

Lexington-Fayette Urban County Government

200 E. Main St Lexington, KY 40507

Legislation Text

File #: 0428-18, Version: 1

A Resolution authorizing the Mayor, on behalf of the Urban County Government, to execute a Professional Services Agreement with Sara Charles, as a Sexual Assault Nurse Examiner, to provide on-call forensic examinations under the Sexual Assault Nurse Examiner Program, at a cost not to exceed \$40 for each scheduled on-call period, \$230 for each completed forensic examination, \$50 per case for professional testimony in court, and the reasonable cost of medical liability insurance. [Div. of Police, Weathers]

Authorization to execute Professional Service Agreement with Sara Charles to serve as a Sexual Assault Nurse Examiner on an "on-call" basis for the performance of forensic examinations- FY 2018. (L0428-18) (Weathers/Armstrong)

Budgetary Implications: Yes Advance Document Review:

Law: { Select Yes/No, Completed by [Attorney Name, Date]}

Risk Management: {Select Yes/No, Completed by [Official, Date]}

Fully Budgeted: Yes

Account Number: 3140-505506-5561-71299 and 3140-505506-5561-71217

This Fiscal Year Impact: \$54,884 Budgeted for all nurse examiners

Annual Impact: \$

Project: SANE_2018 and SANE3_2018
Activity: FED GRANT and STA GRANT

Budget Reference: 2018 Current Balance: \$39,194

BE IT RESOLVED BY THE COUNCIL OF THE LEXINGTON-FAYETTE URBAN COUNTY

GOVERNMENT:

Section 1 - That the Mayor, on behalf of the Lexington-Fayette Urban County Government, be and hereby is authorized to execute the Professional Services Agreement, which is attached hereto and incorporated herein by reference, with Sara Charles, as a Sexual Assault Nurse Examiner, to provide on-call forensic examinations under the Sexual Assault Nurse Examiner Program.

Section 2 - That an amount, not to exceed \$40.00 for each scheduled on-call period, \$230.00 for each completed forensic examination, \$50.00 per case for professional testimony in court, and the reasonable cost of medical liability insurance, be and hereby is approved for payment to Sara Charles, from accounts #3140-505506-71299 and #3140-505506-71217, pursuant to the terms of the Professional Services Agreement.

Section 3 - That this Resolution shall become effective on the date of its passage. PASSED URBAN COUNTY COUNCIL:

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MA	AYOR
ATTEST:	
CLERK OF URBAN COUNTY COUNCIL	