***Submit completed worksheet to:***

*Siskiyou County Clerk, 311 Fourth St., Rm 201, Yreka, CA 96097*

# **Agenda Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[ ]**  |  | **Time Requested:** |  | **Meeting Date:** | **12/12/2023** |
| ***OR*** |
| **Consent** | **[x]**  |  |
| **Contact Person/Department:** | **Sarah Collard, Ph.D. / Health & Human Services Agency - Behavioral Health Division** | **Phone:** | **530-841-4802** |
| **Address:** | **818 S Main Street, Yreka CA 96097** |
| **Person Appearing/Title:** | **Sarah Collard, Ph.D. / Director of Health & Human Services** |
| **Subject/Summary of Issue:** |
| First Addendum to Contract for Services – City of Yreka, Yreka Police DepartmentSiskiyou County Health and Human Services Agency, Behavioral Health Division, is requesting approval to extend the term to June 30, 2026 and increase the funding for the contract with the City of Yreka Police Department. The purpose of the contract is to provide a Homeless Liaison Officer responsible for assisting those experiencing homelessness and provide guidance on the resources available to assist them. The contract term will be July 1, 2023 through June 30,2026 |
| **Financial Impact:** |
| **NO** | [x]  | *Describe why no financial impact:*  |
| **YES** | [ ]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: | $480,000.00 |  |  |  |  |
| Fund:  | 2122 |  | Description: | Behavioral Health | Org.: | 401030 | Description: | Behavioral Health |
| Account: | 723000 |  | Description: | Professional & Specialized Svcs |  |
| Activity Code:  |  |  | Description: |  |  |
| Local Preference: YES [x]  NO [ ]  |
| For Contracts – *Explain how vendor was selected:* Vendor was selected for special services provided |
|  |
| Additional Information: | Costs to be shared between Human Services and Behavioral Health. |
| Fund 2172-501010-723000  |
| **Recommended Motion:** |
| The Board of Supervisors approve and authorize the Chair to sign the MOU between Siskiyou County Health & Human Services Agency and the City of Yreka to extend the term and increase the funding for the term July 1, 2023 through June 30,2026. |
| **Reviewed as recommended by policy:** |  | ***Special Requests*:** |
| County Counsel |       |  |  |
|  |  |  | *Certified Minute Order(s)* |       | *Quantity:* |       |
| Auditor |       |  |  |  |  |  |
|  |  |  |  |  |  |
| Personnel |       |  | *Other:* | Please return 1 original to R. Bullock at 818 Main St       |
| 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 10:00 a.m. on the Monday the week prior to the Board Meeting.*** Revised 8/09/2021