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CITY OF SAN ANTONIO SAN ANTONIO METROPOLITAN HEALTH DISTRICT CITY COUNCIL AGENDA MEMORANDUM

TO:

Sheryl Sculley, City Manager

FROM:

Fernando A. Guerra, MD, MPH, Director of Health

SUBJECT:

Dental Services Contract

DATE:

June 29, 2006

SUMMARY AND RECOMMENDATIONS

This ordinance authorizes the City Manager to accept and execute a contract for a total of \$66,000.00 with local dentist, Danya Greider, DDS, to provide services in clinics for the San Antonio Metropolitan Health District (SAMHD) for the period beginning July 1, 2006 through March 31, 2009. In addition, the ordinance approves payments for these contractual services.

BACKGROUND INFORMATION

SAMHD operates four (4) public health dental clinics which provide basic dental examinations and treatments for low income children and adults. Currently, there is only one (1) full time dentist on staff. Contract dentists are needed to keep the clinics functioning and to meet the demand for services. These professionals are recruited through an ongoing Request for Qualifications (RFQ) process, coordinated with the Contract Services Department. Dr. Greider responded to the RFQ and meets all of the professional requirements.

POLICY ANALYSIS

Acceptance and execution of this professional dental services contract will continue the long-standing practice of utilizing local expertise and outsourcing to support public health programs of the City.

FISCAL IMPACT

The aggregate total of the Dental Services contract to be charged to the general fund is \$66,000.00; Dr. Greider will be paid at a rate of \$55.00 per hour. The amount of this contract may be reduced, depending on the ability of SAMHD to recruit and hire full time dentists for two Public Health Dentist positions.

COORDINATION

The City Attorney's Office and the Human Resources Department - Risk Management Division, have reviewed and approved the attached contract. The SAMHD coordinated this item with the Office of Management and Budget, Contract Services and Finance Department.

SUPPLEMENTARY COMMENTS

A Discretionary Contracts Disclosure form is attached as required.

Fernando A. Guerra, MD, MPH
Director of Health

Assistant City Manager

Approved for Council Consideration:

City Manager

City of San Antonio Discretionary Contracts Disclosure For use of this form, see Section 2-59 through 2-61 of the City Code (Ethics Code)

Attach additional sheets if space provided is not sufficient.

(1) Identify any individual or business entity that is a party to the discretionary contract:
Danya Greider, DDS
(2) Identify any individual or business entity which is a <i>partner</i> , <i>parent</i> or <i>subsidiary</i> business entity, of any individual or business entity identified above in Box (1):
☑No partner, parent or subsidiary; <i>or</i>
List partner, parent or subsidiary of each party to the contract and identify the corresponding party:
(3) Identify any individual or business entity that would be a <i>subcontractor</i> on the discretionary contract.
No subcontractor(s); or
List subcontractors:
(4) Identify any <i>lobbyist</i> or <i>public relations firm</i> employed by any party to the discretionary
contract for purposes related to seeking the discretionary contract.
No lobbyist or public relations firm employed; or
List lobbyists or public relations firms:

¹ A business entity means a sole proprietorship, partnership, firm, corporation, holding company, joint-stock company, receivership, trust, unincorporated association, or any other entity recognized by law. A sole proprietor should list the name of the individual and the d/b/a, if any.

four (24) months made to any of Council, or to any political action individual or business entity wabove, or by the officers, owner	aling one hundred dollars (\$100) current or former member of City on committee that contributes to hose identity must be disclosed is of any business entity listed in I	Council, any City Council under Box (Box (1), (2) or	candidate for City elections, by any 1), (2), (3) or (4)		
☑No contributions made;	le; If contributions made, list below:				
By Whom Made:	To Whom Made:	Amount:	Date of Contribution:		
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known facts which, reasonably employee would violate <u>Section</u> participating in official action rel	•	s to whether <u>Sode),</u> ("confli 	any city official or cts of interest") by		
before the discretionary control	oplemented in the event there is act is the subject of council act is about which information is r	ion, and no i	later than five (5)		
Signature:	Title: DDS Company or D/B/A:	Date: 5/	24/06		

² For purposes of this rule, facts are "reasonably understood" to "raise a question" about the appropriateness of official action if a disinterested person would conclude that the facts, if true, require recusal or require careful consideration of whether or not recusal is required.

LITIGATION DISCLOSURE

1. Have you or any member of your Firm or Team to be assigned to this engagement ever been

	indicted or convicted of a felony or misdemeanor greater than a Class C in the last five (5) years?					
	Circle One	YES	NO			
2.	Have you or any member of your Firm or Team to be assigned to this engagement been terminated (for cause or otherwise) from any work being performed for the City of San Antonio or any other Federal, State or Local Government, or Private Entity or Person?					
	Circle One	YES	NO			
3.	. Have you or any member of your Firm or Team to be assigned to this engagement been involved in any claim or litigation with the City of San Antonio or any other Federal, State or Local Government, or Private Entity or Person during the last ten (10) years?					
	Circle One	YES	NO			
the cor pr	e person(s), the nature nviction, termination, o	, and the status and claim or litigation, as	ove questions, please indicator outcome of the information applicable. Any such infortist form and returned to the such applicable in the such applicable is form and returned to the such applicable in the s	ntion, indictment, mation should be		
inf in aw	formation required and u disqualification of the rarded.	nderstands that failure	olicant has fully and truthf to disclose the required infor deration, or termination of	mation may result		
Sig	gnature	_				
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Pri	Danya Greid nted Name	er, DDs	,			
Pri Da	nted Name 5/24/06	er, DDs				