

**RESOLUTION OF THE BOARD OF SUPERVISORS OF THE
COUNTY OF SANTA CLARA DELEGATING AUTHORITY
TO EXECUTE TRAVEL NURSE STAFFING AGREEMENTS**

WHEREAS, the County of Santa Clara owns and operates Santa Clara Valley Medical Center (SCVMC) and the Children's Shelter and Custody Health Services Department which provide nursing services to their patients;

WHEREAS, there is a national shortage of registered nurses, and despite recruitment efforts, SCVMC and the Children's Shelter and Custody Health Services Department have been unable to attract sufficient numbers of registered nurses; and

WHEREAS, delegating contracting authority to the Chief Executive Officer of Santa Clara Valley Health and Hospital System as set forth below is appropriate in light of the agreements required to facilitate provision of these services and the need for expeditious and timely provision of services.

NOW, THEREFORE, BE IT RESOLVED by the Board of Supervisors of the County of Santa Clara, State of California, that the Board of Supervisors delegates to the Chief Executive Officer of Santa Clara Valley Health and Hospital System, or his or her designee, authority to:

1. Execute contracts and contract amendments with the following agencies for the provision of travel nurse staffing services for the period July 1, 2009, to June 30, 2011, in an amount not to exceed One Million Five Hundred Thousand Dollars (\$1,500,000) per fiscal year:

Advanced Clinical Employment Staffing, LLC

Cross Country TravCorps, Inc. dba Cross Country Staffing

HealthSource Global Staffing, Inc.

HRN Services, Inc.

Maxim Healthcare Services, Inc. dba TravelMax

Medical Staffing Network, Inc. dba IntelliStaf Travel

2. All contracts and amendments shall first be reviewed and approved by County Counsel as to form and legality and approved by the Office of the County Executive.

3. The delegation of authority commences on June 9, 2009, and expires on June 30, 2011.

PASSED AND ADOPTED by the Board of Supervisors of the County of Santa Clara, State of California, on _____, by the following vote:

AYES:
NOES:
ABSENT:
ABSTAIN:

Liz Kniss, President
Board of Supervisors

Signed and certified that a copy of this document has been delivered by electronic or other means to the President, Board of Supervisors.

ATTEST:

Maria Marinos, Clerk of the Board of Supervisors

APPROVED AS TO FORM AND LEGALITY:



Deputy County Counsel