To: Bandario Approval		Regular Agenda Consent Agenda Blue Slip Closed Session Meeting Date Requested: 03/11/2014  this item; attach additional page if necessary)  rulich to the Commission on Aging as District 2 Regular Member for a 3-ye
Date: 03  From: R  Department Agenda Title: Summary: (Prov Approval of them.	ichard M. Forster, Supervisor Dis (Department Head - please type)  Head Signature  Commission on Aging ide detailed summary of the purpose of the appointment of Ms. Linda Mate	strict 2 Phone Ext. 470 03/11/2014  this item; attach additional page if necessary)  rulich to the Commission on Aging as District 2 Regular Member for a 3-ye
Department Agenda Title: Summary: (Prov Approval of therm.	(Department Head - please type)  Head Signature  Commission on Aging  ide detailed summary of the purpose of the appointment of Ms. Linda Mate	strict 2 Phone Ext. 470 03/11/2014  this item; attach additional page if necessary)  rulich to the Commission on Aging as District 2 Regular Member for a 3-ye
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equest Reviewe		
nairman	<u> </u>	Counsel 66
uditor 40 <u>C</u>	b	GSA Director  Risk Management
stribution Instru	ctions: (Inter-Denartmental Only, the re	equesting Department is responsible for distribution outside County Departments)
		Laurie Webb, Senior Center, 229 New York Ranch Rd., Jackson, CA , 956
eeting Date	Name and the State of the State	FOR CLERK USE ONLY Time   Item # /
Ma	rch 11, 2014	9 a.m.   Item # (OA)
		nimous Vote: YesNo
9S:		Ordinance Other:
es sent:	The state of the s	<u>Ordinance</u>
ributed on	A new ATF is required from	I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.
mpleted by	Department For meeting	ATTEST:Clerk or Deputy Board Clerk

# AMADOR COUNTY BOARD OF SUPERVISORS

COUNTY ADMINISTRATION CENTER \*810 COURT STREET \* JACKSON, CA \* 95642 (209) 223-6470

# COMMITTEE MEMBER APPLICATION FORM

	Date
Please consider me for the following committee:	
	- AGING
NAME:	(10).00
MORINAL LINDA MATU	LICH
Mailing Address:	
Physical Address:	
Business Address:	
ousiness Address:	
l'elephone - Home:	Work:
Please state briefly your qualifications and al-	Alm
additional sheet of paper, if necessary):	u are interested in serving on this committee (use
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ase be aware this completed form may be released to a	ny member of the public or media upon request.
-FOR CLERK:	
Application Accepted	Application Rejected
Date Appointed	
	Committee Number
Term Expires	Supervisorial District

To: <u>j</u>	AGENDA TRANSMITTA Board of Supervisors 03/06/2014	L FORM Mu	ic appl Resign.	Regular Agenda Consent Agenda Blue Slip Closed Session
	Aaron Brusatori, Director  (Department Head - please type)		one Ext. 470	Meeting Date Requested: 03/11/2015
Departmen	t Head Signature			
Agenda Title:	Amador County Local Task Force	e (LTF) on Solid V	Vaste Management	
Summary: (Pr	ovide detailed summary of the purpose of th		<u> 1868 - Santa Alemania, et ali ili ili ili ili ili ili ili ili ili</u>	
	the appointment of Mr. C. Ken Cer nt for a term of 2-years as a Regula			e (LTF) on Solid Waste
Recommendal Approval	ion/Requested Action:			
	(attach budget transfer form if appropriate)		Staffing Impacts	
Is a 4/5ths vote	Yes No No		la la sala de la sala d	/es
Committee Recommittee Recommit	commendation:	N/A [_]	Ordinance Attached O	res O No O N/A
Request Revie	ewed by:			
Chairman		Counsel		
Auditor		GSA Dim	ector	
CAO		Risk Ma	nagement	
	structions: (Inter-Departmental Only, the re to Appointee; cc: Committee Clerk			side County Departments)
		FOR CLERK US	E ONLY	
Meeting Date	March 11, 2014	Time 9	a.m.	m# 6B
Board Action	n: Approved Yes No Una	animous Vote: Yes	_No	
Ayes:	Resolution	Ordinance	e :	her:
Noes		Ordinance		
Absent:	Comments:  A new ATF is required from	to the Baltiman terror and a second of the second of the second	is is a true and correct copy of actionador County Board of Supervisors.	n(s) taken and entered into the official
Completed by	Department For meeting of	ATTEST:Clerk o	or Deputy Board Clerk	

# AMADOR COUNTY BOARD OF SUPERVISORS

COUNTY ADMINISTRATION CENTER \*810 COURT STREET \* JACKSON, CA \* 95642 (209) 223-6470

# COMMITTEE MEMBER APPLICATION FORM

D	ate 3/5/14				
Please consider me for the following committee:					
LTF INTECRATED SOUD WASTE MAN	PETPENT				
NAME: C. KEN CENTANNI					
Mailing Address:					
Physical Address:					
Business Address:					
Telephone - Home: Work:					
Please state briefly your qualifications and why you are interes additional sheet of paper, if necessary):	ted in serving on this committee (use				
I HAVE BEIEN A PROPERTY CONEZ	IN HOMADOR COUNTY FOR				
9 yEARS MY INTEREST AND CONCE	EAN FOR COUNTY				
GOVERNMENT HAS REACHED A POIN	· ·				
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ESTATE APPRAISER) AFFILIATIONS: A	CTIVE IN UCC. FIRST VP-				
LIUNIS CLUB INTERNATIONAL - CIPCCINT	124 LIONS.				
PLEASE CONSIDER ME FOR THIS	/				
THANK YOU,					
Signature	of the public or media upon request.				
-FOR CLERKS USE ONLY-					
Application Accepted	Application Rejected				
Date Appointed	Committee Number				
Term Expires	Supervisorial District				

	Ende he had been been an expressed	<u>A IRANSIIII</u>	ITAL FURIN	Regular Agenda  Consent Agenda
	l of Supervisors			Blue Slip Closed Session
Date: March 03, 2	<u>2014</u>			Meeting Date Requested:
From: James Foley			one Ext. <u>412</u>	March 11, 2014
(De	epartment Head - please type)	-//,		
Department Hea	d Signature	1//		
Agenda Title: Behav	vioral Health Utilization & Quality Manag	gement Coordinator Rec	cruitment	
	detailed summary of the purpose of this		anda Tila ani Berghal Dal	
	alth and Human Services, Behavio Utilization & Quality Managemen		ment requests the Board	of Supervisors approve the position o
Recommendation/Re	ed position			
	ch budget transfer form if appropriate)		Staffing Impacts	
None				
Committee Review?  Name Admin Com  Committee Recomme  Place request on Committee Recomme	Yes ☐ No ☒ nmittee on 03/03/14 nendation:	N/A 🔲	Contract Attached: Resolution Attached: Ordinance Attached Comments:	Yes No N/A Yes No N/A N/A Yes No N/A N/A
Request Reviewed t	by:			
Chairman		Counsel	66	
Auditor		GSA Dire	ector Hop	
cao	5	Risk Mar	nagement	
Distribution Instruction	ons: (Inter-Departmental Only, the requ	uesting Department is	responsible for distribution o	outside County Departments)
	I ATF to Angie Grau in BH, HR and			
		FOR CLERK US	FONLY	
Meeting Date		Time		Item# 7A
<u>Mar</u>	ch 11, 2014	9	a.m.	<u> </u>
Board Action: Ap	pproved Yes No Una	animous Vote: Yes		
Ayes:	Resolution	Ordinance	e <u>1988</u>	Other:
Noes		Ordinance	e	
Absent:	Comments:  A new ATF is required from		nis is a true and correct copy mador County Board of Super	of action(s) taken and entered into the officiarvisors.
	Department			
Completed by	For meeting	ATTEST:	or Deputy Board Clerk	

Save ....

# BEHAVIORAL HEALTH DEPARTMENT

Behavioral Health: 10877 Conductor Boulevard, Suite 300 • Sutter Creek, CA 95685 • Phone (209) 223-6412 • Fax (209) 223-0920 • Toll Free Number (888) 310-6555



To:

Administrative Committee/ Board of Supervisors

From:

James Foley, Director of Health & Human Services

Date:

February 10, 2014

RE:

Request for item to be placed on the Administrative Committee

agenda for March 03, 2014

Request to employ the following position not currently filled.

1. Utilization & Quality Management Coordinator See attached job description.

CC:

Chuck Iley, CAO

Scott Kasper, HR Director

AMADOR COUNTY

FLSA: Covered EEO: 2

# **UTILIZATION & QUALITY MANAGEMENT COORDINATOR**

## **DEFINITION**

Under direction of the Department Director, plans, coordinates, and performs the utilization and quality management functions in the County-operated outpatient, crisis intervention, and case management services; and, in contracted facilities. This includes utilization review, quality assurance, performance improvement, and related training activities. The Coordinator audits medical records to determine eligibility for services, medical necessity, and Medi-Cal compliance; ensures optimal reimbursement from Medicare, Medi-Cal, and other payors of these services; conducts quality improvement studies; provides narrative and statistical analyses of audits; orients and trains clinical staff on documentation requirements and/or arranges for appropriate instruction; and, performs related duties as assigned.

# **DISTINGUISHING CHARACTERISTICS**

This is the only position in this class. The incumbent reports to the Director, Behavioral Health Department, and works in partnership with the Program Manager, Clinical Services, the Medical Director, and the Compliance Officer in auditing clinical activities. This position does not provide clinical services, but rather is responsible for objectively auditing the clinical work done in the Department and reporting the results of the audits to the Director. The incumbent is also responsible for the quality management activities, which encompasses all functions in the Department's operations.

#### REPORTS TO

Director, Behavioral Health Department

## **CLASSIFICATIONS DIRECTLY SUPERVISED**

None

#### **EXAMPLES OF DUTIES**

The following are the duties performed by employees in this classification. However, employees may perform other related duties at an equivalent level. Each individual in the classification does not necessarily perform all the duties listed.

Conducts quality reviews in certain Department operations on an on-going basis; documents
findings in written reports to department director and managers; follows-up to insure all
recommendations from audits are addressed; provides or arranges technical assistance to
staff as needed to insure corrections.

#### **UTILIZATION & QUALITY MANAGEMENT COOR - 2**

- Reviews assessments, treatment plans, medication profiles, discharge charts, and daily visit
  notes on a daily basis to verify eligibility for services, medical necessity, and appropriateness of
  level of care; coordinates determination of level of care changes with Program Manager of
  Clinical Services, the attending psychiatrist, BHC nurse, and/or Utilization Review Committee.
- Orients all new clinical staff on documentation requirements for all payors and programs; monitors initial documentation skills of new clinical staff; provides related assistance and guidance as required. and, provides for specific training to insure that all staff record clinical, financial, and administrative information in accordance with state and Federal regulations, and program guidelines.
- Ensures that clinical staff is completing all admission paperwork and recertification paperwork according to guidelines; initiates corrective action for discrepancies in documentation.
- Reviews all Treatment Authorization Requests (TAR) for appropriateness of level of care and plans for lengths of stay. Issues appropriate letters of denial of admission or continued stay after consultation with attending physician and/or Utilization Review Committee chairperson.
- Facilitates the monthly Utilization Review Committee and the monthly Quality Assurance Committee process by assisting the chairperson in organizing the meetings, help in preparing the agenda, submitting audit reports, and recording the minutes of the meetings.
- Acts as liaison to regulatory agencies and payors on clarification of procedures and application
  of regulations; prepares medical justification documents to submit reimbursement claims for
  services provided to patients;
- Performs Continuous Quality Improvement (CQI) studies; identifies and investigates problem areas; selects and initiates monitors and follow-up actions for problem resolution; analyzes related statistical information and prepares required reports.
- Develops and implements necessary policy and procedures to conform to current criteria from regulatory agencies and accrediting bodies;
- Monitors new standards and regulations affecting hospital and home health care; determines need for new or modified policies and procedures.
- Collaborates with the Compliance Specialist and Information & Technology staff to insure the maintenance of an accurate data collection system.
- Participates in and coordinates committee work as directed or appropriate.
- Manages or assists with special projects and programs as directed.

- Maintains professional certifications and attends training, workshops, seminars, etc., as appropriate or directed.
- Performs related work as required, including preparing reports and correspondence, entering computer data, copying and filing documents, attending meetings, answering the telephone, ordering supplies, etc.

## TYPICAL PHYSICAL REQUIREMENTS

Sit for extended periods; frequently stand and walk; normal manual dexterity and eye-hand coordination; lift and move object weighing up to 25 pounds; corrected hearing and vision to normal range; verbal communication; use of office equipment including computers, telephones, calculators, copiers, and FAX.

#### **TYPICAL WORKING CONDITIONS**

Work is usually performed in an office environment; continuous contact with staff and the public.

## **DESIRABLE QUALIFICATIONS**

### Knowledge of:

- Psychiatric and medical terminology, hospital and residential care programming, psychiatric diagnosis, and fee structuring standards.
- Federal and State regulations for Medicare, Medi-Cal, and private insurance requirements.
- Principles and techniques for obtaining optimal reimbursement.
- Assessment, treatment planning, and level of care standards.
- Principles, procedures, issues, and trends in mental health and alcohol and drug treatment.
- The laws, rules, and regulations related to the provision of alcohol and drug and mental health services.
- Application of quality assurance measurement.
- Governmental and voluntary standards, requirements and guidelines for quality assurance and utilization review.
- Data collection and basic statistical methods.
- Performance improvement methodology, including criteria development and data analysis techniques.
- Methods of medical case recording and report preparation.
- English usage, spelling, grammar and punctuation; basic mathematics.
- Modern office procedures, practices, and technology.

#### Ability to:

- Interpret, apply, and explain Federal and State laws, rules, and regulations governing behavioral health programs and services.
- Reviewing and analyzing complex regulatory information and reaching sound conclusions.
- Assessing medical necessity of services provided
- Monitor patient care plans and treatment documentation for congruency of orders and appropriateness of care.
- Maintain the confidentiality of administrative, personnel, and clinical information.
- Deal tactfully, respectfully, and courteously with the public and other County staff.
- Identify, research, analyze and recommend solutions to a variety of hospital and outpatient care administrative problems related to quality assurance/utilization review.
- Ensure accurate and complete documentation of all patient care and treatment.
- Establish and maintain cooperative working relationships.
- Exercise sound, independent judgment.
- Effectively communicate verbally and in writing.
- Effectively represent Amador County Behavioral Health Department services with the public and community organizations.

## MINIMUM QUALIFICATIONS

#### Education and Experience:

Graduation from an accredited college or university with a minimum of a Master's degree in nursing, psychology, social work, or marriage and family counseling; PLUS

Three (3) years of professional experience in your field of practice with at least one (1) year at a journeyman level in utilization review and/or quality assurance work.

#### Licenses:

Licensed in California in your field of practice.

<u>Special Requirement:</u> Possession of California Driver's license as issued by the California Department of Motor Vehicles.

To:

**Board of Supervisors** 

Regular Agenda

Consent Agenda

Date: March 4,	2014	M	ise:	Blue Slip Closed Session	
From: Jon Hopk  Department He	(Department Head pease type)		hone Ext. X759	Meeting Date Requested:  03/11/14	
Agenda Title:					
	ispense with the RFP process for	Janen, merekakan ber	and the state of the state of the state of the state of		
Summary: (Provide	e detailed summary of the purpose of t	his item; attach additio	onal page if necessary)		
Please see the at	tached memorandum.				
contract in accor	n: 1) Dispense with the RFP proc dance with PMC's proposal dated	ess and authorize 1 d February 24, 2014	the Planning Director and 0 4 not to exceed \$18.5K.	County Counsel to negotiate a	
Recommendation/F See above recom	반하다는 하다가는 경험 얼마를 하는 사람들은 사이를 가게 하다는 것이다.				
	ach budget transfer form if appropriate	)	Staffing Impacts N/A		
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Is a 4/5ths vote req	uired? Yes ⊠ No □		- Contract Attached:	Yes ☐ No ☐ N/A 🔀	
Committee Review		N/A 🔀	Resolution Attached:	Yes No No N/A	
Name		: Д	Ordinance Attached	Yes No N/A 🔀	
Committee Recomi	mendation:	•	Comments:		
Request Reviewed	l by:				
Chairman		Counse	1 <u>60                                    </u>		
Auditor		GSA DI	rector FOP		
CAO		Risk Ma	anagement		
Distribution Instruct	ions: (Inter-Departmental Only, the rec	uesting Denartment i	s responsible for distribution of	itsida County Danartmente)	
	s, Aaron Brusatori, Community Do			naide county bepartmenta)	
		FOR CLERK US	SE ONLY		
Meeting Date	March 11, 2014	Time 9 a	3.m.	Item# 7B	
Board Action: A	pproved Yes No Un	animous Vote: Yes_	No		
Ayes:				Other:	
Noes		Ordinand			
Absent:	Comments:				
Distributed on	A new ATF is required from		his is a true and correct copy o mador County Board of Superv	of action(s) taken and entered into the official visors.	
Completed by	Department For meeting	ATTEST:			
	of		or Deputy Board Clerk		

# **GENERAL SERVICES ADMINISTRATION**

MAIL: 12200-B Airport Road, Jackson, CA 95642 LOCATION: 12200-B Airport Road, Martell, CA

PHONE: (209) 223-6744 FAX: (209) 223-0749 E-MAIL: <a href="mailto:jhopkins@co.amador.ca.us">jhopkins@co.amador.ca.us</a>



#### **MEMORANDUM**

TO: Board of Supervisors

FROM: Jon Hopkins, GSA Director

**DATE:** March 3, 2014

SUBJECT: Housing Element Update

The County and Cities must complete the statutorily required update of their Housing Elements by the end of June, 2014. During the last update cycle the possibility of doing a countywide update was discussed. We are now in the next update cycle and the Cities approached the County with a proposal for a countywide joint update in an effort to consolidate efforts to increase efficiencies (i.e. reduce redundant efforts for public outreach & analysis of constraints, and for the creation & dissemination of educational materials).

The cities contract with consultants for their planning services. PMC, the consulting firm that provides ongoing planning services for two of our Cities, provided an estimate of \$18.5K as the County's share for updating the Housing Element as part of a joint effort.

In comparison, AECOM, the County's General Plan consultant, provided an estimate of approximately \$33,510K to update the County's Housing Element alone. To further gather estimates, Planning contacted ESA who provided an estimate of \$40-\$50K & Paula Danaluk, who estimated an amount of \$20K depending on the controversy or any major efforts.

Staff took the PMC proposal to the Board of Supervisors on January 14, 2014 for direction. The Board authorized staff to participate in a countywide update and proceed with pursuing Option B (see attached).

Non-competitive acquisitions should be avoided to the greatest extent possible, however, due to the unique nature of this effort the following was considered:

- A. Practicality: the combined consolidation of efforts using the same firm offers efficiencies:
- B. Uniqueness: PMC is currently contracted with four Amador County Cities specifically for Housing Element Update services;
- C. Feasibility: Due to PMC performing the same services for at least two Amador County Cities, there is a cost benefit factor by multi-agencies using the same firm thereby reducing redundancy of effort;
- D. Availability: PMC has already begun the process of reviewing and gathering data needed for our Housing Element Update by virtue of their contracts with the Cities;
- E. Cost-effectiveness: Of the four (4) firms contacted, fees varied from approximately \$18.5K to \$50K for this work. It is evident that pursuing a consultant on our own will increase costs. In addition, the resources and expense of conducting a competitive formal procurement tailored to fit the unique needs of this negotiated work do not appear to be an advantage due to consolidation.

GSA has reviewed the request to dispense with the formal RFP/Bid process from the Community Development Director and Planning Director. Due to the unique nature of the work and PMC's unique position to provide consolidated efforts in preparing the Housing Element Updates for the cities and the County, dispensing with a formal RFP/Bid procedure is recommended.

**Recommendation:** 1) Dispense with the RFP process and authorize the Planning Director and County Counsel to negotiate a contract in accordance with PMC's proposal dated February 24, 2014 not to exceed \$18.5K.

Cc: Chuck fley, CAO

file

To:

**Board of Supervisors** 

Regular Agenda Consent Agenda

Phone Ext. 759  March    Department Head Signature	
Agenda Title:  Dispense with the formal bid process for tree trimming to comply with FAR part 77 for the Airpo Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)  Please see the attached summary memorandum dated March 3, 2014  Recommendation: 1) Dispense with the formal bid process and authorize the Purchasing Agent to conduct this the procurement and contracting procedures in accordance with Title 41 U.S.C. 403 (11) and FAA rules.  Recommendation/Requested Action:  See above  Fiscal Impacts (attach budget transfer form if appropriate)  Staffing Impacts N/A  Grant Funded  Is a 4/5ths vote required?  Yes No No Ordinance Attached: Yes No Ordinance Attached Yes No	ng Date Requested:
Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)  Please see the attached summary memorandum dated March 3, 2014  Recommendation: 1) Dispense with the formal bid process and authorize the Purchasing Agent to conduct this he procurement and contracting procedures in accordance with Title 41 U.S.C. 403 (11) and FAA rules.  Recommendation/Requested Action: Recommendation/Requested Action: Rece above Fiscal Impacts (attach budget transfer form if appropriate)  Staffing Impacts N/A  Grant Funded  Is a 4/5ths vote required?  Yes No No No Committee Review?  No Ordinance Attached:  Resolution Attached:  Yes No Ordinance Attached  Yes No	ort
Recommendation: 1) Dispense with the formal bid process and authorize the Purchasing Agent to conduct this he procurement and contracting procedures in accordance with Title 41 U.S.C. 403 (11) and FAA rules.  Recommendation/Requested Action:  See above Fiscal Impacts (attach budget transfer form if appropriate)  Staffing Impacts N/A  Grant Funded  Is a 4/5ths vote required?  Yes No Committee Review?  N/A   Contract Attached: Yes No Ordinance Attached Yes No	
Recommendation/Requested Action:  See above Fiscal Impacts (attach budget transfer form if appropriate)  Staffing Impacts N/A  Grant Funded  Staffing Impacts N/A  Committee Review?  Staffing Impacts N/A  Contract Attached: Yes No No No N/A N/A N/A N/A NO Ordinance Attached Yes No No Ordinance Attached	
Recommendation/Requested Action:  See above Fiscal Impacts (attach budget transfer form if appropriate)  Staffing Impacts N/A  Staffing Impacts N/A  Contract Attached: Yes No Resolution Attached: Yes No Ordinance Attached Yes No	is procurement usin
Fiscal Impacts (attach budget transfer form if appropriate)  Staffing Impacts N/A  Grant Funded  Is a 4/5ths vote required?  Yes No Committee Review?  N/A Ordinance Attached: Yes No Contract Attached: Yes No No Contract Attached: Yes No No Contract Attached: Yes No	
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Yes ☒ No ☐ Contract Attached: Yes ☐ No  Committee Review? N/A ☒ Resolution Attached: Yes ☐ No  Ordinance Attached Yes ☐ No	
Committee Review? N/A 🗵 Ordinance Attached Yes 🗍 No	□ N/A 🗵
	□ N/A ☒ □ N/A ☒
Comments:	
Request Reviewed by:	
ChairmanCounsel	
Auditor GSA Director	
CAO Risk Management	
Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Depa	artments)
GSA,-Jon Hopkins	
FOR CLERK USE ONLY	
Meeting Date Time Stem# 9 a.m. Item#	7C
Board Action: Approved Yes No Unanimous Vote: YesNo  Ayes: Resolution Ordinance Other:	
Noes ResolutionOrdinance	
Absent: Comments:	
A new ATF is required from I hereby certify this is a true and correct copy of action(s) taken ar records of the Amador County Board of Supervisors.	nd entered into the offici
Completed by Por meeting ATTEST:  Clerk or Deputy Board Clerk	

# **GENERAL SERVICES ADMINISTRATION**

MAIL: 12200-B Airport Road, Jackson, CA 95642 LOCATION: 12200-B Airport Road, Martell, CA

PHONE: (209) 223-6744 FAX: (209) 223-0749 E-MAIL: jhopkins@co.amador.ca.us



#### **SUMMARY MEMORANDUM**

TO: Board of Supervisors

FROM: Jon Hopkins, GSA Director

**DATE:** March 3, 2014

SUBJECT: Procurement under Airport Improvement Programs

The Federal Aviation Administration (FAA) "simplified acquisition threshold" for simple and informal procurement methods is \$100,000.00 as established in Title 41 U.S.C.403 (11). This method of procurement still requires many elements of a formal bid process yet streamlines others and results in less cost; the advantages are:

- 1. Allows the Purchasing Agent to target locally qualified contractors;
- 2. May eliminate the cost of advertising if deemed a small procurement by FAA;
- 3. Does not require, only recommends the development of contract specifications and plans;
- 4. Shortens procurement staff time.
- 5. The formal bid process may not be reimbursable due to Federal procedures deeming this work as a "Small Purchase".

The Airport currently has approved grant funds for the tree trimming located on private property north of the runway and has arranged with the property owners to proceed with this work. The work is estimated at \$30K.

To dispense with our formal bid procedures and use this alternative method allows economic advantages, and is likely to result in the work being awarded to local contractors.

The following was considered:

- A. Practicality: Expedites the procurement process;
- B. Uniqueness: This method of procurement is allowed when using Federal dollars;
- C. Feasibility: Achieves the use of local contractors
- D. Availability: There are local qualified contractors:
- E. Cost-effectiveness: Increases the cost benefit factor by keeping dollars local and the resources and expense of conducting an informal procurement for this work versus a competitive formal procurement is an economical advantage.

**Recommendation:** 1) Dispense with the formal bid process and authorize the Purchasing Agent to conduct this procurement using the procurement and contracting procedures in accordance with Title 41 U.S.C. 403 (11) and FAA rules.

Cc: Chuck Iley, CAO

file

AGENDA IRANSWIIITAL FORW			Regular Agenda	
To: <u>Boar</u>	Board of Supervisors			Consent Agenda Blue Slip
Date: March 4, 2	2014	- Mu	,sc.	Closed Session
From: Chuck Ile	ev. CAO		none Ext.	Meeting Date Requested:
1 10111.	Department Head - please type)	1 11	one Ext.	03/11/14
Department Hea	ad Signature			
Agenda Title:	-	- District to access	shandanad water we	II alana Camancha Dd
	equest by Jackson Valley Irrigation detailed summary of the purpose of thi			Il along Camanche Nu.
Staff is requesting	direction to proceed with prepar			s an abandoned water well in County
right-of-way along	g Camanche Rd.			
Recommendation/R	Requested Action:			
Direction to proce	eed with preparation of documen		o BOS for approval	
	ch budget transfer form if appropriate)		Staffing Impacts None	
None				
Is a 4/5ths vote requ	uired? Yes ☐ No ☒		Contract Attached:	Yes No No N/A
Committee Review?		N/A 🔲	Resolution Attached: Ordinance Attached	Yes
Name Administra	Andrew State of the Control of the C		Comments:	
Committee Recomm Approval to give				
Request Reviewed				
	by.	Counsel		
CAO		Risk Mai	nagement	
	ions: (Inter-Departmental Only, the requ		s responsible for distribution o	outside County Departments)
A. Brusato	ri; Community Developme	ent		
		FOR CLERK US	EONLY	
Meeting Date Man	rch 11, 2014	Time 9 a.m	n	Item# 7D
<u> </u>	<u> </u>	<u>-</u>	5.5	
Board Action: Ap		animous Vote: Yes		
	yes: Resolution Ordinance		Other:	
NoesAbsent:	Resolution Comments:	Ordinance	e	
	A new ATF is required from	I hereby certify the	his is a true and correct copy	of action(s) taken and entered into the official
Distributed on		records of the An	mador County Board of Super	rvisors.
Camplated by	Department	ATTEST:		
1 of meeting			or Deputy Board Clerk	