

**Sierra County
Board of Supervisors'
Agenda Transmittal &
Record of Proceedings**

MEETING DATE: August 4, 2020	TYPE OF AGENDA ITEM: <input type="checkbox"/> Regular <input type="checkbox"/> Timed <input checked="" type="checkbox"/> Consent
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DEPARTMENT: Behavioral Health APPROVING PARTY: Lea Salas, Administrative Director PHONE NUMBER: (530) 993-6746

AGENDA ITEM: Resolution Approving the Training/Consultation Agreement between Victor Training Services and Sierra County Behavioral Health and Authorizing the Behavioral Health Administrative Director to sign the Agreement

SUPPORTIVE DOCUMENTS ATTACHED: Memo Resolution Agreement Other

BACKGROUND INFORMATION: Please see attached memo

FUNDING SOURCE: 0515670

GENERAL FUND IMPACT: No General Fund Impact

OTHER FUND:

AMOUNT: \$11,400.00 Annually

ARE ADDITIONAL PERSONNEL REQUIRED?

 Yes, -- --
 No

IS THIS ITEM ALLOCATED IN THE BUDGET? Yes No

IS A BUDGET TRANSFER REQUIRED? Yes No

SPACE BELOW FOR CLERK'S USE

<p>BOARD ACTION:</p> <input type="checkbox"/> Approved <input type="checkbox"/> Approved as amended <input type="checkbox"/> Adopted <input type="checkbox"/> Adopted as amended <input type="checkbox"/> Denied <input type="checkbox"/> Other <input type="checkbox"/> No Action Taken	<input type="checkbox"/> Set public hearing For: _____ <input type="checkbox"/> Direction to: _____ <input type="checkbox"/> Referred to: _____ <input type="checkbox"/> Continued to: _____ <input type="checkbox"/> Authorization given to: _____	Resolution 2020- _____ Agreement 2020- _____ Ordinance _____ Vote: Ayes: Noes: Abstain: Absent: <input type="checkbox"/> By Consensus
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COMMENTS:

CLERK TO THE BOARD

DATE

Memorandum

To: Sierra County Board of Supervisors
From: Lea Salas, Administrative Director
Reference: Agenda Item
Date of memo: July 28, 2020
Date of Board Meeting: August 4, 2020

Requested Action: Resolution Approving the Training/Consultation Agreement between Victor Training Services and Sierra County Behavioral Health and Authorizing the Behavioral Health Administrative Director to sign the Agreement

Mandated by: State of California DMH Information Notice NO: 08-38

Funding

Budgeted? Yes No

Revenue	\$11,400	MHSA WET
Expenses	\$11,400	MHSA WET
Difference	0	

Background Information:

DMH Information Notice No: 08-38 indicates Therapeutic Behavioral Services (TBS) are to be provided by Mental Health Plans under the need to provide Early, Periodic, Screening, Diagnostic and Treatment Services. Sierra County Behavioral Health has attempted, with no success, to contract outside of the county to provide services to eligibility community members. To provide this required service Sierra County Behavioral Health wishes to train the Student/Parent Navigator and provide them with consultation services. Sierra County Behavioral Health will then be in a position to provide this required service.

There are no increased staff costs unless the Department experiences the case load exceeding the capacity of the activities of the Seasonal Student/Parent Navigator. Should the capacity of the current position be exceeded, any position changes/requests will be brought back to the board for further discussion and direction. This agreement cost is covered through the MHSA Plan under the Workforce, Education and Training component.

Potential Issues to consider:

At this point in time no potential issues have been identified to consider.

Alternatives or Impacts of disapproval:

Sierra County Behavioral Health will continue to be out of compliance with state Mental Health Plan requirements.

BOARD OF SUPERVISORS, COUNTY OF SIERRA, STATE OF CALIFORNIA

RESOLUTION NO. _____

**IN THE MATTER OF APPROVING THE TRAINING/CONSULTATION AGREEMENT
BETWEEN VICTOR TRAINING SERVICES AND SIERRA COUNTY BEHAVIORAL HEALTH
AND AUTHORIZING THE BEHAVIORAL HEALTH ADMINISTRATIVE DIRECTOR TO
SIGN THE AGREEMENT**

WHEREAS, the Sierra County Board of Supervisors approves the Victor Training Services Agreement.

NOW THEREFORE BE IT RESOLVED, the Sierra County Board of Supervisors authorizes Lea Salas, Administrative Director of Behavioral Health, or designee, to sign the agreement.

ADOPTED by the Board of Supervisors of the County of Sierra, State of California on the 4th day of August, 2020, by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

JIM BEARD
Chairman, Board of Supervisors

Date

ATTEST:

APPROVED AS TO FORM:

HEATHER FOSTER
Clerk of the Board

DAVID PRENTICE
County Counsel



Victor Community Support Services, Inc.

VICTOR TRAINING SERVICES TRAINING/CONSULTATION AGREEMENT

This is an agreement between **Victor Community Support Services, Inc.** and **Sierra County Children's System of Care** (client) for FY20-21 professional training/consultation services based on the information described below.

Services:

Therapeutic Behavioral Services (TBS) Training and Consultation

Date(s) and Time: TBD

Location: Victor Community Support Services, Grass Valley, CA

Subject/Title: TBS Training

Instructor/Consultant: Kelsey Baumstinger

Audio-Visual Equipment:

N/A

Victor Training Services will provide all training materials and/or handouts required for specific training topics

Compensation:

Client agrees to pay Victor Community Supports Services, Inc. \$11,400 for training and consultation services:

- \$1500 (2 half-day trainings at \$750 per training), and
- \$9900 (66 hours at \$150 per hour) for consultation services.

No airfare, hotel or car rental travel costs to be incurred on this training contract. Regulatory and customary mileage reimbursement for trainer included in training rates.

Payment:

Client agrees to be invoiced on a monthly basis for all consultation hours and travel costs, if applicable. Please make all payments payable to Victor Community Support Services, Inc. Any expenses requiring reimbursement are to be paid within 30 days of Client receiving the invoice.



Victor Community Support Services, Inc.

VICTOR TRAINING SERVICES TRAINING/CONSULTATION AGREEMENT

Cancellation Policy:

A cancellation notice of 14 days is required for a full refund. Notice must be given via email to sstrait@victor.org. A cancellation charge of 50% of the training fee will be billed for services cancelled less than 14 days prior to scheduled training

Recording:

No audio or video recorders may be used without the prior, written agreement of Victor Community Support Services, Inc.

AGREED AND ACCEPTED:

Deborah Scott
Victor Community Support Services, Inc.

Date

Lea Salas, Administrative Director
Sierra County Behavioral Health

Date

Please return a copy of the signed agreement, by mail to:

*Victor Community Support Services, Inc.
Attn: Sabrina Roye
1360 East Lassen Avenue
Chico, CA 95973
Or sroye@victor.org*