number:
CFDA Title:
* 12. Funding Opportunity Number:
CDC-RFA-0E22-2203CONT24
* Title:
Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems
13. Competition Identification Number:
Title:
14. Areas Affected by Project (Cities, Counties, States, etc.):
Add Attachment Delete Attachment View Attachment
* 15. Descriptive Title of Applicant's Project:
Strengthening Public Health Infrastructure
Attach supporting documents as specified in agency instructions.
Add Attachments Delete Attachments View Attachments

Application for Federal Assistance SF-424
16. Congressional Districts Of:
* a. Applicant
Attach an additional list of Program/Project Congressional Districts if needed.
Add Attachment Delete Attachment View Attachment
17. Proposed Project:
* a. Start Date: * b. End Date: 11/30/24
18. Estimated Funding (\$):
* a. Federal 1,688,651
* b. Applicant 0
* c. State 0
* d. Local 0
* e. Other 0
* f. Program Income 0
* g. TOTAL
* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?
a. This application was made available to the State under the Executive Order 12372 Process for review on
b. Program is subject to E.O. 12372 but has not been selected by the State for review.
区 Program is not covered by E.O. 12372.
* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)
Yes X No
If "Yes", provide explanation and attach
Add Attachment Delete Attachment View Attachment
21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)
★   AGREE
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency
specific instructions.
Authorized Representative:
Prefix: * First Name: Dawn
Middle Name:
* Last Name: Rowe
Suffix:
* Title: Chair, Board of Supervisors
* Telephone Number: (909) 387-4855 Fax Number:
* Email: Dawn.Rowe@bos.sbcounty.gov
* Signature of Authorized Representative: * Date Signed: 9/26/23

**BUDGET INFORMATION - Non-Construction Programs** 

OMB Number: 4040-0006 Expiration Date: 02/28/2025

SECTION A - BUDGET SUMMARY

2,638,203.00 1,688,651.00 949,552.00 Total (g) 69 New or Revised Budget Non-Federal (f) 1,688,651.00 1,688,651.00 Federal e Non-Federal Ð **Estimated Unobligated Funds** 949,552.00 949,552.00 Federal 9 \* Catalog of Federal Domestic Assistance Number 9 93.967 93.967 Grant Program Function or Activity Strategy A2:BP2 Foundational Capabilities Strategy A2:BP1 Foundational Capabilities (a) Totals io ٨ 4, ત્યું

Standard Form 424A (Rev. 7- 97) Prescribed by OMB (Circular A -102) Page 1

**SECTION B - BUDGET CATEGORIES** 

6 Object Clase Categories		GRANT PROGRAM. F	GRANT PROGRAM, FUNCTION OR ACTIVITY		Total
	(1)	(2)	(3)	(4)	(2)
	Strategy A2:BP2 Foundational Capabilities	Strategy A2:BP1 Foundational Capabilities			
a. Personnel	\$ 108,538.00	\$ 448,327.00	<b>S</b>	\$	\$ 556,865.00
b. Fringe Benefits	53,108.00	252,139.00			305,247.00
c. Travel					
d. Equipment	1,110,440.00				1,110,440.00
e. Supplies					
f. Contractual					
g. Construction					
h. Other	364,000.00	162,764.00			526,764.00
i. Total Direct Charges (sum of 6a-6h)	1,636,086.00	863,230.00			2,499,316.00
j. Indirect Charges	52,565.00	86,322.00			\$ 138,887.00
k. TOTALS (sum of 6i and 6j)	\$ 1,688,651.00	\$ 949,552.00	49	4	\$ 2,638,203.00
7. Program Income	\$ 00.0		•	•	00.00
	<b>A</b>	Authorized for Local Reproduction	roduction	Sta Prescribed by O	Standard Form 424A (Rev. 7- 97) Prescribed by OMB (Circular A -102) Page 1A

# Authorized for Local Reproduction

Standard Form 424A (Rev. 7-97) Prescribed by OMB (Circular A -102) Page 2

### DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

Approved by OMB 4040-0013

1. * Type of Federal Action:	2. * Status of Federal Action:	3. * Report Type:	
a, contract	a. bld/offer/application	a. initial filing	
b. grant	b. initial award	b. material change	
c. cooperative agreement	c. post-award		
d, loan			
e, loan guarantee			
f. Ioan insurance			
4. Name and Address of Reporting	Entity:		
Prime SubAwardee		<i>r</i>	
*Name San Bernardino County, Department of	of Public Health		
*Street 1 351 N. Mt. View	Street 2		
*City San Bernardino	State CA: California	Zip 92415	
Congressional District, if known:			
5. If Reporting Entity in No.4 is Subay	wardee, Enter Name and Address of Pr	ime:	
	*		
6. * Federal Department/Agency:	7. * Federal Prog	gram Name/Description:	
Centers for Disease Control and Preventi	Strengthening US Pub	lic Health Infrastructure	
	GERALIUM VIII VIII VIII VIII VIII VIII VIII V	No. 100 Dep	
0.5.1.11.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	CFDA Number, if applica		
8. Federal Action Number, if known:	9. Award Amour		
\$ 1,688,651.00			
10. a. Name and Address of Lobbying Registrant:			
Prefix *First Name pan Middle Name			
* Last Name Feliz	Suffix		
* Street 1	Street 2		
*City	State	Zip 20003	
Washington	DC: District of Columbia	20003	
b. Individual Performing Services (Inclu	uding address if different from No. 10a)		
Prefix ** First Name Dan	Middle Name		
*Last Name Feliz	Suffix		
*Street 1 700 Pennsylvania Ave. SE, Suite 320	Street 2		
* Clty Washington	State DC: District of Columbia	Zip 20003	
11. Information requested through this form is authorized	by title 31 U.S.C. section 1352. This disclosure of lobbying ac	tivities is a material representation of fact upon which	
religing was placed by the tier above when the transs	action was made or entered into. This disclosure is required pu copilic inspection. Any person who falls to file the required disc	rsuant to 31 U.S.C. 1352. This information will be reported to	
\$10,000 and not more than \$100,000 for each such fa	ijure.		
* Signature:	Dure		
*Name: Prefix *First Name	e Dawn Middle N	ame	
*Last Name Rowe	Sui	fix	
Title: Chair, Board of Supervisors	Telephone No.: (909) 387-4855	Date: 09/26/2023	
		Authorized for Local Reproduction	
Federal Use Only:		Standard Form - LLL (Rev. 7-97)	

### Federal Financial Report

(Follow form Instructions)

OMB Number: 4040-0014 Expiration Date: 02/28/2025

1. Federal	Agency and O	organizational Element to Wr	nich Report is Subm	nitted					ng Number Assigned by Federal use FFR Attachment)
Center	rs for Dise	ease Control and P	revention		NE110	DE000	0070		
Recipient C Street1: [ Street2: [	_			lic Hea	lith San Bernard	lino C	ounty		
State:	CA			,		]	Province:		
Country:	United States					ZIP	/ Postal Code:	92415	
4a. UEI PD18A8XKI	E7B6	4b. EIN 956002748		(То			t Number or id rants, use FFF		
6. Report T	riy Innual	7. Basis of Accounting Cash Accrual	8. Project/Grant I From: 12/1/22	To:	/30/27		9. Reporting	Period	End Date
10. Transac	ctions	<u> </u>							Cumulative
(Use lines	a-c for single	or multiple grant reporting)							
Federal C	ash (To repo	rt multiple grants, also use	FFR attachment)	:					
a. Cash R	eceipts								33,575.85
b. Cash Disbursements c. Cash on Hand (line a minus b)					33,575.85				
			<del></del>						0.00
		grant reporting)							
	ederal funds a	and Unobligated Balance:							20,715,347.00
	share of expe			manuscript (medicin	<u></u>				33,575.85
		uidated obligations		gy a night program i program a franco					
		sum of lines e and f)	parlimentario (mojormo nateral circum) najadema villadore, de la sustante de la compositione de la sustante de	THE REAL PROPERTY OF THE PARTY					33,575.85
		of Federal Funds (line d min	us g)		,				20,681,771.15
Recipient									
i. Total rec	cipient share re	equired	***************************************					and the second second	
j. Recipien	nt share of exp	enditures	***************************************	***************************************					
k. Remain	ing recipient sl	hare to be provided (line i m	inus j)				And the second s	*****	0.00
Program I	Income:								
I. Total Fed	deral program	Income earned	Writing Andrews and Assessment of States ( execution of the second						
m. Prograr	m Income exp	ended in accordance with th	e deduction alterna	ative					The state of the s
n. Progran	n Income expe	ended in accordance with the	addition alternativ	re	######################################		aganama waki anggapanonan and bisaki akidemin		
o linevne	o. Unexpended program income (line I minus line m or line n)								

11. Indirect Expense							
а. Туре	b. Rate	c. Period From	Period To	d. Base	6	e. Amount Charged	f. Federal Share
Fixed	10%	12/01/2022	6/30/2023	30,5	23.50	3,052.35	3,052.35
			g. Totals:	30,5	23.50	3,052.35	3,052.35
12. Remarks: Attach any explanation	ons deemed	necessary or info	rmation required i	by Federal spons			veming legislation:
San Bernardino County Department of Public Health will use Expand	led Authority. Please see	the attached worth	d Attachment	Delete Attachmer	nt View Atta	chment	
expenditures, disbursements an am aware that any false, fictitiou							
Prefix: Fi	rst Name: D	awn		N	Middle Name:		
Last Name: Rowe	180,711			PANTA SANTA	Suffix:		
Title: Chair, Board of Super	visors	OT LIVE I			•		
b. Signature of Authorized Certifyin				c. Telephone	e (Area code, r	number and extension	n)
() aunm	Kow	e		(909) 387-48	55		
d. Email Address				e. Date Rep	ort Submitted	14. Agency use	only:
Dawn.Rowe@bos.sbcounty.gov				9/26/23			

Standard Form 425

www.SBCounty.gov



### **Public Health Administration**

Joshua Dugas, MBA, REHS Director

> Jennifer Osorio, REHS Assistant Director

> > Janki Patel, MPH Assistant Director

Michael A. Sequeira, M.D. Health Officer

September 13, 2023

Paddy Asgari, MPH CPH
Public Health Advisor and Project Officer
Centers for Disease Control and Prevention
Center for Surveillance, Epidemiology, and Laboratory Services

Ms. Asgari:

As we do not have a federally negotiated indirect cost rate, we are electing to utilize the de minimis rate. This is being done per CDC guidance and 45 CFR Part 75.414 concerning indirect costs and the de minimis rate of 10%.

We appreciate the CDC's willingness to work with us as we address our infrastructure needs and should you have any questions regarding this document, please contact our Strategic Alignment staff at (909) 841-5088.

Sincerely,

Paul Chapman

**Chief Financial Officer** 

### DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

Approved by OMB 4040-0013

1. * Type of Federal Action:	2. * Status of Fede	ral Action:	3. * Report Type:	
a. contract	a. bid/offer/applica	tion	a. initial filing	
b, grant	b. initial award		b. material change	
c. cooperative agreement	c. post-award			
d. loan				
e. Ioan guarantee		=		
f. Ioan insurance	F - 474			CONTRACTOR OF THE PROPERTY OF
4. Name and Address of Reporting	Entity:			
Prime SubAwardee				
*Name San Bernardino County, Department of	f Public Health			
*Street 1 351 N. Mt. View		Street 2		
* City San Bernardino	State CA: California	Company of the second s	Zip 92415	
Congressional District, if known:				
5. If Reporting Entity in No.4 is Subawardee, Enter Name and Address of Prime:				
-				
		7 t Fadaval Duam	ver Neme/Description:	
6. * Federal Department/Agency:  7. * Federal Program Name/Description:  Strengthening US Fublic Health Infrastructure				
nters for Disease Control and Preventi		Strengthening US Fubi	ic Realth Inflastructure	
		CFDA Number, if applicable: 93.967		
8. Federal Action Number, if known:  9. Award Amount, if known:				
\$ 1,688,651.00				
40 a Name and Address of Labbying Pagistrant:				
10. a. Name and Address of Lobbying Registrant:  Profix   Middle Name   Middle Name				
Prefix *First Name Dan		J		
*Last Name Feliz		Suffix	2	
* Street 1 700 Pennsylvania Ave. SE, Suite 320		Street 2		
*City Washington State DC: District of C		Columbia	Zip 20003	
h Individual Performing Services (	uting address if different from No	100\		
Profiv Siret Name	b. Individual Performing Services (Including address if different from No. 10a)  Profit    First Name   Middle Name			
Dan				
*Last Name Feliz		Suffix		
* Street 1 700 Pennsylvania Ave. SE, Suite 320		Street 2		
* City Washington	State DC: District o	f Columbia	Zip 20003	
11. Information requested through this form is authorized	by title 31 U.S.C. section 1352.	This disclosure of lobbying ac	vities is a material representation of fact upon	which
reliance was placed by the tier above when the transe the Congress semi-annually and will be available for p	ction was made or entered into.	This disclosure is required our	suant to 31 U.S.C. 1352. This information will be	в геропеа то
\$10,000 and not more than \$100,000 for each such fa	ifure.		726 990	
*Signature: // ) AUNTO &	owe			
*Name: Prefix *First Name	Dawn	Middle Ne	те	Ī
*Last Name		Sufi	x	
Rowe			Date: 09/26/2023	
Title: Chair, Board of Supervisors	Telephone No.:	(909) 387-4855		
Federal Use Only:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Market Same	Authorized for Local Reproduct Standard Form - LLL (Rev. 7-97)	

### OE22-2203 Budget Narrative Report: San Bernardino, County of Strategy A1: Workforce

Personnel Amount Requested:	\$7,952,165.00
Name/Description:	Public Health Physician
Position Title:	Public Health Physician
Annual Salary:	\$145,452.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$630,292.00
Justification:	This position will perform medical work involving the examination, diagnosis, and treatment of patients. Position may also consult with department staff on Electronic Health Record implementation.
Name/Description:	Quality Improvement Coordinator
Position Title:	Quality Improvement Coordinator
Annual Salary:	\$100,693.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$436,335.00
Justification:	This position will develop, implement, and monitor Quality Improvement activities at Public Health clinic locations and perform related duties as required.
Name/Description:	Public Health Project Coordinator
Position Title:	Public Health Project Coordinator
Annual Salary:	\$95,451.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$413,621.00
Justification:	This position will coordinate health equity evaluation, assessment planning and implementation of equity-focused interventions and service improvements. It will also work with university interns and fellows to develop strategies that addresses burnout, engagement, inclusion, and belonging in Public Health workforce.
Name/Description:	Public Health Project Coordinator
Position Title:	Public Health Project Coordinator
Annual Salary:	\$95,451.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$413,621.00
Justification:	This position will support the COVID-19 Equity grant and may support other department initiatives in relation to workforce infrastructure improvement activities.
Name/Description:	Program Specialist II
Position Title:	Program Specialist II

Annual Salary:	\$86,466.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$374,686.00
Justification:	This position will support Program Evaluation for the grant and may support other department initiatives. This position will also work collaboratively with the department Health Equity Manager, Workforce Development staff, and across the department.
Name/Description:	Program Specialist II
Position Title:	Program Specialist II
Annual Salary:	\$86,466.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$374,686.00
Justification:	This position will support Quality Improvement, as well as Workforce Development, and may support other department initiatives in relation to workforce infrastructure improvement activities.
Name/Description:	Scott Rigsby
Position Title:	Public Health Program Manager
Annual Salary:	\$122,054.00
In Kind:	No
Time (%):	100.00
Months:	60
Amount Requested:	\$610,270.00
Justification:	This position will support the grant as Workforce Development Director/Project Director/Principle Investigator, provide oversight of Workforce Development, and support other department initiatives. This position will also work collaboratively with the department Health Equity Manager, Workforce Development staff, and across the department. In addition, this position will focus on grant administration. This position has been filled but may be replaced.
Name/Description:	Public Health Program Manager
Position Title:	Public Health Program Manager
Annual Salary:	\$122,054.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$528,901.00
Justification:	This position will provide oversight of Compliance and may support other department initiatives in relation to workforce infrastructure improvement activities.
Name/Description:	Health Education Specialist II
Position Title:	Health Education Specialist II
Annual Salary:	\$72,821.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$315,558.00
ount i toquottou.	17

Justification:	This position will be assigned to support Health Education and may provide support to various department programs in relation to workforce infrastructure improvement activities.
Name/Description:	Community Health Worker
Position Title:	Community Health Worker
Annual Salary:	\$51,730.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$224,163.00
Justification:	These positions will support client engagement, community engagement, and may support a multitude of department initiatives.
Name/Description:	Community Health Worker
Position Title:	Community Health Worker
Annual Salary:	\$51,730.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$224,163.00
Justification:	These positions will support client engagement, community engagement, and may support a multitude of department initiatives.
Name/Description:	Community Health Worker
Position Title:	Community Health Worker
Annual Salary:	\$51,730.00
In Kind:	No .
Time (%):	100.00
Months:	52
Amount Requested:	\$224,163.00
Justification:	These positions will support client engagement, community engagement, and may support a multitude of department initiatives.
Name/Description:	Community Health Worker
Position Title:	Community Health Worker
Annual Salary:	\$51,730.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$224,163.00
Justification:	These positions will support client engagement, community engagement, and may support a multitude of department initiatives.
Name/Description:	Enrique Salazar
Position Title:	Accountant III/Staff Analyst II
Annual Salary:	\$86,466.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$374,686.00
Justification:	This position will support the department with grants and contracts, their development and administration.
Name/Description:	Katherine Hayes

Position Title:	Human Resources Business Partners II
Annual Salary:	\$132,704.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$575,051.00
Justification:	This position will support the department with HR guidance in relation to all aspects of HR.
Name/Description:	Human Resources Analyst I
Position Title:	Human Resources Analyst I
Annual Salary:	\$98,155.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$425,338.00
Justification:	This position will support the department with HR classification and recruitment in relation to HR.
Name/Description:	Business Systems Analyst II
Position Title:	Business Systems Analyst II
Annual Salary:	\$102,648.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$444,808.00
Justification:	These positions will provide high level support and oversight of new system (Finance, HR, IT, Data, and/or EHR) implementation.
Name/Description:	Business Systems Analyst II
Position Title:	Business Systems Analyst II
Annual Salary:	\$102,648.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$444,808.00
Justification:	These positions will provide high level support and oversight of new system (Finance, HR, IT, Data, and/or EHR) implementation.
Name/Description:	Automated Systems Analyst II
Position Title:	Automated Systems Analyst II
Annual Salary:	\$95,451.00
In Kind:	No
Time (%):	100.00
Months:	52
Amount Requested:	\$413,621.00
Justification:	This position will provide analyst support to the implementation of new system (Finance, HR, IT, Data, and/or EHR).
Name/Description:	Automated Systems Technician
Position Title:	Automated Systems Technician
Annual Salary:	\$64,438.00
In Kind:	No
	1005

Time (%):	100.00
Months:	52
Amount Requested:	\$279,231.00
Justification:	This position will provide technician support to the implementation of new system (Finance, HR, IT, Data, and/or EHR).
Fringe Benefits Amount Requested:	\$4,472,298.00
Fringe Benefit:	Retirement - County match Survivor's Benefits Retirement - employee portion SDI/Short Term Disability Medicare Workers Compensation Vision Care Grp Hlth - county portion Life Insurance Dental Ins Cafeteria Plan
Percentage of Salary:	56%
Amount Requested:	\$4,472,298.00
Justification:	
Consultant Costs Amount Requested:	\$1,318,182.00
Name of Consultant:	TBD
Organizational Affiliation:	Consultant will be affiliated with an education institution or private entity and selected via competitive procurement. The department will also explore the use of internal services, including the County Performance Education and Resources Center (PERC).
Amount Requested:	To support the department as Subject Matter Experts in relation to Public Health infrastructure implementation items of need. Each will be directly related to the grant and its objective of improving Public Health infrastructure.
Nature of Services to be Rendered:	To support the department as Subject Matter Experts on a variety of infrastructure topics and provide training and guidance to department staff as needed in relation to infrastructure improvements.
Number of Days of Consultation:	1
Method of Accountability:	Fiscal, Program, and Contract monitoring will be conducted if an outside vendor is utilized via contract.
Expected Rate of Compensation:	\$1,318,182.00
Amount Requested:	\$1,318,182.00
Justification:	To support the department as Subject Matter Experts on a variety of infrastructure topics and provide training and guidance to department staff as needed in relation to infrastructure improvements.
Equipment Amount Requested:	\$3,759,425.31
Item Requested:	Software

0 \$0.00

\$1,759,426.31

Number Needed:

Amount Requested:

Unit Cost:

Justification:	The department is attempting to bridge the gap between multiple clinics and the County hospital, by creating interoperability. Software improvements will be for Public Health Finance, HR, IT, and Data Systems, specifically implementation of a new EHR. EHR software costs will include software modules to operate an effective Federally Qualified Health Center (FQHC) and meet Federal, State, and Local reporting requirements, as well as meet the needs of our California Children Services (CCS) program. Software systems to be evaluated for integration will include EPIC, Dentrix, Orchard, Beaker, Synapse, Radiant, and others. The department will also seek a software solution to track and address social determinants of health, homelessness, and Whole Person Care.
Item Requested:	Hardware
Number Needed:	0
Unit Cost:	\$0.00
Amount Requested:	\$1,800,000.00
Justification:	The department is attempting to bridge the gap between multiple clinics and the County hospital, by creating interoperability. System Improvements will be for Public Health Finance, HR, IT, and Data Systems, specifically implementation of a new EHR. HER hardware costs will include Hardware components to operate an effective Federally Qualified Health Center (FQHC) and meet Federal, State, and Local reporting requirements, as well as meet the needs of our California Children Services (CCS) program. Hardware components to be evaluated for integration will include EPIC, Dentrix, Orchard, Beaker, Synapse, Radiant, and others. The department will also seek hardware components to support tracking and address social determinants of health, homelessness, and Whole Person Care.
Item Requested:	Software - Questica
Number Needed:	0
Unit Cost:	\$0.00
Amount Requested:	\$199,999.00
Justification:	Software improvements will be for Public Health Finance

Supplies Amount Requested:	\$248,600.00
Item Requested:	General Office Supply
Supply Type:	Pens, pencils, paper, Toner, non-inventoriable equipment, etc. to support new staff and their onboarding needs.
Number Needed:	22
Unit Cost:	\$7,800.00
Amount Requested:	\$171,600.00
Justification:	Office supplies and computer workstations will be used by staff members to carry out daily activities in alignment with the grant and its intent to improve Public Health infrastructure, including general office supplies and computers needs by new staff.
Item Requested:	Computer Workstation
Supply Type:	Computer setup for new staff (Laptop/Computer, Monitor, Printer, Keyboards, etc.) to support their grant deliverable work.
Number Needed:	22
Unit Cost:	\$3,500.00
Amount Requested:	\$77,000.00
Justification:	Office supplies and computer workstations will be used by staff members to carry out daily activities in alignment with the grant and its intent to improve Public Health infrastructure, including general office supplies and computers needs by new staff.

Out of State Travel Amount Requested:	\$15,000.00	
Budget Line Item:	BLI-58575	
Trips		
Number of Trips:	5	
Number of People:	1	
Cost of Airfare:	\$850.00	
Number of Miles:	0	
Cost per Mile:	\$0.00	
Amount Requested:	\$4,250.00	
Per Diem and Lodging		
Per Diem or Lodging:	Per Diem and Lodging	
Number of People:	1	
Number of Units:	5	
Unit Cost:	\$1,750.00	
Amount Requested:	\$8,750.00	
Ground Transportation		
Ground Transportation:	Yes	
Number of People:	1	
Amount Requested:	\$2,000.00	
Justification:	Travel funds will be used for staff to travel to CDC recommended, relevant, or required events, specifically reverse site visits/grantee meetings, including transportation, food, lodging, and other ancillary costs.	

Other Amount Requested:	\$531,000.00	
Item Requested:	Communications Cost	
Type of Cost:	Unit Cost	
Estimated Unit or Monthly Cost:	\$3,850.00	
Amount Requested:	\$231,000.00	
Justification:	This line item represents the five-year cost associated with department communication charges. This may include internet service fee, virtual private network, and any other communication related cost that supports activities deemed necessary to communicate with program stakeholders and improve Public Health infrastructure in relation to the grant.	
Item Requested:	Advertising	
Type of Cost:	Monthly Cost	
Estimated Unit or Monthly Cost:	\$0.00	
Amount Requested:	\$300,000.00	
Justification:	This line item represents the five-year cost associated with advertising in relation to improving Public Health infrastructure (recruitment, etc.). This may include internet, print, visual, and audio, each presented in a culturally appropriate medium to attract appropriate candidates that reflect the community served. Will also include social media marketing and promotion of positions at colleges, universities, and throughout the County to targeted individuals.	

**Contractual Costs Amount Requested: \$0.00** 

Indirect Costs Amount Requested:	\$1,453,724.69
NICRA:	
Indirect Cost Rate:	10%

Amount Requested: Justification:

\$1,453,724.69

CDC approved 10% Indirect Cost of modified total direct cost (MTDC). Modified Total Direct Cost (MTDC) means all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs.

Total Direct Costs \$18,296,670.31

Total Indirect Costs \$1,453,724.69

Total Direct & Indirect Costs \$19,750,395.00

### OE22-2203 Budget Narrative Report: San Bernardino, County of Strategy A2: Foundational Capabilities

Personnel Amount Requested:	\$448,326.00	
Name/Description:	Vacant	
Position Title:	Community Health Worker	
Annual Salary:	\$51,730.00	
In Kind:	No	
Time (%):	100.00	
Months:	52	
Amount Requested:	\$224,163.00	
Justification:	These positions will support client engagement, community engagement, and may support a multitude of department initiatives.	
Name/Description:	Vacant	
Position Title:	Community Health Worker	
Annual Salary:	\$51,730.00	
In Kind:	No	
Time (%):	100.00	
Months:	52	
Amount Requested:	\$224,163.00	
Justification:	These positions will support client engagement, community engagement, and may support a multitude of department initiatives.	
Fringe Benefits Amount Requested:	\$252,139.00	
Fringe Benefit:	Retirement - County match Survivor's Benefits Retirement - employee portion SDI/Short Term Disability Medicare Workers Compensation Vision Care Grp Hlth - county portion Life Insurance Dental Ins Cafeteria Plan	
Percentage of Salary:	56%	
Amount Requested:	\$252,139.00	
Justification:		
Consultant Costs Amount Requested:	\$0.00	
Equipment Amount Requested:	\$0.00	
Supplies Amount Requested:	\$0.00	
In-State Travel Amount Requested:	\$0.00	
Out of State Travel Amount Requested:	\$0.00	
Other Amount Requested:	\$176,764.00	
Item Requested:	Annual Accreditation fee, as required by PHAB	

Type of Cost:	Unit Cost	
Estimated Unit or Monthly Cost:	\$70,000.00	
Amount Requested:	\$70,000.00	
Justification:	Fees at \$14,000 per year for 5 years, as required by PHAB. This will allow the department to seek and obtain annual reaccreditation. By retaining national accreditation status, the department will be able to qualify for additional grants and better serve the community and constituents.	
Item Requested:	Public Health Alliance of Southern California	
Type of Cost:	Unit Cost	
Estimated Unit or Monthly Cost:	\$106,764.00	
Amount Requested:	\$106,764.00	
Justification:	This will allow the department to seek and obtain annual reaccreditation. By retaining national accreditation status, the department will be able to qualify for additional grants and better serve the community and constituents.	

### Contractual Costs Amount Requested: \$0.00

Indirect Costs Amount Requested:	\$87,722.00	
NICRA:		
Indirect Cost Rate:	10%	
Amount Requested:	\$87,722.00	
Justification:	CDC approved 10% Indirect Cost of modified total direct cost (MTDC). Modified Total Direct Cost (MTDC) means all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs.	

Total Direct Costs	\$877,229.00
Total Indirect Costs	\$87,722.00
Total Direct & Indirect Costs	\$964,951.00

### OE22-2203 Budget Narrative Report: San Bernardino, County of Strategy A2: Foundational Capabilities

Personnel Amount Requested:	\$108,538.00	
Name/Description:	Community Health Worker	
Position Title:	Community Health Worker	
Annual Salary:	\$54,269.00	
In Kind:	No	
Time (%):	100.00	
Months:	12	
Amount Requested:	\$54,269.00	
Justification:	Community Health Workers are expected to be hired by December 30, 2023. They will support community engagement and a multitude of department health equity initiatives, specifically with a focus on improving health equity across the county.	
Name/Description:	Community Health Worker	
Position Title:	Community Health Worker	
Annual Salary:	\$54,269.00	
In Kind:	No	
Time (%):	100.00	
Months:	12	
Amount Requested:	\$54,269.00	
Justification:	Community Health Workers are expected to be hired by December 30, 2023. They will support community engagement and a multitude of department health equity initiatives, specifically with a focus on improving health equity across the county.	
Fringe Benefits Amount Requested:	\$53,108.00	
Fringe Benefit:	Retirement - County match Survivor's Benefits Retirement - employee portion SDI/Short Term Disability Medicare Workers Compensation Vision Care Grp Hlth - county portion Life Insurance Dental Ins Cafeteria Plan	
Percentage of Salary:	49%	
Amount Requested:	\$53,108.00	
Justification:	Refers to non-wage compensation provided to employees such as, but not limited to, employer paid insurances, paid leaves, tuition reimbursement, Medical Emergency Leave, Voluntary Time Off, and Opt-out/Waive amounts.	
Consultant Costs Amount Requested:	\$300,000.00	
Name of Consultant:	TBD	
Organizational Affiliation:	Consultant will be affiliated with an organization competent and experienced with assessment and/or performance management in relation to population health and be selected via competitive procurement or another approved	

county process.

Amount Requested:	Each consultant will provide Public Health infrastructure support to the department in relation to our foundational capabilities.	
Nature of Services to be Rendered:	One or more consultants will support the department as Subject Matter Experts on a variety of infrastructure topics as they relate to our foundational capabilities. Specifically, these topics may cover assessment, performance management, and data dashboard development in relation to population health.	
Number of Days of Consultation:	365	
Method of Accountability:	Fiscal, Program, and Contract monitoring will be conducted if an outside service vendor is utilized via contract.	
Expected Rate of Compensation:	\$821.92	
Amount Requested:	\$300,000.00	
Justification:	The department will conduct a clinic assessment of our 3 physical clinics to assess the efficiency, effectiveness, and appropriateness of client services as they relate to FQHC requirement and adjust service provision based on results. The Department estimates a cost of \$821.92 per day for 365 days.	
Equipment Amount Requested:	\$1,110,440.00	
Item Requested:	Mobile Medical Clinics	
Number Needed:	2	
Unit Cost:	\$450,000.00	
Amount Requested:	\$900,000.00	
Justification:	Procurement of 2 Mobile Medical Clinics to support health equity efforts. These mobile units will support the delivery of grant related work under Strategy A2, Foundational Capabilities, providing healthcare access to remote areas of our over 20,000 square miles and our 2,195,000 population, many with limited healthcare access. The mobile medical clinics will allow the department to enter high-need and rural areas and reach populations that typically do not have access to healthcare services. Secondarily, they will be used as mobile distribution sites for health education material, outreach to unhoused individuals, and moved throughout the county during emergency operations. The San Bernardino County Department of Public Health (DPH) will have an invitation to Bid through our ePro system. If less than three bids are submitted due to the specialized scope of work, DPH will provide a justification. Also, If the higher bidder is selected DPH will provide a justification. A more detailed justification letter is attached, which describes lease vs. purchase, accountability, and disposition/disposal.	
Item Requested:	Software - Government Risk and Compliance (GRC) system and Software - Health Information Exchange (HIE)	
Number Needed:	1	
Unit Cost:	\$210,440.00	
Amount Requested:	\$210,440.00	
Justification:	The department seeks to purchase and implement a Government Risk and Compliance system to automate and standardize compliance across the department. The department estimates it will cost \$150,000 to purchase and implement the software.  The department seeks to support a Health Information Exchange (HIE) that will allow for sharing of information across departments including clinic operations and our medical center. This HIE will supplement our EHR, but no take the place of. The department estimates a cost of \$60,440.	
Supplies Amount Requested:	\$0.00	
In-State Travel Amount Requested:	\$0.00	

Requested:		
Other Amount Requested:	\$64,000.00	
Item Requested:	Annual Accreditation fee, as required by PHAB	
Type of Cost:	Unit Cost	
Estimated Unit or Monthly Cost:	\$14,000.00	
Amount Requested:	\$14,000.00	
Justification:	The department will seek and obtain reaccreditation in 2024. Reaccreditation helps us document and showcase our commitment to community health and demonstrates that we are meeting rigorous standards to the community, policy makers, and grantors. Fees cost is \$14,000 per year, as required by PHAB. This will allow the department to seek and obtain annual reaccreditation. By retaining national accreditation status, the department will be able to qualify for additional grants and better serve the community and constituents.	
Item Requested:	Public Health Alliance of Southern California	
Type of Cost:	Unit Cost	
Estimated Unit or Monthly Cost:	\$30,000.00	
Amount Requested:	\$30,000.00	
Justification:	This will allow the department to seek and obtain annual reaccreditation. By retaining national accreditation status, the department will be able to qualify for additional grants and better serve the community and constituents.	
Item Requested:	Professional Services	
Type of Cost:	Unit Cost	
Estimated Unit or Monthly Cost:	\$20,000.00	
Amount Requested:	\$20,000.00	
Justification:	The San Bernardino County Central Imaging department will provide scanning services and electronic filing to the DPH Payroll Department. The Central Imaging department will scan and centralize all DPH personnel files in an online location. This will reduce manual document management and improve department operations, Data safety, and collaboration. The Department estimates to scan 18,300 documents for approximately 1,220 employee files. Each page scan by central imaging will have an estimated cost of \$0.84.	

\$0.00

#### Contractual Costs Amount Requested: \$0.00

**Out of State Travel Amount** 

Indirect Costs Amount Requested:	\$52,565.00	
NICRA:		
Indirect Cost Rate:	10%	
Amount Requested:	\$52,565.00	
Justification:	CDC approved 10% Indirect Cost of modified total direct cost (MTDC). Modified Total Direct Cost (MTDC) means all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs	

Total Direct Costs	\$1,636,086.00
Total Indirect Costs	\$52,565.00

### OE22-2203 BP1 Progress Report: San Bernardino, County of

Strategy Number:

Strategy A1: Workforce

**Activity Name:** 

Dedicate at least 1.0 FTE for program evaluation and

performance measures for al

**Activity Focus:** 

Strengthen support for implementation of this grant

**Expected Outcomes/Outputs:** 

Successes:

Employment contract template in development.

**Challenges:** 

Not yet approved or filled.

Support for Recipients:

Milestone:

Hire Workforce Evaluation Director or similar capacity (Program Specialist II) to fulfill the role of conducting evaluation in related to the grant and other Workforce Development activity. This position will work collaboratively with the department Health Equity Manager, Workforce Development staff, and across the department.

Responsible Party:

Department of Public Health

**Criteria for Completion:** 

Filling of position to support both the grant, in terms of evaluation, and Project Director with administering the grant (reports in relation to

evaluation) by November 30, 2023.

Contracts/Subawards:

Department of Public Health and HR

**Achieve-by Date:** 

11/30/2023

26-50%

Milestone Progress:
Milestone Notes/Updates:

We have a Workforce Evaluation Director (Statistical Analyst) assisting

with the grant, however she is not full-time dedicated of billing to the

grant.

**Activity Name:** 

Identify or hire a workforce development coordinator

**Activity Focus:** 

Strengthen support for implementation of this grant

**Expected Outcomes/Outputs:** 

Successes:

Filled 12-1-23

Challenges:

Support for Recipients:

Milestone:

Hire Workforce Development Director or similar capacity (Coordinator or Manager) that will work collaboratively with the department Health Equity Manager, Workforce Development staff, and across the department. This position will also focus on grant administration.

Responsible Party:

Department of Public Health

**Criteria for Completion:** 

Filling of position and maintaining filled position, as the position is now

filled.

Contracts/Subawards:

Department of Public Health and HR

Achieve-by Date:

1/1/2023

**Milestone Progress:** 

100%

Milestone Notes/Updates:

A Workforce Development Director (Program Manager) is now in place,

effective December 1, 2022.

**Activity Name:** 

Workforce - Recruit and Hire

**Activity Focus:** 

Recruit and hire staff

**Expected Outcomes/Outputs:** 

Successes:

Several employment contract templates are under development.

Challenges:

These employment contracts are not yet approved.

Support for Recipients:

Milestone:

Hire all staff as detailed in the Budget Narrative and Hiring Plan.

Responsible Party:

Department of Public Health

**Criteria for Completion:** 

Filling of all positions as detailed in the Budget Narrative and Hiring

Plan by the end of the grant term, November 30, 2027.

Contracts/Subawards:

Department of Public Health and HR

Achieve-by Date:

11/30/2027

**Milestone Progress:** 

1-25%

Milestone Notes/Updates:

Contract templates are being developed for the majority of positions. They are in development, but have not yet been board approved, which

is required prior to implementation.

**Activity Name:** 

Workforce - Retain

**Activity Focus:** 

Retain staff

**Expected Outcomes/Outputs:** 

Successes:

We are now tracking our department retention rate.

Challenges:

The process is complex, with multiple queries.

Support for Recipients:

Milestone:

Retain department staff, evident by maintaining or improving the current number of staff as of 1/9/23 vs. the grant end date and throughout.

Responsible Party:

Department of Public Health

**Criteria for Completion:** 

Sustained number of filled positions. This will be tracked over time and

throughout the grant term.

Contracts/Subawards:

Department of Public Health and HR

Achieve-by Date:

11/30/2027

**Milestone Progress:** 

1-25%

Milestone Notes/Updates:

Our first retention rate was reported on 8/1/23 and will be tracked over

time to determine if it worsens, maintains, or improves.

**Activity Name:** 

Workforce - Systems

**Activity Focus:** 

Strengthen workforce-related planning, systems, processes, and

policies

**Expected Outcomes/Outputs:** 

Successes:

We will soon be implementing a new budget system.

Challenges:

We have not yet moved forward with EHR implementation.

Support for Recipients:

Milestone:

Improvement to systems such as those used by, or in relation to HR, IT,

Fiscal, Data, specifically implementation of a department Electronic

Health Record (EHR) system.

**Responsible Party:** 

Department of Public Health

**Criteria for Completion:** 

Improvements to HR, IT, Fiscal, or Data systems with a specific desire to implement a new EHR. This will be tracked and reported throughout

the term of the award, through November 30, 2027.

Contracts/Subawards:

Department of Public Health

Achieve-by Date:

11/30/2027

**Milestone Progress:** 

1-25%

Milestone Notes/Updates:

The department is exploring a new EHR and Finance/Budget system.

**Activity Name:** 

Workforce - Training

**Activity Focus:** 

Train staff

**Expected Outcomes/Outputs:** 

Successes:

Many trainings are taking place, however, not being billed to the grant.

Challenges:

We are looking to conduct trainings applicable and billable to the grant.

Support for Recipients:

Milestone:

Provide various trainings to department staff which may include topics of Program Planning, Grant Writing, Budgeting, Data Analytics, System Thinking, Mental Health, Stress Management, Equity, Diversity, Inclusion, Leadership, Communication, Community Engagement, Evaluation, Resiliency, Cultural Competency, Customer Service, Motivation, and Teamwork.

Responsible Party:

Department of Public Health

**Criteria for Completion:** 

Number of trainings provided will be tracked over time and throughout

the term of the award through November 30, 2027.

Contracts/Subawards:

Department of Public Health

Achieve-by Date:

11/30/2027

Milestone Progress:

1-25%

Milestone Notes/Updates:

Several training have taken place for department staff, however, not

funded by this grant.

### OE22-2203 BP1 Progress Report: San Bernardino, County of

Strategy Number: Strategy A2: Foundational Capabilities

Activity Name: Foundational Capabilities - Accreditation

Activity Focus: Accountability/Performance Management/Agency Accreditation

**Expected Outcomes/Outputs:** 

Support for Recipients:

Successes: Our annual fee payment has been made.

Challenges: NA

Milestone: Achieve Reaccreditation via the Public Heath Accreditation Board.

Responsible Party: Department of Public Health and Accreditation Staff

Criteria for Completion: Reaccreditation, which will allow the department to maintain its current

status and eligibility for specific funding allocations by June 30, 2024.

Contracts/Subawards: Department and Public Health Accreditation Board

Achieve-by Date: 6/30/2024

Milestone Progress: 1-25%

Milestone Notes/Updates: Documentation for reaccreditation is being gathered and an anticipated

applicational is scheduled for March of 2024.

Activity Name: Foundational Capabilities - Community Health Workers

Activity Focus: Equity in Organizational Competencies

**Expected Outcomes/Outputs:** 

Successes: Employment contract templates are under development.

**Challenges:** These templates have not yet been approved.

Support for Recipients:

Milestone: A comprehensive Community Health Improvement Plan will still take

place via the Community Vital Signs initiative, this items is now to hire two CHWs to support client engagement, community engagement, and

a multitude of department equity initiatives.

Responsible Party: Department of Public Health and Health Equity Program

Criteria for Completion: Filling of two CHW positions to support client engagement, community

engagement, a multitude of department equity initiatives, and

specifically equity. One by November 30, 2023, and one by the end of

the grant term, November 30, 2027.

Contracts/Subawards: Department of Public Health and HR

Achieve-by Date: 6/30/2024

Milestone Progress: 1-25%

Milestone Notes/Updates:

Contract templates for these two positions are being developed, but have not yet been board approved, which is required prior to implementation.

### OE22-2203 BP2 Workplan: San Bernardino, County of

Strategy Number: Strategy A2: Foundational Capabilities

Activity Name: 2 Community Health Workers

Activity Focus: Equity in Organizational Competencies

Expected Both Community Health Workers are expected to be hired by December

30, 2023. They will support community engagement and a multitude of department health equity initiatives, including our Health Equity Program

and Public Health Ambassadors.

Milestone: The hiring of 2 Community Health Workers (CHWs)

Responsible Party: Scott Rigsby

**Outcomes/Outputs:** 

Criteria for Completion: Success will be measured by hiring (yes/no) two CHWs to support grant

objectives.

**Contracts/Subawards:** No sub awards will be made within this milestone.

**Achieve-by Date:** 12/30/2023

Activity Name: Develop a performance management system (or data

dashboard).

Activity Focus: Accountability/Performance Management/Agency Accreditation

**Expected**The department seeks to develop a performance management system (or

Outcomes/Outputs: data dashboard) that can be used to share vital public health information

internally and with the public.

Milestone: Develop a performance management system (or data dashboard).

Responsible Party: Scott Rigsby

Criteria for Completion: Success will be measured by procurement, development, and

implementation (yes/no) of a performance management system (or data

dashboard) within the grant term.

**Contracts/Subawards:** A sub award (consultant) is TBD and detailed within our budget narrative.

**Achieve-by Date:** 11/30/2024

Activity Name: Government Risk and Compliance system

Activity Focus: Accountability/Performance Management/Agency Accreditation

**Expected**The department seeks to purchase and implement a Government Risk

Outcomes/Outputs: and Compliance system to automate and standardize compliance across

the department.

Milestone: Government Risk and Compliance (GRC) system

Responsible Party: Scott Rigsby

Criteria for Completion: Success will be measured by the purchase, implementation, and usage

(yes/no) of a GRC solution for the department.

Contracts/Subawards: A sub award (equipment - software) is TBD and detailed in our budget

narrative.

Achieve-by Date: 11/30/2024

Activity Name: Health Information Exchange (HIE)

Accountability/Performance Management/Agency Accreditation **Activity Focus:** 

The department seeks to support a Health Information Exchange (HIE) Expected

**Outcomes/Outputs:** that will allow for sharing of information across departments including clinic

operations and our medical center. This HIE will supplement our EHR, but

not take the place of.

Health Information Exchange (HIE) Milestone:

Responsible Party: Scott Rigsby

Success will be measured by support or utilization of (yes/no) a Health **Criteria for Completion:** 

Information Exchange for sharing across departments.

A sub award (equipment - software) is TBD and included in our budget Contracts/Subawards:

narrative.

Achieve-by Date: 11/30/2024

**Activity Name:** Mobile Medical Clinic

**Activity Focus:** Equity in Organizational Competencies

These mobile units will support the delivery of grant related work under **Expected Outcomes/Outputs:** 

Strategy A2, Foundational Capabilities, providing healthcare access to remote areas of our over 20,000 square miles and our 2,195,000

population, many with limited healthcare access.

Purchase 2 Mobile Medical Clinics. Milestone:

Responsible Party: Scott Riasby

Success will be measured by procuring and purchasing 2 Mobile Medical **Criteria for Completion:** 

Clinics (yes/no) and service provision to the community by the end of the

grant term. A detailed justification letter is attached.

One sub award (for equipment - two units) is TBD and detailed within our Contracts/Subawards:

budget.

Achieve-by Date: 11/30/2024

**Activity Name:** Performance Management

Accountability/Performance Management/Agency Accreditation **Activity Focus:** 

The department will conduct a clinic assessment of our 3 physical clinics Expected to assess the efficiency, effectiveness, and appropriateness of client Outcomes/Outputs:

services as they relate to FQHC requirement and adjust service provision

based on results.

Milestone: Complete a clinic assessment.

Responsible Party: Scott Rigsby

Success will be measured by completion of the assessment (yes/no) and **Criteria for Completion:** 

implementation of results.

Contracts/Subawards: Sub award (consultant) TBD is detailed in our budget narrative.

Achieve-by Date: 11/30/2024

Public Health Alliance **Activity Name:** 

Organizational Administrative Competencies **Activity Focus:** 

The department will maintain membership in the Public Health Alliance of **Expected** Southern California which affords many benefits to the department and Outcomes/Outputs:

community, including access to training and executive level regional

advice.

Milestone: Sustained Public Health Alliance Membership

Responsible Party: Scott Rigsby

Criteria for Completion: Success will be measured by payment to (yes/no) and usage of (yes/no)

the Public Health Alliance within the grant term.

**Contracts/Subawards:** No sub awards will be made under this milestone.

**Achieve-by Date:** 11/30/2024

Activity Name: Reaccreditation

Activity Focus: Accountability/Performance Management/Agency Accreditation

**Expected** The department will seek and obtain reaccreditation in 2024.

Outcomes/Outputs: Reaccreditation helps us document and showcase our commitment to

community health and demonstrates that we are meeting rigorous

standards to the community, policy makers, and grantors.

Milestone: Reaccreditation

Responsible Party: Scott Rigsby

Criteria for Completion: Success will be measured by the department obtaining reaccreditation in

2024 (yes/no) and reported this to the CDC.

Contracts/Subawards: No sub awards will be made under this milestone.

Achieve-by Date: 11/30/2024

OE22-2203 Performance Measure Report: San Bernardino, County of RP-1

### MEASURE: HIRING

Job Classification Y1 Goal Y5 Goal / Program Area	Y1 Goal	Y5 Goal	Recipient Agency Current Employees	Recipient Agency Recipient Agency New Hires Total Positions	Recipient Agency Total Positions	LHD Funded Current Employees	LHD Funded New Hires	LHD Funded Total Positions
Agency leadership and management	<del></del>	m	<del>-</del>		. <del></del>			0
Program Manager						e man mandy transcription on department of the control of the cont	The state of the s	0
Business, improvement, and financial operations staff	<del></del>	<del></del>	-		•			0
Office and administrative support staff	m	4			manufacture and administration of the control of th			0
Information technology and data system staff	m	4			0		Commission of the commission o	
Public information, communication, and policy staff	0	0	THE TAX PROPERTY AND ADMINISTRATION OF THE TAX PROPERTY ADMINISTRATION OF TH		0			0
Laboratory workers	0	0			0			0
Epidemiologists, statisticians, data scientists, other data analysts	0	. <b>O</b>			0			0
Behavioral health and social services staff	0	0			0			0

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Community health workers and health educators	Public health physician, nurse and other health care providers	Preparedness staff	Environmental health workers	Animal control and compliance/inspe ction staff	Other Job Classification	Access to and Linkage with Clinical Care	Accountability and Performance Management	Assessment and Surveillance	Chronic Disease & Injury Prevention	Communicable Disease Control	Communications	Community Partnership Development
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Emergency Preparedness and Response	0	O		0	
Environmental Public Health	0			0	0
Equity				0	
Maternal, Child, and Family Health	0	0		0	0
Organizational Competencies	0	0		0	
Policy Development and Support				• • • • • • • • • • • • • • • • • • •	
Other Program Area	2	8		0	
Adheres to Established Definitions?		Agency Priority?	Data Limitations?	Questionable or Low Quality Data?	Additional Context / Information
Yes		Yes	9 N	NA	NA

## **MEASURE: HIRING TIMELINESS**

	Minimum Days to Fill Position 26	Ö
<u> </u>	Dat	Agency Data Priority? Limitations?
2	8	Yes

## **MEASURE: RETENTION**

RETENTION RATE, INCLUDING PERMANENT AND TEMPORARY/CONTRACT STAFF

Staff on Last Day of Reporting Period	ting Period	New Hires During Period	During Reporting Period	Staff on First Day of Reporting Period	ing Retention Rate including LTEs	luding LTEs
962 RETENTION RATE FOR PERMANENT STAFF ONLY	NT STAFF ONLY	139		638	87.65	
Staff on Last Day of Reporting Period	ting Period	New Hires During Period 94	During Reporting Period 94	Staff on First Day of Reporting Period 728	ing Retention Rate for Permanent Staff 97.25	Permanent
Adheres to Established Definitions?	Agency Priority?	Data Limitations? No	Questionable	Questionable or Low Quality Data?	Additional Context / Information	rmation

# **MEASURE: PROCUREMENT TIMELINESS**

Minimum Days from Procurement to Contract	om ntract	Median D Procurement	Median Days from ocurement to Contract	Maximum Days from Procurement to Contract	rom intract	Number of Procurements
259		36	302	404		2
Adheres to Established Definitions?	Agency Priority?	Data Limitations?	Questionable o	Questionable or Low Quality Data?	Additio	Additional Context / Information
Yes	Yes	ON		NA	Data was expected, bu	Data was more difficult to obtain than expected, but we will anticipate that for next
						quarter.

## **MEASURE: ACCREDITATION**

### **Accreditation Status**

Accredited: My agency has achieved initial accreditation and plans to, or is in the process of, applying for re-accreditation

formation		
Additional Context / Information	:	AN
Onestionable or Low Ouality Data?		AN
Data	Limitations?	o Z
Agency	Priority?	Yes
Adheres to Established Ager	Definitions?	Yes

# **MEASURE: KEY WORKFORCE POSITIONS**

<b>Key Position Type</b>	Key Position Status	Hire Date	Additional Context
DMI Director/Coordinator	Position Will Not Be Filled		
Evaluation Lead	Job Not Yet Posted		Employment contract template being developed. M. Garcia assisting.
Workforce Director	Hired Internal Candidate	12/1/2022	S. Rigsby



### Public Health Administration

Joshua Dugas, MBA, REHS Director

> Jennifer Osorio, REHS **Assistant Director**

> > Janki Patel, MPH **Assistant Director**

Michael A. Sequeira, M.D. Health Officer

September 13, 2023

Paddy Asgari, MPH CPH Public Health Advisor and Project Officer Centers for Disease Control and Prevention Center for Surveillance, Epidemiology, and Laboratory Services

Ms. Asgari:

Please allow this correspondence to support our proposed budget to purchase two Mobile Medical Clinics utilizing Strategy A2, Foundational Capabilities, funds.

Two Mobile Medical Clinics are needed to cover San Bernardino County's geographic area of over 20,000 square miles. This is greater than the combined land mass of the states of Connecticut, Delaware, New Jersey, and Rhode Island. Most of the County's area is expansive rural desert. This presents significant challenges for thousands of rural residents who do not have equitable access to healthcare due to a shortage of providers, lack of transportation, lack of insurance, low health literacy, and other social determinants that result in health disparities. It can take over three hours for residents in remote communities to drive to urban centers for healthcare services. Strategically scheduling and operating two mobile clinic units throughout remote desert and mountain communities, as well as low-income urban neighborhoods, will allow us to more efficiently and equitably expand service delivery to individuals who are disproportionately impacted by health disparities.

These mobile units will support the delivery of grant related work under Strategy A2, Foundational Capabilities. Activities may include primary care, clinical community assessments, testing, vaccination, oral healthcare, and field investigations. They may also be used for personal protective equipment distribution, marketing for public health services, and other allowable activities, all with a specific emphasis on improving health equity.

We are estimating the cost of each unit to be \$450,000 based on informal quotes, recent research, and a tour of a factory that manufactures many of the mobile clinics in use today. We are budgeting \$900,000 to purchase them, since the customization required to meet our needs is not available in a lease option.

Three bids are not available at this time because the County's formal procurement process, which entails approval from our Board of Supervisors, will not be completed before the deadline to submit our Non-Competing Continuation application. However, three formal bids will be obtained upon approval of this proposal from the Centers for Disease Control and Prevention (CDC).

Each unit will be parked in a secure, locked, or monitored facility and routine maintenance will be conducted. Appropriate insurance and registration will be maintained. They will be restricted for official use only by staff authorized and trained to operate them. We will monitor use through tracking logs and check in/out procedures.

They will be utilized for the term of the grant. In accordance with Code of Federal Regulations (CFR) 75.318 and at the discretion of the CDC, at the end of the grant term, the County will continue to operate the units in alignment with the original grant terms. All costs beyond the term of the grant will be absorbed by the County. Upon reaching the end of their useful life, the units will be disposed or sent to County Surplus Property in accordance with County policy.

Acquiring two mobile medical clinics will help us to meet grant objectives and enhance health equity by improving access to healthcare in traditionally difficult to reach communities within the enormous geographic size of San Bernardino County.

We continue to appreciate the CDC's willingness to work with us as we address our infrastructure needs. Should you have any questions regarding this document, please contact our Strategic Alignment staff at (909) 841-5088.

Sincerely,

Paul Chapman

Chief Financial Officer