

DEPARTMENT: Human Services/Fiscal

BY: James Rydingsword

PHONE: (209) 966-2000

RECOMMENDED ACTION AND JUSTIFICATION:

It is respectfully requested that your Board approve the attached budget action form to allow for payment of the professional services contract for IHSS provider negotiations.

(\$8,500)

BACKGROUND AND HISTORY OF BOARD ACTIONS:

Please see attached Board Memo.

ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Please see attached Board Memo.

Financial Impact? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Current FY Cost: \$	Annual Recurring Cost: \$
Budgeted In Current FY? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially Funded		
Amount in Budget: \$ <u>0</u>		List Attachments, number pages consecutively
Additional Funding Needed: \$ <u>8,500</u>		Board Memo, page 1
Source:		Budget Action Form, page 2
Internal Transfer <u>X</u>		
Unanticipated Revenue _____	4/5's vote	
Transfer Between Funds _____	4/5's vote	
Contingency _____	4/5's vote	
() General () Other		

CLERK'S USE ONLY:

Res. No.: 09-17 Ord. No. _____
 Vote - Ayes: 4 Noes: _____
 Absent: None
 Approved
 Minute Order Attached No Action Necessary

COUNTY ADMINISTRATIVE OFFICER:

Requested Action Recommended
 No Opinion
 Comments:

The foregoing instrument is a correct copy of the original on file in this office.

Date: _____
 Attest: MARGIE WILLIAMS, Clerk of the Board
 County of Mariposa, State of California

By: _____
 Deputy

CAO [Signature]



**MARIPOSA COUNTY
HUMAN SERVICES DEPARTMENT**

P.O. Box 99 • Mariposa, CA 95338 • (209) 966-2000 • Fax (209) 966-2486
□ Behavioral Health and Recovery Services (209) 966-2000 □ Employment and Community Services (209) 966-3609
□ Fiscal Services (209) 966-2131 □ Social Services (209) 966-2442



JAMES A. RYDINGSWORD, DIRECTOR

April 7, 2009

TO: Members, Board of Supervisors
Rick Benson, CAO
FROM: James Rydingsword, Director *JRC*
RE: Professional Services Contracts for In Home Supportive Services (IHSS) Provider
Negotiations

Recommendation

It is respectfully requested that your Board approve the attached budget action form to allow for payment of the professional services contracts for IHSS provider negotiations.

Background/Current Situation

In November 2008 your Board approved professional service contracts with Mike Coffield and Liebert, Cassidy and Whitmore for the purpose of negotiating with IHSS Providers and their union (CUHW). At that time county general fund was to be used to pay these contracts. The IHSS Public Authority, Fund 411, has sufficient funds to cover this cost. The attached budget action form funds the professional services appropriation line for this purpose.

Financial

The attached budget action form redistributes existing budget appropriations in fund 411, IHSS Public Authority, to allow for payment of the professional services contracts in the amount not to exceed \$8,500. This will be a savings to the general fund.

BUDGET ACTION FORM

FUND	DEP/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
411	525	04-18	Professional Services		8,500	
411	525	04-26	Provider Stipends			5,500
411	525	04-33	Provider Training			3,000
TOTALS					8,500	8,500

TRANSFER BETWEEN FUNDS					DEBIT	CREDIT
TOTALS					0	0

ACTION REQUESTED: (Check all that apply)

- () Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the county budget, or in any one fund of the budget , or transferring appropriation from Contingencies
- (x) Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget to another, or between categories within a budget unit;

JUSTIFICATION To pay for contracted negotiation services

DEPT HEAD SIGNATURE <i>[Signature]</i>	DATE <i>4-7-09</i>
APPROVED BY RES NO. <i>09-171</i> CLERK <i>[Signature]</i>	DATE <i>4-14-09</i>

DEPARTMENT <u>Human Services</u>	AUDITOR'S USE ONLY BA #
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