# **AGENDA WORKSHEET**

***Submit completed worksheet to:***

*Siskiyou County Clerk, 510 N Main St, Yreka, CA 96097*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[ ]**  |  | **Time Requested:** |  | **Meeting Date:** | **August 9, 2022** |
| ***OR*** |
| **Consent** | **[x]**  |  |
| **Contact Person/Department:** | **Shelly Davis, Public Health Director** | **Phone:** | **841-2140** |
| **Address:** | **810 S Main Street, Yreka CA 96097** |
| **Person Appearing/Title:** | **Shelly Davis, Public Health Director** |
| **Subject/Summary of Issue:** |
| Siskiyou County Health and Human Services Agency - Public Health Division and Siskiyou County Health and Human Services Agency – Social Services Division is respectfully requesting permission to approve the CalWORKS MOU Home Visiting Initiative sub-award and sub-recipient agreement that will support positive health, development and well-being outcomes for pregnant and parenting individuals, families, and infants born into poverty. Minimum amount of the Agreement is Four Hundred Twenty Thousand Three Hundred Thirty Six Dollars ($420,336.00) for the term of July 1, 2022 through June 30, 2024.  |
| **Financial Impact:** |
| **NO** | [ ]  | *Describe why no financial impact:*  |
| **YES** | [x]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: | $420,336 |  |  |  |  |
| Fund:  | 2121, 2120 |  | Description: | PHD & SSD | Org.: | 401015501010 | Description: | PHD & SSD |
| Account: | 595000795000 |  | Description: | Operating Transfer In/Transfer Out |  |
| Activity Code:  | 8328 |  | Description: |       |  |
| Local Preference: YES [ ]  NO [ ]  |
| For Contracts – *Explain how vendor was selected:* N/A |
|       |
| Additional Information: | FY 22/23 $210,168.00 Minimum and FY 23/24 $210,168.00 Minimum, with a total amountNTE $420,336.00  |
|  |
| **Recommended Motion:** |
| “Recommend that the Board of Supervisors approve and authorize the Chair to sign the Siskiyou County Health and Human Services Agency - Public Health Division and Siskiyou County Health and Human Services Agency – Social Services Division CalWORKS MOU Home Visiting Initiative sub-award and sub-recipient agreement for the term of July 1, 2022 through June 30, 2024. |
| **Reviewed as recommended by policy:** |  | ***Special Requests*:** |
| County Counsel |  |
| *Certified Minute Order(s)* |  | *Quantity:* | 1 |
| Auditor |       |
|  |  |
| Personnel |       | *Other:* | 3 copies of agreement for Siskiyou County Public Health |
| CAO |       |       |

***NOTE: For consideration for placement on the agenda, the original agenda worksheet and backup material must be submitted directly to the Board Clerk (after reviewing signatures have been obtained) by 12:00 p.m. on the Wednesday prior to the Board Meeting.*** Revised 1/15/15