

Toni N. Harp MAYOR Michael Gormany BUDGET DIRECTOR

## CITY OF NEW HAVEN OFFICE OF MANAGEMENT & BUDGET 165 Church Street, New Haven, CT 06510

**City Of New Haven Transfer Form** Health Department Agency Name Office of Management and Budget Monday, October 15, 2018 Date Prepared Michael Gormany, Budget Director Transfer Number 301-19-1 Phone (203) 946-6413 Fax (203) 946-7924 Fiscal Year 2019 mgormany@newhavenct.gov Quarter 2 FROM TO **Object Code** Object Organization **Object Code** Organization Organization Transfer Organization Object Transfer Amount Name Code Name code Amount Name Code Name code 1 Temp PT Help 60,000 Health 1301010 Salary 50110 60,000 Health 13011010 56695 2 3 4 5 6 Total Total \$60,000.00 \$60.000.00

## Transfer Explanation

This is to request a transfer of \$60,000 from the *Per Diem* line item in the Health Department budget to ensure the continuation of our work. Toward that end, we have engaged the services of the Delta-T Group for temporary nursing services. Registered nurses from Delta-T have covered all schools in which nurses were not available. They have also assisted, through onsite clinics, in the delivery of flu and Hep A vaccines to residents in senior housing, homeless shelters, and to City employees. The current flu season does not end until March of 2019. The State of Connecticut Department of Public Health has identified several flu and Hep A cases in our area. The Health Department is mandated to vaccinate residents, including those who are homeless, against these viruses. The transferred funds will be used for a contract with Delta-T Group to pay for nursing services.

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Department Head, Deputy, or Assistant Chief

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Coordinator or Deputy Coordinator

