***Submit completed worksheet to:***

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

# **Agenda Worksheet**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Regular** | |  | | | |  | | **Time Requested:** | | | | | | **10 mintues** | | | | | | **Meeting Date:** | | | | **April 2, 2024** | | | |
| ***OR*** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Consent** | | | |  | |  | | | | | | | | | | | | | | | | | | | | | |
| **Contact Person/Department:** | | | | | | | | | | | | | **Debbie Pimentel/Probation** | | | | | | | | | | **Phone:** | | | **(530)842-8884** | |
| **Address:** | | | | | **805 Juvenile Lane; Yreka, CA 96097** | | | | | | | | | | | | | | | | | | | | | | |
| **Person Appearing/Title:** | | | | | | | | | | **Michael Coley/ Chief Probation Officer** | | | | | | | | | | | | | | | | | |
| **Subject/Summary of Issue:** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Shasta County Juvenile Facility  Pursuant to Welfare & Institutions Code Section 850-852, the Probation Department currently has an agreement with Shasta County Juvenile Facility for placement of justice involved youth. As of late, youth bookings have increased rapidly enough that we will soon exceed our encumbrance which was approved at the beginning of the fiscal year. Tehama County, with whom we also have a contract, has not had beds available. We are currently working with the Shasta County Chief Probation Officer to process an addendum; however, we will most likely exceed the 'not to exceed' amount prior to the process being completed.  The Probation Department respectfully requests, pursuant to Welfare & Institutions Code Section 850-852, to pay Shasta County outside the contract at the previously agreed upon daily rates until an addendum can be executed. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Financial Impact:** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **NO** |  | | *Describe why no financial impact:* | | | | | | | | | | | | | | | | | | | | | | | | |
| **YES** |  | | *Describe impact by indicating amount budgeted and funding source below* | | | | | | | | | | | | | | | | | | | | | | | | |
| Amount: | | | | | | daily rate | | | | |  |  | | |  | | |  | | | | | | | | | |
| Fund: | | | | | | 1001 | | | | |  | Description: | | | general fund | | | Org.: | | | 203050 | | Description: | | | Probation | |
| Account: | | | | | | 740000 | | | | |  | Description: | | | support & care | | |  | | | | | | | | | |
| Activity Code: | | | | | |  | | | | |  | Description: | | |  | | |  | | | | | | | | | |
| Local Preference: YES  NO | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For Contracts – *Explain how vendor was selected:* proximity to Siskiyou County and availibility | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Additional Information: | | | | | | | | | Approved daily rates based on type of detention utilized | | | | | | | | | | | | | | | | | | |
| $175/day standard bed, $369/day River's Edge Academy, $489/day, Secure Track Academy | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Recommended Motion:** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pursuant to Welfare & Institutions Code Section 850-852, authorize Probation Department to pay Shasta County for youth facility Board and Care costs, outside the contract, at a the daily rate determined by the type of detention utilized, as described in §1.A of our fully executed agreement, until an addendum can be executed. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Reviewed as recommended by policy:** | | | | | | | | | | | | | | | |  | ***Special Requests*:** | | | | | | | | | | |
| County Counsel | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | |
|  | | | | | | |  | | | | | | | | |  | *Certified Minute Order(s)* | | | | |  | | | *Quantity:* | |  |
| Auditor | | | | | | |  | | | | | | | | |  |  | | | | |  | | |  | |  |
|  | | | | | | |  | | | | | | | | |  |  | | | | |  | | |  | | |
| Personnel | | | | | | |  | | | | | | | | |  | *Other:* | |  | | | | | | | | |
| 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