



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST BUDGET MODIFICATION

(revised 12/31/09)

Board Clerk Use Only

Meeting Date: 4/15/2010

Agenda Item #: R-9

Est. Start Time: 10:45 AM

Date Submitted: 3/22/2010

BUDGET MODIFICATION: HD-10-27

**BUDGET MODIFICATION - HD-27 - Request approval to appropriate
Agenda \$249,942 in additional revenue from Oregon Health and Science University –
Title: HIV Testing and Counseling Grant.**

Note: For all other submissions (i.e. Notices of Intent, Ordinances, Resolutions, Orders or Proclamations) please use the APR short form.

| | | | |
|-------------------------|---|------------------------|------------------------------|
| Requested Meeting Date: | April 8, 2010 | Amount of Time Needed: | 5 MIN |
| Department: | Health Department | Division: | Human Resources |
| Contact(s): | Lester A. Walker - Budget and Finance Manager | | |
| Phone: | (503) 988-3663 | Ext. | 26457 I/O Address: 167/2/210 |
| Presenter(s): | Kim Toeve – HIV / Hepatitis C Program Manager | | |

General Information

1. What action are you requesting from the Board?

Approval of appropriation of \$249,942 in additional funding from the Oregon Health and Science University – HIV Testing and Counseling Grant.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

This budget modification will add funding to the STD Program for a two year grant funded by the American Recovery and Reinvestment Act via the National Institute on Drug Abuse and coordinated at the national level by the University of Miami. This grant funds a multi-site study at several clinics throughout the country to assess the impact of client-centered prevention counseling on the incidence of STDs and sexual risk behaviors six months after the counseling. Locally, the Health Department is working in partnership on this grant with Oregon Health and Science University.

The grant funds STD testing for approximately 550 clients seeking services at the STD clinic. Tests include the rapid HIV test; tests for chlamydia, gonorrhea, syphilis, herpes type 2 serology; and trichomonas tests for women. Clients will be recruited at their initial visit to the clinic and after completing a computer questionnaire will be randomized into two groups, one group receiving a specific prevention counseling intervention and the other group receiving information only. Clients will be asked to return in six months to complete the computer questionnaire again and receive another round of STD and HIV testing. The STD program will continue to provide these clients with other indicated tests not included in the study, treatments, and Disease Intervention Specialist partner notification services. Data collected in this study will help inform the development of effective prevention interventions to reduce risky behaviors and the transmission of HIV and other sexually transmitted diseases.

This budget modification impacts Program Offer 40011 – STD/HIV/Hep C Community Prevention Program. HIV, STDs and Hepatitis C account for almost 80 percent of all reportable diseases in the County. This cost-effective program prevents epidemics seen in other west coast cities by controlling disease spread using evidence-based prevention interventions and STD treatment for those at highest risk.

3. Explain the fiscal impact (current year and ongoing).

Approval of this budget modification will increase the Health Department's federal/state FY10 budget by \$249,942.

4. Explain any legal and/or policy issues involved.

N/A

5. Explain any citizen and/or other government participation that has or will take place.

Oregon Health and Science University (OHSU) is coordinating the study in our area. We are receiving the funds through a contract with OHSU. In coordination with OHSU, the study protocol has been reviewed and approved by our local Institutional Review Board.

ATTACHMENT A

Budget Modification

If the request is a **Budget Modification**, please answer all of the following in detail:

- **What revenue is being changed and why? If the revenue is from a federal source, please list the Catalog of Federal Assistance Number (CFDA).**

The Health Department's federal/state revenue budget will increase by \$249,942 in FY10 as a result of the work performed under this award.

- **What budgets are increased/decreased?**

The Health Department's budget will have the following changes:

- Temporary personnel budget will increase by \$98,401.
- Non Base Fringe budget will increase by \$29,755.
- Non Base Insurance budget will increase by \$13,476.
- Professional Services budget will increase by \$56,556.
- Printing budget will increase by \$1,000.
- Postage budget will increase by \$2,570.
- Supplies budget will increase by \$8,848.
- Medical budget supplies will increase by \$9,750.
- Travel and Training budget will increase by \$6,700.
- Local Travel/Mileage budget will increase by \$230.
- Central indirect budget will increase by \$6,217.
- Department indirect budget will increase by \$15,154.
- Internal Service Telephone budget will increase by \$1,285.

These changes will have no financial impact on the budget and do not change the Health Department's total FTE.

- **What do the changes accomplish?**

The grant funds STD testing for approximately 550 clients seeking services at the STD clinic with the goal of assessing the impact of client-centered prevention counseling on the incidence of STDs and sexual risk behaviors. Data collected in this study will help inform the development of effective prevention interventions to reduce risky behaviors and the transmission of HIV and other sexually transmitted diseases.

- **Do any personnel actions result from this budget modification? Explain.**

No permanent FTE is added through this budget modification.

- **If a grant, is 100% of the central and department indirect recovered? If not, please explain why.**

The revenue covers these costs.

- **Is the revenue one-time-only in nature? Will the function be ongoing? What plans are in place to identify a sufficient ongoing funding stream?**

When the grant expires, the project will have been completed.

- **If a grant, what period does the grant cover? When the grant expires, what are funding plans? Are there any particular stipulations required by the grant (i.e. cash match, in kind match, reporting requirements etc)?**

The grants covers a budget period of 11/01/2009 – 08/31/2011. There are no cash match or in kind match requirements for this grant. Additionally, there are no specific reporting requirements beyond the standard ARRA terms and conditions.

NOTE: If a Budget Modification or a Contingency Request attach a Budget Modification Expense & Revenues Worksheet and/or a Budget Modification Personnel Worksheet.

ATTACHMENT B

BUDGET MODIFICATION: HD-10-27

Required Signatures

**Elected Official or
Department/
Agency Director:**

KaRin Johnson for

03-18-2010

Date:

Lillian Shirley

Budget Analyst:

Date: 03/22/10

[Signature]

Department HR:

Date: 3/17/2010

Kathleen Fuller

Countywide HR:

Date: