



MENDOCINO COUNTY BOARD OF SUPERVISORS ONLINE AGENDA SUMMARY

BOARD AGENDA No. 4(cc)

- Arrangements for public hearings and timed presentations must be made with the Clerk of the Board in advance of public/media noticing
- Agenda Summaries must be submitted no later than *noon* Monday, 15 days prior to the meeting date (along with electronic submittals)
- Send 1 complete original single-sided set and 1 photocopy set – Items must be signed-off by appropriate departments and/or Co. Co.
Note: If individual supporting document(s) exceed 25 pages each, or are not easily duplicated, please provide 10 hard-copy sets)
- Transmittal of electronic Agenda Summaries, records, and supporting documentation must be emailed to: bosagenda@co.mendocino.ca.us
- Electronic Transmission Checklist: ☒ Agenda Summary ☐ Records ☐ Supp. Doc. ☐ If applicable, list other online information below
- Executed records will be returned to the department within one week. *Arrangements for expedited processing must be made in advance*

TO: Board of Supervisors DATE: January 27, 2012
 FROM: HHSA- Mental Health Branch MEETING DATE: February 14, 2012
 DEPARTMENT RESOURCE/CONTACT: Stacey Cryer PHONE: 463-7774 Present ☐ On Call ☒
 Additional Contact: Doug Gherkin PHONE: 463-7882 Present ☐ On Call ☒
 Consent Agenda ☒ Regular Agenda ☐ Noticed Public Hearing ☐ Time Allocated for Item: _____

■ **AGENDA TITLE:** Approve Amendment No. 3 to BOS Agreement No. 10-130 with Manzanita Services, Inc., Increasing Agreement Amount by \$111,630 for a New Total Agreement Amount of \$408,534 for a Client Recovery Resource Center, and Extend Term Date to June 30, 2012 in Fiscal Year 2011/2012 - Health and Human Services Agency (HHSA) - Mental Health Branch (MHB)

■ **PREVIOUS BOARD/BOARD COMMITTEE ACTIONS:** BOS No. 09-032, BOS No. 09-074A and BOS No. 09-154, BOS No. 10-130, BOS No. 10-130A, BOS No. 10-130A2

■ **SUMMARY OF REQUEST:** In collaboration with Mendocino County Adult Mental Health Recovery Services (MC AMHRS), Manzanita Services, Inc. operates a Client Recovery Resource Center (CRRC) Monday through Friday in Ukiah and Tuesday through Friday in Willits, serving up to 50 AMHRS referred clients with severe and persistent mental illness. This program offers support, education, and meaningful daytime activities, and is designed to assist with client stabilization and crisis prevention with the goal of avoiding the need for clients to be placed in higher levels of care outside of Mendocino County. Amendments BOS No. 10-130A and BOS No. 10-130A2 extended the termination date of BOS No. 10-130 through December 31, 2011 and added funding for the additional five months. This Amendment to BOS No. 10-130 will extend the termination date through June 30, 2012 and add funding for an additional six months. This will provide continuity of services for this client population until the competitive bidding process can be completed for FY 2012/2013.

■ **SUPPLEMENTAL INFORMATION AVAILABLE ONLINE AT:**

■ **ADDITIONAL INFORMATION ON FILE WITH THE CLERK OF THE BOARD (CHECKED BY COB IF APPLICABLE):** ☐

FISCAL IMPACT:			
Source of Funding	Current F/Y Cost	Annual Recurring Cost	Budgeted in Current F/Y
MHSA	\$ 186,031	\$408,534 over 2 years	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

■ **Grant Related:** ☐ yes ☒ no If yes, is there a County match? ☐ yes ☒ no Amount: _____

■ **SUPERVISORIAL DISTRICT:** 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ All ☒ **VOTE REQUIREMENT:** Majority ☐ 4/5ths ☐

■ **RECOMMENDED ACTION/MOTION:** Approve and authorize the Board Chair to sign Amendment No. 3 to BOS Agreement No. 10-130 with Manzanita Services, Inc., increasing agreement amount by \$111,630 for a new total agreement amount of \$408,534 for a Client Recovery Resource center and extend term date to June 30, 2012 in Fiscal-Year 2011/2012; and authorize the HHSA Director to sign any future amendments to the agreement that do not affect the annual maximum amount.

■ **ALTERNATIVES:** Return to staff for alternative handling

■ **CEO REVIEW (NAME):** Kristi Furman **PHONE:** 463-4221

RECOMMENDATION: Agree ☐ Disagree ☐ No Opinion ☐ Alternate ☐ Staff Report Attached ☐

BOARD ACTION (DATE: _____): ☐ Approved ☐ Referred to _____ ☐ Other _____

RECORDS EXECUTED: ☐ Agreement: _____ ☐ Resolution: _____ ☐ Ordinance: _____ ☐ Other _____