

# CLARK COUNTY STAFF REPORT

**DEPARTMENT:** Clark County Public Health (CCPH)      CCPH SR2015-1537

**SUBMISSION DATE:** June 1, 2015

**REQUESTED ACTION:** Board of County Councilors' approval of Contract HDC.744 with the Department of Ecology and authorization for the Public Health Director to sign amendments. This renewing grant provides funding to inspect well construction and well decommissioning to protect drinking water in Clark County. The remuneration for this agreement is not to exceed \$25,000 per year.

SR Number:  
Assigned by the manager's office

YES	NO	ACTION
		County Manager review and approval
		Referral to BOCC
X		Hearing required
06/16/2015		Proposed hearing date if referred to BOCC

**BACKGROUND**

Consistent with Strategic Initiative #3 and our mission to protect food, water, and air, Public Health conducts well inspections to protect ground water in Clark County. This on-going grant supports well sealing, tagging, decommissioning, and construction in accordance with the provision of Chapter 173-160 of the Washington Administrative Code.

Approximately 24% of Clark County residents obtain drinking water through private water systems. Since 1995 Clark County has partnered with the Department of Ecology to provide inspection of water wells as they are being constructed and decommissioned. This program was developed to enhance Ecology's capacity to assure that well contractors and their activities operate in compliance with state requirements. The delegation program has been expanded to include special purpose wells in addition to water wells.

**ADMINISTRATIVE POLICY IMPLICATIONS**

N/A

**COUNCIL POLICY IMPLICATIONS**

N/A

**PREVIOUS REVIEWS AND ACTIONS**

N/A



*mgr  
OK  
yin*

**COMMUNITY OUTREACH**

None

**BUDGET IMPLICATIONS**

YES	NO	
X		Action falls within existing budget capacity.
		Action falls within existing budget capacity but requires a change of purpose within existing appropriation
		Additional budget capacity is necessary and will be requested at the next supplemental. If YES, please complete the budget impact statement. If YES, this action will be referred to the county council with a recommendation from the county manager.

**DISTRIBUTION OF BOARD STAFF REPORTS:**

Distribution of staff reports is made via the Grid. <http://www.clark.wa.gov/thegrid/>  
Copies are available by close of business on the Thursday after council deliberations.

**DISTRIBUTION OF COUNTY MANAGER STAFF REPORTS:**

- Alan Melnick, CCPH
- Roxanne Wolfe, CCPH
- Jeff Harbison, CCPH
- Chuck Harman, CCPH
- Brigette Bashaw, CCPH
- Kathy Smith, CCPH

**SUBMITTED BY:**



Alan Melnick, MD, MPH, CPH  
Public Health Director/Health Officer

**DATE:**

\_\_\_\_\_

**ATTACHMENTS**

\_\_\_\_\_

**APPROVAL  
BOARD OF COUNTY COUNCILORS  
CLARK COUNTY, WASHINGTON**

Approved:   
Clark County Washington,  
Board of County Councilors

DATE: June 16, 2015

SR# SR 130-15

The Board office will use this signature block to document the Board's action, if Board action is required. Otherwise, this block will be left blank.

**COUNTY MANAGER ACTION\RECOMMENDATION**

**By:** Mark McCauley  
**Date:**  
**SR Number:**

**REQUESTED ACTION:**

Board of County Councilors' approval of Contract HDC.744 with the Department of Ecology Board of Health and authorization for the Public Health Director to sign amendments. This renewing grant provides funding to inspect well construction and well decommissioning to protect drinking water in Clark County. The remuneration for this agreement is not to exceed \$25,000 per year.

**COUNTY MANAGER RECOMMENDATION:**

Action	Conditions	Referral to council?
<i>Approval\denial</i>	<i>Enter conditions or requests here</i>	<i>Yes\No</i>

This block will be completed by the manager's office

\_\_\_\_\_  
**Mark McCauley, County Manager**

\_\_\_\_\_  
**Date**

**DISTRIBUTION**

- Alan Melnick, CCPH
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  - Jeff Harbison, CCPH
  - Chuck Harman, CCPH
  - Brigette Bashaw, CCPH
  - Kathy Smith, CCPH
-

# BUDGET IMPACT ATTACHMENT

## Part 1: Narrative

Explain what creates a budget impact (additional staff, reduced revenue, change in policy, etc).  
Present assumptions for revenue and expenditure estimates.

## Part 2: Budget Impact

Include full position costs, including salaries and benefits.

Expenditure: 1025/Salaries/Benefits & Indirect Cost

Fund	Dept	Obj	Expense change Year 1	Expense change Year 2	Expense change Year 3	Expense change Year 4	Expense change Year 5	Expense change Year 6	One time or ongoing
1025	702	1xx/2xx	11,250	22,500					
1025	702	4xx	1,250	2,500					
Total			12,500	25,000					

Revenue: Fund 1025/Ecology: Well Delegation Funding

Fund	Dept	Obj	Revenue change Year 1	Revenue change Year 2	Revenue change Year 3	Revenue change Year 4	Revenue change Year 5	Revenue change Year 6	One time or ongoing
1025	000		12,500	25,000					
Total			12,500	25,000					

## Part 3: FTE Profile Over Time

# FTE	Type*	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6

\* operating, revenue, project, temporary

Estimated start date for employees:

Departments may insert an excel spreadsheet into the staff report.