





Rick Scott  
Governor

H. Frank Farmer, Jr., M.D., Ph.D.  
State Surgeon General

September 8, 2011

Bradley Arnold  
County Administrator  
Board of Sumter County Commissioners  
7375 Powell Road  
Wildwood, Florida 34785



Dear Mr. Arnold,

Enclosed are (5) original copies of the Contract between the Sumter County Board of County Commissioners and the Sumter County Health Department for year 2011-2012. Please return all (5) copies once they are signed to my attention. If you have any questions, please don't hesitate to call me at (352) 793-6979, extension 248.

Sincerely,

A handwritten signature in black ink, appearing to read "Sanford D. Zelnick", with a long horizontal line extending to the right.

Sanford D. Zelnick, D.O., M.S.  
Director

Enclosures

cc: Keith Hunter, R.E.H.P., M.P.H.  
Assistant CHD Director

**CONTRACT BETWEEN  
SUMTER COUNTY BOARD OF COUNTY COMMISSIONERS  
AND  
STATE OF FLORIDA DEPARTMENT OF HEALTH  
FOR OPERATION OF  
THE SUMTER COUNTY HEALTH DEPARTMENT  
CONTRACT YEAR 2011-2012**

This agreement ("Agreement") is made and entered into between the State of Florida, Department of Health ("State") and the Sumter County Board of County Commissioners ("County"), through their undersigned authorities, effective October 1, 2011.

**RECITALS**

A. Pursuant to Chapter 154, F.S., the intent of the legislature is to "promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated county health department services."

B. County Health Departments were created throughout Florida to satisfy this legislative intent through "promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations."

C. Sumter County Health Department ("CHD") is one of the County Health Departments created throughout Florida. It is necessary for the parties hereto to enter into this Agreement in order to assure coordination between the State and the County in the operation of the CHD.

NOW THEREFORE, in consideration of the mutual promises set forth herein, the sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

1. RECITALS. The parties mutually agree that the forgoing recitals are true and correct and incorporated herein by reference.
2. TERM. The parties mutually agree that this Agreement shall be effective from October 1, 2011, through September 30, 2012, or until a written agreement replacing this Agreement is entered into between the parties, whichever is later, unless this Agreement is otherwise terminated pursuant to the termination provisions set forth in paragraph 8, below.
3. SERVICES MAINTAINED BY THE CHD. The parties mutually agree that the CHD shall provide those services as set forth on Part III of Attachment II hereof, in order to maintain the following three levels of service pursuant to Section 154.01(2), Florida Statutes, as defined below:

a. "Environmental health services" are those services which are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment which may contribute to the occurrence or transmission of disease. Environmental health services shall be supported by available federal, state and local

funds and shall include those services mandated on a state or federal level. Examples of environmental health services include, but are not limited to, food hygiene, safe drinking water supply, sewage and solid waste disposal, swimming pools, group care facilities, migrant labor camps, toxic material control, radiological health, and occupational health.

b. "Communicable disease control services" are those services which protect the health of the general public through the detection, control, and eradication of diseases which are transmitted primarily by human beings. Communicable disease services shall be supported by available federal, state, and local funds and shall include those services mandated on a state or federal level. Such services include, but are not limited to, epidemiology, sexually transmissible disease detection and control, HIV/AIDS, immunization, tuberculosis control and maintenance of vital statistics.

c. "Primary care services" are acute care and preventive services that are made available to well and sick persons who are unable to obtain such services due to lack of income or other barriers beyond their control. These services are provided to benefit individuals, improve the collective health of the public, and prevent and control the spread of disease. Primary health care services are provided at home, in group settings, or in clinics. These services shall be supported by available federal, state, and local funds and shall include services mandated on a state or federal level. Examples of primary health care services include, but are not limited to: first contact acute care services; chronic disease detection and treatment; maternal and child health services; family planning; nutrition; school health; supplemental food assistance for women, infants, and children; home health; and dental services.

4. FUNDING. The parties further agree that funding for the CHD will be handled as follows:

a. The funding to be provided by the parties and any other sources are set forth in Part II of Attachment II hereof. This funding will be used as shown in Part I of Attachment II.

i. The State's appropriated responsibility (*direct contribution excluding any state fees, Medicaid contributions or any other funds not listed on the Schedule C*) as provided in Attachment II, Part II is an amount not to exceed \$ 1,099,714 (*State General Revenue, State Funds, Other State Funds and Federal Funds listed on the Schedule C*). The State's obligation to pay under this contract is contingent upon an annual appropriation by the Legislature.

ii. The County's appropriated responsibility (*direct contribution excluding any fees, other cash or local contributions*) as provided in Attachment II, Part II is an amount not to exceed \$ 655,479 (*amount listed under the "Board of County Commissioners Annual Appropriations section of the revenue attachment*).

b. Overall expenditures will not exceed available funding or budget authority, whichever is less, (either current year or from surplus trust funds) in any service category. Unless requested otherwise, any surplus at the end of the term of this Agreement in the County Health Department Trust Fund that is attributed to the CHD shall be carried forward to the next contract period.

c. Either party may establish service fees as allowed by law to fund activities of the CHD. Where applicable, such fees shall be automatically adjusted to at least the Medicaid fee schedule.

d. Either party may increase or decrease funding of this Agreement during the term hereof by notifying the other party in writing of the amount and purpose for the change in funding. If the State initiates the increase/decrease, the CHD will revise the Attachment II and send a copy of the revised pages to the County and the Department of Health, Bureau of Budget Management. If the County initiates the increase/decrease, the County shall notify the CHD. The CHD will then revise the Attachment II and send a copy of the revised pages to the Department of Health, Bureau of Budget Management.

e. The name and address of the official payee to who payments shall be made is:

County Health Department Trust Fund  
Sumter County  
P. O. Box 98  
Bushnell, FL 33513

5. CHD DIRECTOR/ADMINISTRATOR. Both parties agree the director/administrator of the CHD shall be a State employee or under contract with the State and will be under the day-to-day direction of the Deputy State Health Officer. The director/administrator shall be selected by the State with the concurrence of the County. The director/administrator of the CHD shall insure that non-categorical sources of funding are used to fulfill public health priorities in the community and the Long Range Program Plan. A report detailing the status of public health as measured by outcome measures and similar indicators will be sent by the CHD director/administrator to the parties no later than October 1 of each year (*This is the standard quality assurance "County Health Profile" report located on the Office of Planning, Evaluation & Data Analysis Intranet site*).

6. ADMINISTRATIVE POLICIES AND PROCEDURES. The parties hereto agree that the following standards should apply in the operation of the CHD:

a. The CHD and its personnel shall follow all State policies and procedures, except to the extent permitted for the use of county purchasing procedures as set forth in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel rules and procedures. Employees will report time in the Health Management System compatible format by program component as specified by the State.

b. The CHD shall comply with all applicable provisions of federal and state laws and regulations relating to its operation with the exception that the use of county purchasing procedures shall be allowed when it will result in a better price or service and no statewide Department of Health purchasing contract has been implemented for those goods or services. In such cases, the CHD director/administrator must sign a justification therefore, and all county-purchasing procedures must be followed in their entirety, and such compliance shall be documented. Such justification and compliance documentation shall

be maintained by the CHD in accordance with the terms of this Agreement. State procedures must be followed for all leases on facilities not enumerated in Attachment IV.

c. The CHD shall maintain books, records and documents in accordance with those promulgated by the Generally Accepted Accounting Principles (GAAP) and Governmental Accounting Standards Board (GASB), and the requirements of federal or state law. These records shall be maintained as required by the Department of Health Policies and Procedures for Records Management and shall be open for inspection at any time by the parties and the public, except for those records that are not otherwise subject to disclosure as provided by law which are subject to the confidentiality provisions of paragraph 6.i., below. Books, records and documents must be adequate to allow the CHD to comply with the following reporting requirements:

- i.* The revenue and expenditure requirements in the Florida Accounting System Information Resource (FLAIR).
- ii.* The client registration and services reporting requirements of the minimum data set as specified in the most current version of the Client Information System/Health Management Component Pamphlet;
- iii.* Financial procedures specified in the Department of Health's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda;
- iv.* The CHD is responsible for assuring that all contracts with service providers include provisions that all subcontracted services be reported to the CHD in a manner consistent with the client registration and service reporting requirements of the minimum data set as specified in the Client Information System/Health Management Component Pamphlet.

d. All funds for the CHD shall be deposited in the County Health Department Trust Fund maintained by the state treasurer. These funds shall be accounted for separately from funds deposited for other CHDs and shall be used only for public health purposes in Sumter County.

e. That any surplus/deficit funds, including fees or accrued interest, remaining in the County Health Department Trust Fund account at the end of the contract year shall be credited/debited to the state or county, as appropriate, based on the funds contributed by each and the expenditures incurred by each. Expenditures will be charged to the program accounts by state and county based on the ratio of planned expenditures in the core contract and funding from all sources is credited to the program accounts by state and county. The equity share of any surplus/deficit funds accruing to the state and county is determined each month and at contract year-end. Surplus funds may be applied toward the funding requirements of each participating governmental entity in the following year. However, in each such case, all surplus funds, including fees and accrued interest, shall remain in the trust fund until accounted for in a manner which clearly illustrates the amount which has been credited to each participating governmental entity. The planned use of

surplus funds shall be reflected in Attachment II, Part I of this contract, with special capital projects explained in Attachment V.

f. There shall be no transfer of funds between the three levels of services without a contract amendment unless the CHD director/administrator determines that an emergency exists wherein a time delay would endanger the public's health and the Deputy State Health Officer has approved the transfer. The Deputy State Health Officer shall forward written evidence of this approval to the CHD within 30 days after an emergency transfer.

g. The CHD may execute subcontracts for services necessary to enable the CHD to carry out the programs specified in this Agreement. Any such subcontract shall include all aforementioned audit and record keeping requirements.

h. At the request of either party, an audit may be conducted by an independent CPA on the financial records of the CHD and the results made available to the parties within 180 days after the close of the CHD fiscal year. This audit will follow requirements contained in OMB Circular A-133 and may be in conjunction with audits performed by county government. If audit exceptions are found, then the director/administrator of the CHD will prepare a corrective action plan and a copy of that plan and monthly status reports will be furnished to the contract managers for the parties.

i. The CHD shall not use or disclose any information concerning a recipient of services except as allowed by federal or state law or policy.

j. The CHD shall retain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this Agreement for a period of five (5) years after termination of this Agreement. If an audit has been initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings.

k. The CHD shall maintain confidentiality of all data, files, and records that are confidential under the law or are otherwise exempted from disclosure as a public record under Florida law. The CHD shall implement procedures to ensure the protection and confidentiality of all such records and shall comply with sections 384.29, 381.004, 392.65 and 456.057, Florida Statutes, and all other state and federal laws regarding confidentiality. All confidentiality procedures implemented by the CHD shall be consistent with the Department of Health Information Security Policies, Protocols, and Procedures, dated April 2005, as amended, the terms of which are incorporated herein by reference. The CHD shall further adhere to any amendments to the State's security requirements and shall comply with any applicable professional standards of practice with respect to client confidentiality.

l. The CHD shall abide by all State policies and procedures, which by this reference are incorporated herein as standards to be followed by the CHD, except as otherwise permitted for some purchases using county procedures pursuant to paragraph 6.b. hereof.

m. The CHD shall establish a system through which applicants for services and current clients may present grievances over denial, modification or termination of services. The

CHD will advise applicants of the right to appeal a denial or exclusion from services, of failure to take account of a client's choice of service, and of his/her right to a fair hearing to the final governing authority of the agency. Specific references to existing laws, rules or program manuals are included in Attachment I of this Agreement.

n. The CHD shall comply with the provisions contained in the Civil Rights Certificate, hereby incorporated into this contract as Attachment III.

o. The CHD shall submit quarterly reports to the county that shall include at least the following:

*i.* The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report;

*ii.* A written explanation to the county of service variances reflected in the DE385L1 report if the variance exceeds or falls below 25 percent of the planned expenditure amount. However, if the amount of the service specific variance between actual and planned expenditures does not exceed three percent of the total planned expenditures for the level of service in which the type of service is included, a variance explanation is not required. A copy of the written explanation shall be sent to the Department of Health, Bureau of Budget Management.

p. The dates for the submission of quarterly reports to the county shall be as follows unless the generation and distribution of reports is delayed due to circumstances beyond the CHD's control:

- i. March 1, 2012 for the report period October 1, 2011 through December 31, 2011;
- ii. June 1, 2012 for the report period October 1, 2011 through March 31, 2012;
- iii. September 1, 2012 for the report period October 1, 2011 through June 30, 2012; and
- iv. December 1, 2012 for the report period October 1, 2011 through September 30, 2012.

7. FACILITIES AND EQUIPMENT. The parties mutually agree that:

a. CHD facilities shall be provided as specified in Attachment IV to this contract and the county shall own the facilities used by the CHD unless otherwise provided in Attachment IV.

b. The county shall assure adequate fire and casualty insurance coverage for County-owned CHD offices and buildings and for all furnishings and equipment in CHD offices through either a self-insurance program or insurance purchased by the County.

c. All vehicles will be transferred to the ownership of the County and registered as county vehicles. The county shall assure insurance coverage for these vehicles is available through either a self-insurance program or insurance purchased by the County. All vehicles will be used solely for CHD operations. Vehicles purchased through the County Health Department Trust Fund shall be sold at fair market value when they are no longer needed by the CHD and the proceeds returned to the County Health Department Trust Fund.

8. TERMINATION.

a. Termination at Will. This Agreement may be terminated by either party without cause upon no less than one-hundred eighty (180) calendar days notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.

b. Termination Because of Lack of Funds. In the event funds to finance this Agreement become unavailable, either party may terminate this Agreement upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.

c. Termination for Breach. This Agreement may be terminated by one party, upon no less than thirty (30) days notice, because of the other party's failure to perform an

obligation hereunder. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery. Waiver of breach of any provisions of this Agreement shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the terms of this Agreement.

9. MISCELLANEOUS. The parties further agree:

a. Availability of Funds. If this Agreement, any renewal hereof, or any term, performance or payment hereunder, extends beyond the fiscal year beginning July 1, 2012, it is agreed that the performance and payment under this Agreement are contingent upon an annual appropriation by the Legislature, in accordance with section 287.0582, Florida Statutes.

b. Contract Managers. The name and address of the contract managers for the parties under this Agreement are as follows:

For the State:

For the County:

Sanford D. Zelnick, D.O., M.S.  
Name

Bradley S. Arnold  
Name

Director  
Title

County Administrator  
Title

P. O. Box 98

7375 Powell Road

Bushnell 33513  
Address

Wildwood, Florida 34785  
Address

(352) 793-6979  
Telephone

(352) 689-4400  
Telephone

If different contract managers are designated after execution of this Agreement, the name, address and telephone number of the new representative shall be furnished in writing to the other parties and attached to originals of this Agreement.

c. Captions. The captions and headings contained in this Agreement are for the convenience of the parties only and do not in any way modify, amplify, or give additional notice of the provisions hereof.

In WITNESS THEREOF, the parties hereto have caused this 23 page agreement to be executed by their undersigned officials as duly authorized effective the 1<sup>st</sup> day of October, 2011.

**BOARD OF COUNTY COMMISSIONERS  
FOR SUMTER COUNTY**

**STATE OF FLORIDA  
DEPARTMENT OF HEALTH**

SIGNED BY: \_\_\_\_\_

NAME: Don Burgess

TITLE: Chairman

DATE: \_\_\_\_\_

ATTESTED TO:

SIGNED BY: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNED BY: \_\_\_\_\_

NAME: H. Frank Farmer, Jr., MD, PhD, FACP

TITLE: State Surgeon General

DATE: \_\_\_\_\_

SIGNED BY:  \_\_\_\_\_

NAME: Sanford D. Zelnick, D.O., M.S.

TITLE: CHD Director

DATE: 8 September 2011

## ATTACHMENT I

### SUMTER COUNTY HEALTH DEPARTMENT

#### PROGRAM SPECIFIC REPORTING REQUIREMENTS AND PROGRAMS REQUIRING COMPLIANCE WITH THE PROVISIONS OF SPECIFIC MANUALS

Some health services must comply with specific program and reporting requirements in addition to the Personal Health Coding Pamphlet (DHP 50-20), Environmental Health Coding Pamphlet (DHP 50-21) and FLAIR requirements because of federal or state law, regulation or rule. If a county health department is funded to provide one of these services, it must comply with the special reporting requirements for that service. The services and the reporting requirements are listed below:

	<u>Service</u>	<u>Requirement</u>
1.	Sexually Transmitted Disease Program	Requirements as specified in FAC 64D-3, F.S. 381 and F.S. 384 and the CHD Guidebook.
2.	Dental Health	Monthly reporting on DH Form 1008*. Additional reporting requirements, under development, will be required. The additional reporting requirements will be communicated upon finalization.
3.	Special Supplemental Nutrition Program for Women, Infants and Children (including the WIC Breastfeeding Peer Counseling Program)	Service documentation and monthly financial reports as specified in DHM 150-24* and all federal, state and county requirements detailed in program manuals and published procedures.
4.	Healthy Start/ Improved Pregnancy Outcome	Requirements as specified in the 2007 Healthy Start Standards and Guidelines and as specified by the Healthy Start Coalitions in contract with each county health department.
5.	Family Planning	Periodic financial and programmatic reports as specified by the program office and in the CHD Guidebook, Internal Operating Policy FAMPLAN 14*
6.	Immunization	Periodic reports as specified by the department regarding the surveillance/investigation of reportable vaccine preventable diseases, vaccine usage accountability as documented in Florida SHOTS, the assessment of various immunization levels as documented in Florida SHOTS and forms reporting adverse events following immunization.
7.	Chronic Disease Program	Requirements as specified in the Healthy Communities, Healthy People Guidebook.
8.	Environmental Health	Requirements as specified in Environmental Health Programs Manual 150-4* and DHP 50-21*
9.	HIV/AIDS Program	Requirements as specified in F.S. 384.25 and 64D-3.016 and 3.017 F.A.C. and the CHD Guidebook. Case reporting should be on Adult HIV/AIDS Confidential Case Report CDC Form DH2139 and Pediatric HIV/AIDS Confidential Case Report CDC Form DH2140. Socio-

ATTACHMENT I (Continued)

demographic data on persons tested for HIV in CHD clinics should be reported on Lab Request DH Form 1628 or Post-Test Counseling DH Form 1628C. These reports are to be sent to the Headquarters HIV/AIDS office within 5 days of the initial post-test counseling appointment or within 90 days of the missed post-test counseling appointment.

10. School Health Services

Requirements as specified in the Florida School Health Administrative Guidelines (April 2007).

11. Tuberculosis

Tuberculosis Program Requirements as specified in FAC 64D-3, F.S. *Specific Authority 381.0011(13), 381.003(2), 381.0031(6), 384.33, 392.53(2), 392.66 FS Law Implemented 381.0011(4), 381.003(1), 381.0031(1), (2), (6), 383.06, 384.23, 384.25, 385.202, 392.53 FS.381 and CHD Guidebook.*

12. General Communicable Disease Control

Carry out surveillance for reportable communicable and other acute diseases, detect outbreaks, respond to individual cases of reportable diseases, investigate outbreaks, and carry out communication and quality assurance functions, as specified in the CHD Guide to Surveillance and Investigations.

\*or the subsequent replacement if adopted during the contract period.

ATTACHMENT II

SUMTER COUNTY HEALTH DEPARTMENT

PART I. PLANNED USE OF COUNTY HEALTH DEPARTMENT TRUST FUND BALANCES

	Estimated State Share of CHD Trust Fund Balance	Estimated County Share of CHD Trust Fund Balance	Total
1. CHD Trust Fund Ending Balance 09/30/11	226,616	185,414	412,030
2. Drawdown for Contract Year October 1, 2011 to September 30, 2012	0	0	0
3. Special Capital Project use for Contract Year October 1, 2011 to September 30, 2012	0	0	0
4. Balance Reserved for Contingency Fund October 1, 2011 to September 30, 2012	226,616	185,414	412,030

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects, and mobile health vans.

**ATTACHMENT II.**

**SUMTER COUNTY HEALTH DEPARTMENT  
Part II. Sources of Contributions to County Health Department**

October 1, 2011 to September 30, 2012

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
<b>1. GENERAL REVENUE - STATE</b>					
015040 AIDS PREVENTION	0	0	0	0	0
015040 AIDS SURVEILLANCE	0	0	0	0	0
015040 ALG/CESSPOOL IDENTIFICATION AND ELIMINATION	0	0	0	0	0
015040 ALG/CONTR TO CHDS-AIDS PATIENT CARE	0	0	0	0	0
015040 ALG/CONTR TO CHDS-AIDS PATIENT CARE NETWORK	0	0	0	0	0
015040 ALG/CONTR. TO CHDS-SOVEREIGN IMMUNITY	0	0	0	0	0
015040 ALG/IPO HEALTHY START/IPO	0	0	0	0	0
015040 ALG/PRIMARY CARE	159,876	0	159,876	0	159,876
015040 ALPHA ONE PROGRAM - MIAMI-DADE	0	0	0	0	0
015040 CHILD HEALTH MEDICAL SERVICES	0	0	0	0	0
015040 CLOSING THE GAP PROGRAM	0	0	0	0	0
015040 COMMUNITY SMILES - MIAMI-DADE	0	0	0	0	0
015040 COMMUNITY TB PROGRAM	16,482	0	16,482	0	16,482
015040 COUNTY SPECIFIC DENTAL PROJECTS - ESCAMBIA	0	0	0	0	0
015040 DENTAL SPECIAL INITIATIVES	0	0	0	0	0
015040 DUVAL TEEN PREGNANCY PREVENTION	0	0	0	0	0
015040 FAMILY PLANNING GENERAL REVENUE	27,712	0	27,712	0	27,712
015040 FL CLPPP SCREENING & CASE MANAGEMENT	0	0	0	0	0
015040 FL HEPATITIS & LIVER FAILURE PREVENTION/CONTROL	0	0	0	0	0
015040 HEALTHY START MED WAIVER - SOBRA	0	0	0	0	0
015040 HEALTHY START MED-WAIVER - CLIENT SERVICES	0	0	0	0	0
015040 JESSIE TRICE CANCER CTR/HEALTH CHOICE - MIAMI-DADE	0	0	0	0	0
015040 LA LIGA-LEAGUE AGAINST CANCER - MIAMI-DADE	0	0	0	0	0
015040 MANATEE COUNTY RURAL HEALTH SERVICES	0	0	0	0	0
015040 METRO ORLANDO URBAN LEAGUE TEENAGE PREG PREV	0	0	0	0	0
015040 MIGRANT LABOR CAMP SANITATION	0	0	0	0	0
015040 MINORITY OUTREACH-PENALVER CLINIC - MIAMI-DADE	0	0	0	0	0
015040 SCHOOL HEALTH GENERAL REVENUE	36,784	0	36,784	0	36,784
015040 SPECIAL NEEDS SHELTER PROGRAM	0	0	0	0	0
015040 STATEWIDE DENTISTRY NETWORK - ESCAMBIA	0	0	0	0	0
015040 STD GENERAL REVENUE	0	0	0	0	0
015050 NON-CATEGORICAL GENERAL REVENUE	453,355	0	453,355	0	453,355
<b>GENERAL REVENUE TOTAL</b>	<b>694,209</b>	<b>0</b>	<b>694,209</b>	<b>0</b>	<b>694,209</b>

**2. NON GENERAL REVENUE - STATE**

015010 ALG/CONTR. TO CHDS-BIOMEDICAL WASTE	2,679	0	2,679	0	2,679
015010 ALG/CONTR. TO CHDS-SAFE DRINKING WATER PRG	0	0	0	0	0
015010 ALG/PRIMARY CARE	0	0	0	0	0
015010 CHD PROGRAM SUPPORT	0	0	0	0	0
015010 FOOD AND WATERBORNE DISEASE PROGRAM ADM TF/DACS	0	0	0	0	0
015010 PUBLIC SWIMMING POOL PROGRAM	0	0	0	0	0
015010 SCHOOL HEALTH TOBACCO TF	55,216	0	55,216	0	55,216
015010 TOBACCO ADMINISTRATION & MANAGEMENT	0	0	0	0	0
015010 TOBACCO ADMINISTRATIVE SUPPORT	30,000	0	30,000	0	30,000
015010 TOBACCO COMMUNITY INTERVENTION	108,000	0	108,000	0	108,000
015020 TRANSFER FROM ANOTHER STATE AGENCY	0	0	0	0	0
015020 TRANSFER FROM ANOTHER STATE AGENCY	0	0	0	0	0
015020 TRANSFER FROM ANOTHER STATE AGENCY	0	0	0	0	0

**ATTACHMENT II.**

**SUMTER COUNTY HEALTH DEPARTMENT  
Part II. Sources of Contributions to County Health Department  
October 1, 2011 to September 30, 2012**

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
<b>2. NON GENERAL REVENUE - STATE</b>					
015060 NON-CATEGORICAL TOBACCO REBASING	8,000	0	8,000	0	8,000
<b>NON GENERAL REVENUE TOTAL</b>	<b>203,895</b>	<b>0</b>	<b>203,895</b>	<b>0</b>	<b>203,895</b>
<b>3. FEDERAL FUNDS - State</b>					
007000 AIDS PREVENTION	0	0	0	0	0
007000 AIDS SURVEILLANCE	0	0	0	0	0
007000 BIOTERRORISM HOSPITAL PREPAREDNESS	24,707	0	24,707	0	24,707
007000 COASTAL BEACH MONITORING PROGRAM	0	0	0	0	0
007000 COLORECTAL CANCER SCREENING 2009-10	0	0	0	0	0
007000 ENHANCE COMPREHENSIVE PREVENTION PLANNING AND IMPL	0	0	0	0	0
007000 EXPANDED TESTING INITIATIVE (ETI)	0	0	0	0	0
007000 FGTF/AIDS MORBIDITY	0	0	0	0	0
007000 FGTF/BREAST & CERVICAL CANCER-ADMIN/CASE MAN	0	0	0	0	0
007000 FGTF/FAMILY PLANNING TITLE X SPECIAL INITIATIVES	0	0	0	0	0
007000 FGTF/FAMILY PLANNING-TITLE X	61,745	0	61,745	0	61,745
007000 HEALTH PROGRAM FOR REFUGEES	0	0	0	0	0
007000 HEALTHY PEOPLE HEALTHY COMMUNITIES	15,963	0	15,963	0	15,963
007000 HIV HOUSING FOR PEOPLE LIVING WITH AIDS	0	0	0	0	0
007000 HIV INCIDENCE SURVEILLANCE	0	0	0	0	0
007000 IMMUNIZATION FEDERAL GRANT ACTIVITY SUPPORT	7,140	0	7,140	0	7,140
007000 IMMUNIZATION FIELD STAFF EXPENSE	0	0	0	0	0
007000 IMMUNIZATION WIC-LINKAGES	0	0	0	0	0
007000 IMMUNIZATION-WIC LINKAGES	0	0	0	0	0
007000 MCH BLOCK GRANT SPECIAL PROJECTS	29,993	0	29,993	0	29,993
007000 MCH BGTF-HEALTHY START COALITIONS	0	0	0	0	0
007000 ORAL HEALTH WORKFORCE ACTIVITIES	0	0	0	0	0
007000 PHP - CITIES READINESS INITIATIVE	0	0	0	0	0
007000 PUBLIC HEALTH PREPAREDNESS BASE	46,735	0	46,735	0	46,735
007000 RAPE PREVENTION & EDUCATION GRANT	0	0	0	0	0
007000 RYAN WHITE	0	0	0	0	0
007000 RYAN WHITE - EMERGING COMMUNITIES	0	0	0	0	0
007000 RYAN WHITE-AIDS DRUG ASSIST PROG-ADMIN	0	0	0	0	0
007000 RYAN WHITE-CONSORTIA	0	0	0	0	0
007000 STATE INDOOR RADON GRANT	0	0	0	0	0
007000 STD FEDERAL GRANT - CSPS	0	0	0	0	0
007000 STD PROGRAM INFERTILITY PREVENTION PROJECT (IPP)	0	0	0	0	0
007000 SYPHILIS ELIMINATION	0	0	0	0	0
007000 TEENAGE PREGNANCY PREVENTION REPLICATION 2010-11	0	0	0	0	0
007000 TEENAGE PREGNANCY PREVENTION REPLICATION 2011-12	0	0	0	0	0
007000 TITLE X HIV/AIDS PROJECT	0	0	0	0	0
007000 TITLE X MALE PROJECT	0	0	0	0	0
007000 TOBACCO FAITH BASED PROJECT	0	0	0	0	0
007000 TUBERCULOSIS CONTROL - FEDERAL GRANT	0	0	0	0	0
007000 WIC ADMINISTRATION	0	0	0	0	0
007000 WIC BREASTFEEDING PEER COUNSELING	0	0	0	0	0
015009 MEDIPASS WAIVER-HLTHY STRT CLIENT SERVICES	0	0	0	0	0
015009 MEDIPASS WAIVER-SOBRA	0	0	0	0	0
007055 ARRA Federal Grant - Schedule C	0	0	0	0	0

**ATTACHMENT II.**

**SUMTER COUNTY HEALTH DEPARTMENT  
Part II. Sources of Contributions to County Health Department**

**October 1, 2011 to September 30, 2012**

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
<b>3. FEDERAL FUNDS - State</b>						
015075	ON SITE SEWAGE TREATMENT & DISPOSAL SYSTEM	0	0	0	0	0
015075	SCHOOL HEALTH TITLE XXI	15,327	0	15,327	0	15,327
015075	Inspections of Summer Feeding Programs	0	0	0	0	0
015075	TRANSFER OF FEDERAL GRANT FROM OTHER AGENCY	0	0	0	0	0
<b>FEDERAL FUNDS TOTAL</b>		<b>201,610</b>	<b>0</b>	<b>201,610</b>	<b>0</b>	<b>201,610</b>
<b>4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE</b>						
001020	TANNING FACILITIES	1,400	0	1,400	0	1,400
001020	BODY PIERCING	150	0	150	0	150
001020	MIGRANT HOUSING PERMIT	0	0	0	0	0
001020	MOBILE HOME AND PARKS	22,000	0	22,000	0	22,000
001020	FOOD HYGIENE PERMIT	11,879	0	11,879	0	11,879
001020	BIOHAZARD WASTE PERMIT	7,000	0	7,000	0	7,000
001020	PRIVATE WATER CONSTR PERMIT	0	0	0	0	0
001020	PUBLIC WATER ANNUAL OPER PERMIT	15,000	0	15,000	0	15,000
001020	PUBLIC WATER CONSTR PERMIT	0	0	0	0	0
001020	NON-SDWA SYSTEM PERMIT	0	0	0	0	0
001020	SAFE DRINKING WATER	0	0	0	0	0
001020	SWIMMING POOLS	17,000	0	17,000	0	17,000
001092	OSDS PERMIT FEE	0	0	0	0	0
001092	I & M ZONED OPERATING PERMIT	0	0	0	0	0
001092	AEROBIC OPERATING PERMIT	0	0	0	0	0
001092	SEPTIC TANK SITE EVALUATION	0	0	0	0	0
001092	NON SDWA LAB SAMPLE	0	0	0	0	0
001092	OSDS VARIANCE FEE	0	0	0	0	0
001092	ENVIRONMENTAL HEALTH FEES	60,271	0	60,271	0	60,271
001092	OSDS REPAIR PERMIT	0	0	0	0	0
001170	LAB FEE CHEMICAL ANALYSIS	0	0	0	0	0
001170	WATER ANALYSIS-POTABLE	0	0	0	0	0
001170	NONPOTABLE WATER ANALYSIS	0	0	0	0	0
010304	MQA INSPECTION FEE	0	0	0	0	0
001206	Central Office Surcharge	0	0	0	0	0
<b>FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL</b>		<b>134,700</b>	<b>0</b>	<b>134,700</b>	<b>0</b>	<b>134,700</b>
<b>5. OTHER CASH CONTRIBUTIONS - STATE</b>						
010304	STATIONARY POLLUTANT STORAGE TANKS	0	0	0	0	0
090001	DRAW DOWN FROM PUBLIC HEALTH UNIT	0	0	0	0	0
<b>OTHER CASH CONTRIBUTIONS TOTAL</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>6. MEDICAID - STATE/COUNTY</b>						
001056	MEDICAID PHARMACY	0	0	0	0	0
001076	MEDICAID TB	1,013	1,287	2,300	0	2,300
001078	MEDICAID ADMINISTRATION OF VACCINE	3,050	3,050	6,100	0	6,100
001079	MEDICAID CASE MANAGEMENT	0	0	0	0	0
001081	MEDICAID CHILD HEALTH CHECK UP	25,114	31,886	57,000	0	57,000
001082	MEDICAID DENTAL	0	0	0	0	0
001083	MEDICAID FAMILY PLANNING	8,000	72,000	80,000	0	80,000

**ATTACHMENT II.**

**SUMTER COUNTY HEALTH DEPARTMENT**  
**Part II. Sources of Contributions to County Health Department**  
**October 1, 2011 to September 30, 2012**

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total	
<b>6. MEDICAID - STATE/COUNTY</b>						
001087	MEDICAID STD	6,389	8,111	14,500	0	14,500
001089	MEDICAID AIDS	1,895	2,405	4,300	0	4,300
001147	Medicaid HMO Capitation	0	0	0	0	0
001191	MEDICAID MATERNITY	50,669	64,331	115,000	0	115,000
001192	MEDICAID COMPREHENSIVE CHILD	15,421	19,579	35,000	0	35,000
001193	MEDICAID COMPREHENSIVE ADULT	881	1,119	2,000	0	2,000
001194	MEDICAID LABORATORY	0	0	0	0	0
001208	MEDIPASS \$2.00 ADM. FEE	4,500	4,500	9,000	0	9,000
001059	Medicaid Low Income Pool	0	0	0	0	0
001051	Emergency Medicaid	0	0	0	0	0
001058	Medicaid - Behavioral Health	0	0	0	0	0
001071	Medicaid - Orthopedic	0	0	0	0	0
001072	Medicaid - Dermatology	0	0	0	0	0
001075	Medicaid - School Health Certified Match	0	0	0	0	0
001069	Medicaid - Refugee Health	0	0	0	0	0
001055	Medicaid - Hospital	0	0	0	0	0
001148	Medicaid HMO Non-Capitation	34,193	43,413	77,606	0	77,606
001074	Medicaid - Newborn Screening	0	0	0	0	0
<b>MEDICAID TOTAL</b>		<b>151,125</b>	<b>251,681</b>	<b>402,806</b>	<b>0</b>	<b>402,806</b>
<b>7. ALLOCABLE REVENUE - STATE</b>						
018000	REFUNDS	0	0	0	0	0
037000	PRIOR YEAR WARRANT	0	0	0	0	0
038000	12 MONTH OLD WARRANT	0	0	0	0	0
<b>ALLOCABLE REVENUE TOTAL</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE</b>						
	PHARMACY SERVICES	0	0	0	32,923	32,923
	LABORATORY SERVICES	0	0	0	35,274	35,274
	TB SERVICES	0	0	0	0	0
	IMMUNIZATION SERVICES	0	0	0	153,833	153,833
	STD SERVICES	0	0	0	0	0
	CONSTRUCTION/RENOVATION	0	0	0	0	0
	WIC FOOD	0	0	0	878,475	878,475
	ADAP	0	0	0	85,743	85,743
	DENTAL SERVICES	0	0	0	0	0
	OTHER (SPECIFY)	0	0	0	0	0
	OTHER (SPECIFY)	0	0	0	0	0
<b>OTHER STATE CONTRIBUTIONS TOTAL</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>1,186,248</b>	<b>1,186,248</b>
<b>9. DIRECT LOCAL CONTRIBUTIONS - COUNTY</b>						
008030	Contribution from Health Care Tax	0	655,479	655,479	0	655,479
008034	BCC Contribution from General Fund	0	0	0	0	0
<b>DIRECT COUNTY CONTRIBUTION TOTAL</b>		<b>0</b>	<b>655,479</b>	<b>655,479</b>	<b>0</b>	<b>655,479</b>

**ATTACHMENT II.**

**SUMTER COUNTY HEALTH DEPARTMENT  
Part II. Sources of Contributions to County Health Department**

October 1, 2011 to September 30, 2012

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total	
<b>10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY</b>						
001060	VITAL STATISTICS - FEES AND SERVICES	0	500	500	0	500
001077	RABIES VACCINE	0	0	0	0	0
001077	CHILD CAR SEAT PROG	0	0	0	0	0
001077	PERSONAL HEALTH FEES	0	75,220	75,220	0	75,220
001077	AIDS CO-PAYS	0	0	0	0	0
001094	ADULT ENTER. PERMIT FEES	0	0	0	0	0
001094	LOCAL ORDINANCE FEES	0	3,200	3,200	0	3,200
001114	NEW BIRTH CERTIFICATES	0	19,000	19,000	0	19,000
001115	Vital Statistics - Death Certificate	0	133,000	133,000	0	133,000
001117	VITAL STATS-ADM. FEE 50 CENTS	0	1,475	1,475	0	1,475
001073	Co-Pay for the AIDS Care Program	0	0	0	0	0
001025	Client Revenue from GRC	0	0	0	0	0
001040	Cell Phone Administrative Fee	0	0	0	0	0
<b>FEES AUTHORIZED BY COUNTY TOTAL</b>		0	232,395	232,395	0	232,395
<b>11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY</b>						
001009	RETURNED CHECK ITEM	0	0	0	0	0
001029	THIRD PARTY REIMBURSEMENT	0	7,565	7,565	0	7,565
001029	HEALTH MAINTENANCE ORGAN. (HMO)	0	0	0	0	0
001054	MEDICARE PART D	0	0	0	0	0
001077	RYAN WHITE TITLE II	0	0	0	0	0
001090	MEDICARE PART B	0	7,500	7,500	0	7,500
001190	Health Maintenance Organization	0	0	0	0	0
005040	INTEREST EARNED	0	0	0	0	0
005041	INTEREST EARNED-STATE INVESTMENT ACCOUNT	0	4,889	4,889	0	4,889
007010	U.S. GRANTS DIRECT	0	0	0	0	0
008010	Contribution from City Government	0	0	0	0	0
008020	Contribution from Health Care Tax not thru BCC	0	0	0	0	0
008050	School Board Contribution	0	15,000	15,000	0	15,000
008060	Special Project Contribution	0	0	0	0	0
010300	SALE OF GOODS AND SERVICES TO STATE AGENCIES	0	700	700	0	700
010301	EXP WITNESS FEE CONSULTNT CHARGES	0	0	0	0	0
010405	SALE OF PHARMACEUTICALS	0	0	0	0	0
010409	SALE OF GOODS OUTSIDE STATE GOVERNMENT	0	0	0	0	0
011001	HEALTHY START COALITION CONTRIBUTIONS	0	9,548	9,548	0	9,548
011007	CASH DONATIONS PRIVATE	0	0	0	0	0
012020	FINES AND FORFEITURES	0	1,400	1,400	0	1,400
012021	RETURN CHECK CHARGE	0	200	200	0	200
028020	INSURANCE RECOVERIES-OTHER	0	0	0	0	0
090002	DRAW DOWN FROM PUBLIC HEALTH UNIT	0	0	0	0	0
011000	GRANTS AND DONATIONS OTHER	0	26,500	26,500	0	26,500
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT DIRECT-COUNTY HEALTH DEPARTMENT DIRECT SERVICES	0	0	0	0	0
011000	DIRECT-ARROW	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT DIRECT-QUANTUM DENTAL	0	0	0	0	0
011000	GRANT DIRECT-HEALTH CARE DISTRICT PAHOKEE	0	0	0	0	0

**ATTACHMENT II.**

**SUMTER COUNTY HEALTH DEPARTMENT**  
**Part II. Sources of Contributions to County Health Department**  
**October 1, 2011 to September 30, 2012**

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
<b>11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY</b>					
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT DIRECT-ARROW	0	0	0	0	0
010402 Recycled Material Sales	0	0	0	0	0
010303 FDLE Fingerprinting	0	0	0	0	0
007050 ARRA Federal Grant	0	0	0	0	0
001010 Recovery of Bad Checks	0	0	0	0	0
008065 FCO Contribution	0	0	0	0	0
011006 Restricted Cash Donation	0	0	0	0	0
028000 Insurance Recoveries	0	0	0	0	0
001033 CMS Management Fee - PMPMPC	0	0	0	0	0
010400 Sale of Goods Outside State Government	0	0	0	0	0
010500 Refugee Health	0	0	0	0	0
005045 Interest Earned-Third Party Provider	0	0	0	0	0
005043 Interest Earned-Contract/Grant	0	0	0	0	0
010306 DOH/DOC Interagency Agreement	0	0	0	0	0
008040 BCC Grant/Contract	0	0	0	0	0
011002 ARRA Federal Grant - Sub-Recipient	0	0	0	0	0
<b>OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL</b>	0	73,302	73,302	0	73,302
<b>12. ALLOCABLE REVENUE - COUNTY</b>					
018000 REFUNDS	0	0	0	0	0
037000 PRIOR YEAR WARRANT	0	0	0	0	0
038000 12 MONTH OLD WARRANT	0	0	0	0	0
<b>COUNTY ALLOCABLE REVENUE TOTAL</b>	0	0	0	0	0
<b>13. BUILDINGS - COUNTY</b>					
ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	0	0
GROUNDS MAINTENANCE	0	0	0	0	0
OTHER (SPECIFY)	0	0	0	0	0
INSURANCE	0	0	0	0	0
UTILITIES	0	0	0	0	0
OTHER (SPECIFY)	0	0	0	0	0
BUILDING MAINTENANCE	0	0	0	0	0
<b>BUILDINGS TOTAL</b>	0	0	0	0	0
<b>14. OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST FUND - COUNTY</b>					
EQUIPMENT/VEHICLE PURCHASES	0	0	0	0	0
VEHICLE INSURANCE	0	0	0	0	0
VEHICLE MAINTENANCE	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
<b>OTHER COUNTY CONTRIBUTIONS TOTAL</b>	0	0	0	0	0
<b>GRAND TOTAL CHD PROGRAM</b>	1,385,539	1,212,857	2,598,396	1,186,248	3,784,644

**ATTACHMENT II.  
SUMTER COUNTY HEALTH DEPARTMENT**

**Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service**

**October 1, 2011 to September 30, 2012**

	FTE's (0.00)	Clients Units	Services/ Visits	Quarterly Expenditure Plan				State	County	Grand Total
				1st	2nd (Whole dollars only)	3rd	4th			
<b>A. COMMUNICABLE DISEASE CONTROL:</b>										
IMMUNIZATION (101)	2.35	1,381	1,978	34,703	29,746	34,703	29,746	73,472	55,426	128,898
STD (102)	3.27	828	1,770	49,681	42,584	49,681	42,584	62,740	121,790	184,530
HIV/AIDS PREVENTION (03A1)	0.00	0	0	0	0	0	0	0	0	0
HIV/AIDS SURVEILLANCE (03A2)	0.00	0	0	0	0	0	0	0	0	0
HIV/AIDS PATIENT CARE (03A3)	1.77	46	294	13,397	11,412	13,397	11,412	24,313	25,305	49,618
ADAP (03A4)	0.00	0	0	0	0	0	0	0	0	0
TB CONTROL SERVICES (104)	0.71	164	538	14,080	12,068	14,080	12,068	21,441	30,855	52,296
COMM. DISEASE SURV. (106)	0.51	0	198	8,904	7,632	8,904	7,632	19,843	13,229	33,072
HEPATITIS PREVENTION (109)	0.01	0	0	188	162	188	162	413	287	700
PUBLIC HEALTH PREP AND RESP (116)	1.55	0	33	40,146	34,411	40,146	34,411	144,641	4,473	149,114
VITAL STATISTICS (180)	3.23	5,694	17,308	44,892	38,479	44,892	38,479	0	166,742	166,742
<b>COMMUNICABLE DISEASE SUBTOTAL</b>	<b>13.40</b>	<b>8,113</b>	<b>22,119</b>	<b>205,991</b>	<b>176,494</b>	<b>205,991</b>	<b>176,494</b>	<b>346,863</b>	<b>418,107</b>	<b>764,970</b>
<b>B. PRIMARY CARE:</b>										
CHRONIC DISEASE SERVICES (210)	1.22	1,199	109	23,889	20,476	23,889	20,476	73,402	15,328	88,730
TOBACCO PREVENTION (212)	2.78	0	86	62,071	53,203	62,071	53,203	230,548	0	230,548
WIC (21W1)	0.65	2,385	15,627	7,965	6,785	7,965	6,785	18,290	11,210	29,500
WIC BREASTFEEDING PEER COUNSELING (21W2)	0.00	0	0	0	0	0	0	0	0	0
FAMILY PLANNING (223)	7.04	1,710	5,039	88,028	74,986	88,028	74,986	144,349	181,679	326,028
IMPROVED PREGNANCY OUTCOME (225)	4.17	217	1,408	54,702	46,593	54,702	46,593	68,782	133,808	202,590
HEALTHY START PRENATAL (227)	0.02	1	24	247	212	247	212	551	367	918
COMPREHENSIVE CHILD HEALTH (229)	3.21	409	951	51,242	43,922	51,242	43,922	89,456	100,872	190,328
HEALTHY START INFANT (231)	0.24	5	185	3,045	2,610	3,045	2,610	6,786	4,524	11,310
SCHOOL HEALTH (234)	4.06	0	90,014	52,925	45,364	52,925	45,364	98,289	98,289	196,578
COMPREHENSIVE ADULT HEALTH (237)	1.00	114	357	25,221	21,618	25,221	21,618	57,144	36,534	93,678
COMMUNITY HEALTH DEVELOPMENT (238)	1.00	0	0	8,100	6,900	8,100	6,900	0	30,000	30,000
DENTAL HEALTH (240)	0.00	0	0	0	0	0	0	0	0	0
<b>PRIMARY CARE SUBTOTAL</b>	<b>25.39</b>	<b>6,040</b>	<b>113,800</b>	<b>377,435</b>	<b>322,669</b>	<b>377,435</b>	<b>322,669</b>	<b>787,597</b>	<b>612,611</b>	<b>1,400,208</b>
<b>C. ENVIRONMENTAL HEALTH:</b>										
<b>Water and Onsite Sewage Programs</b>										
COASTAL BEACH MONITORING (347)	0.00	0	0	0	0	0	0	0	0	0
LIMITED USE PUBLIC WATER SYSTEMS (357)	0.54	56	202	7,767	6,657	7,767	6,657	6,924	21,924	28,848
PUBLIC WATER SYSTEM (358)	0.01	0	0	77	66	77	66	169	117	286
PRIVATE WATER SYSTEM (359)	0.31	0	0	3,804	3,260	3,804	3,260	8,477	5,651	14,128
INDIVIDUAL SEWAGE DISP. (361)	3.74	509	985	61,585	52,787	61,585	52,787	100,647	128,097	228,744
<b>Group Total</b>	<b>4.60</b>	<b>565</b>	<b>1,187</b>	<b>73,233</b>	<b>62,770</b>	<b>73,233</b>	<b>62,770</b>	<b>116,217</b>	<b>155,789</b>	<b>272,006</b>
<b>Facility Programs</b>										
FOOD HYGIENE (348)	0.69	70	298	11,209	9,608	11,209	9,608	41,218	416	41,634
BODY ART (349)	0.01	1	1	40	35	40	35	150	0	150
GROUP CARE FACILITY (351)	0.16	36	70	2,417	2,071	2,417	2,071	6,463	2,513	8,976
MIGRANT LABOR CAMP (352)	0.00	0	0	0	0	0	0	0	0	0
HOUSING,PUBLIC BLDG SAFETY,SANITATION (353)	0.00	0	0	0	0	0	0	0	0	0

**ATTACHMENT II.**

**SUMTER COUNTY HEALTH DEPARTMENT**

**Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service**

**October 1, 2011 to September 30, 2012**

	FTE's (0.00)	Clients Units	Services/ Visits	Quarterly Expenditure Plan				State	County	Grand Total
				1st	2nd (Whole dollars only)	3rd	4th			
<b>C. ENVIRONMENTAL HEALTH:</b>										
<b>Facility Programs</b>										
MOBILE HOME AND PARKS SERVICES (354)	0.32	53	113	4,858	4,164	4,858	4,164	17,142	902	18,044
SWIMMING POOLS/BATHING (360)	0.69	139	346	10,414	8,926	10,414	8,926	38,680	0	38,680
BIOMEDICAL WASTE SERVICES (364)	0.01	0	0	121	104	121	104	450	0	450
TANNING FACILITY SERVICES (369)	0.07	8	15	903	774	903	774	3,354	0	3,354
<b>Group Total</b>	<b>1.95</b>	<b>307</b>	<b>843</b>	<b>29,962</b>	<b>25,682</b>	<b>29,962</b>	<b>25,682</b>	<b>107,457</b>	<b>3,831</b>	<b>111,288</b>
<b>Groundwater Contamination</b>										
STORAGE TANK COMPLIANCE (355)	0.00	0	0	0	0	0	0	0	0	0
SUPER ACT SERVICE (356)	0.20	11	59	3,073	2,634	3,073	2,634	6,848	4,566	11,414
<b>Group Total</b>	<b>0.20</b>	<b>11</b>	<b>59</b>	<b>3,073</b>	<b>2,634</b>	<b>3,073</b>	<b>2,634</b>	<b>6,848</b>	<b>4,566</b>	<b>11,414</b>
<b>Community Hygiene</b>										
OCCUPATIONAL HEALTH (344)	0.00	0	0	0	0	0	0	0	0	0
COMMUNITY ENVIR. HEALTH (345)	0.00	0	0	0	0	0	0	0	0	0
INJURY PREVENTION (346)	0.00	0	0	0	0	0	0	0	0	0
LEAD MONITORING SERVICES (350)	0.02	0	0	503	431	503	431	1,121	747	1,868
PUBLIC SEWAGE (362)	0.00	0	0	0	0	0	0	0	0	0
SOLID WASTE DISPOSAL (363)	0.00	0	0	0	0	0	0	0	0	0
SANITARY NUISANCE (365)	0.08	29	73	1,143	980	1,143	980	0	4,246	4,246
RABIES SURVEILLANCE/CONTROL SERVICES (366)	0.53	191	487	8,675	7,436	8,675	7,436	19,333	12,889	32,222
ARBOVIRUS SURVEILLANCE (367)	0.00	0	0	0	0	0	0	0	0	0
RODENT/ARTHROPOD CONTROL (368)	0.00	0	0	0	0	0	0	0	0	0
WATER POLLUTION (370)	0.00	0	0	0	0	0	0	0	0	0
INDOOR AIR (371)	0.00	0	0	47	40	47	40	103	71	174
RADIOLOGICAL HEALTH (372)	0.00	0	0	0	0	0	0	0	0	0
TOXIC SUBSTANCES (373)	0.00	0	0	0	0	0	0	0	0	0
<b>Group Total</b>	<b>0.63</b>	<b>220</b>	<b>560</b>	<b>10,368</b>	<b>8,887</b>	<b>10,368</b>	<b>8,887</b>	<b>20,557</b>	<b>17,953</b>	<b>38,510</b>
<b>ENVIRONMENTAL HEALTH SUBTOTAL</b>	<b>7.38</b>	<b>1,103</b>	<b>2,649</b>	<b>116,636</b>	<b>99,973</b>	<b>116,636</b>	<b>99,973</b>	<b>251,079</b>	<b>182,139</b>	<b>433,218</b>
<b>D. NON-OPERATIONAL COSTS:</b>										
Non-Operational Costs (599)	0.00	0	0	0	0	0	0	0	0	0
ENVIRONMENTAL HEALTH SURCHARGE (399)	0.00	0	0	0	0	0	0	0	0	0
<b>NON-OPERATIONAL COSTS SUBTOTAL</b>	<b>0.00</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>TOTAL CONTRACT</b>	<b>46.17</b>	<b>15,256</b>	<b>138,568</b>	<b>700,062</b>	<b>599,136</b>	<b>700,062</b>	<b>599,136</b>	<b>1,385,539</b>	<b>1,212,857</b>	<b>2,598,396</b>

**ATTACHMENT III**  
**SUMTER COUNTY HEALTH DEPARTMENT**  
**CIVIL RIGHTS CERTIFICATE**

The applicant provides this assurance in consideration of and for the purpose of obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance to programs or activities receiving or benefiting from federal financial assistance. The provider agrees to complete the Civil Rights Compliance Questionnaire, DH Forms 946 A and B (or the subsequent replacement if adopted during the contract period), if so requested by the department.

The applicant assures that it will comply with:

1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C., 2000 Et seq., which prohibits discrimination on the basis of race, color or national origin in programs and activities receiving or benefiting from federal financial assistance.
2. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of handicap in programs and activities receiving or benefiting from federal financial assistance.
3. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits discrimination on the basis of sex in education programs and activities receiving or benefiting from federal financial assistance.
4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
5. The Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.
6. All regulations, guidelines and standards lawfully adopted under the above statutes. The applicant agrees that compliance with this assurance constitutes a condition of continued receipt of or benefit from federal financial assistance, and that it is binding upon the applicant, its successors, transferees, and assignees for the period during which such assistance is provided. The applicant further assures that all contracts, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the applicant understands that the grantor may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

**ATTACHMENT IV**  
**SUMTER COUNTY HEALTH DEPARTMENT**  
**FACILITIES UTILIZED BY THE COUNTY HEALTH DEPARTMENT**

<u>Facility Description</u>	<u>Location</u>	<u>Owned By</u>
Sumter County Health Department 415 East Noble Avenue Bushnell, Florida 33513	Bushnell	County
Sumter County Health Department 104 East Rutland Street Wildwood, Florida 34785	Wildwood	County
Sumter County Health Department 8015 East C-466 Suite A Lady Lake, Florida 32162	The Villages	County

