***Submit completed worksheet to:***

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

# **Agenda Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[ ]**  |  | **Time Requested:** |  | **Meeting Date:** | **June 3, 2025** |
| ***OR*** |
| **Consent** | **[x]**  |  |
| **Contact Person/Department:** | **Dr. Sarah Collard, HHSA** | **Phone:** | **841-4802** |
| **Address:** | **818 South Main Street Yreka, CA 96097** |
| **Person Appearing/Title:** | **Sarah Collard, Ph.D. Health & Human Services Agency Director** |
| **Subject/Summary of Issue:** |
| The Siskiyou County Health and Human Services Agency - Social Services Division is requesting approval of the addendum to the contract with the California Department of Social Services for Quality Assurance and Case Review services to be performed in accordance with the federal Child and Family Services Review (CFSR). State assistance is required to compy with the Federally mandated CFSR qualitative case review process under federal regulations AB 592 and AB 403.  |
| **Financial Impact:** |
| **NO** | [ ]  | *Describe why no financial impact:*       |
| **YES** | [x]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: | $858,681.00 |  |  |  |  |
| Fund:  | 2120 |  | Description: | Human Services | Org.: | 501010 | Description: | HS Admin |
| Account: | 723000 |  | Description: | Prof. Svcs |  |
| Activity Code:  |       |  | Description: |       |  |
| Local Preference: YES [ ]  NO [x]  |
| For Contracts – *Explain how vendor was selected:*       |
| State Initiated Contract |
| Additional Information: |       |
|       |
| **Recommended Motion:** |
| That the Honorable Board of Supervisors approve and the Chair sign the addendum to the Standard Agreement (STD 213) Number 23-5029 between the California Department of Social Services (CDSS) and Siskiyou County Health and Human Services Agency for the first-level Quality Assurance and Case ReviewContract effective July 1, 2023 through March 31, 2030.  |
| **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