***Submit completed worksheet to:***

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

# **Agenda Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[ ]**  |  | **Time Requested:** | **N/A** | **Meeting Date:** | **1/2/2024** |
| ***OR*** |
| **Consent** | **[x]**  |  |
| **Contact Person/Department:** | **Sarah Collard, Ph.D. / Health & Human Services Agency - Behavioral Health Division** | **Phone:** | **841-4802** |
| **Address:** | **2060 Campus Drive, Yreka, CA 96097** |
| **Person Appearing/Title:** | **Sarah Collard, Ph.D. / Director of Health & Human Services** |
| **Subject/Summary of Issue:** |
| DHCS Path Justice-Involved Round 3 GrantSiskiyou County Health and Human Services Agency, Behavioral Health Division, is requesting approval of the Resolution accepting the California Providing Access and Transforming Health (PATH) Justice-Involved Planning and Capacity Building Program Grant to implement Medi-Cal pre-release services between April 1, 2024 and March 31, 2026 with an allocation of $842,657.00. |
| **Financial Impact:** |
| **NO** | [ ]  | *Describe why no financial impact:*       |
| **YES** | [x]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: | $842,657. |  |  |  |  |
| Fund:  | TBD |  | Description: | Mental Health | Org.: | 401030 | Description: | Mental Health |
| Account: | 540800 |  | Description: | State/Other |  |
| Activity Code:  |       |  | Description: |       |  |
| Local Preference: YES [ ]  NO [x]  |
| For Contracts – *Explain how vendor was selected:* DHCS contracted with Public Consulting Group (PCG) as the Third Party |
| administrator (TPA) to support the administration and management of the Justice-Involved Reentry Initiative. |
| Additional Information: | anticipate new fund, non-interest bearing, to be created |
|       |
| **Recommended Motion:** |
| The Board of Supervisors approve and authorize the Chair to sign the Resolution accepting the California Providing Access and Transforming Health (PATH) Justice-Involved Planning and Capacity Building Program Grant and authorize the Auditor to establish the budget. |
| **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