

**RESOLUTION OF THE BOARD OF SUPERVISORS
COUNTY OF SANTA BARBARA, STATE OF CALIFORNIA**

IN THE MATTER OF THE COUNTY'S
CONTINUED PARTICIPATION IN AN INTER-
MEMBER TRANSFER PROGRAM
FOR FOSTER PLACEMENTS

RESOLUTION NO. _____

WHEREAS, the Board of Supervisor adopted Resolution No. 18-103 on May, 8, 2018, authorizing:

1. The County to participate in the California Mental Health Services Authority (CalMHSA) Inter-Member Transfer program for the prompt transfer of funds related to specialty mental health services provided or arranged for foster children placed outside of the county's jurisdiction, in order comply with Welfare and Institutions (W & I) Code §14717.1;
2. The transfer of funds to CalMHSA pursuant to the Inter-Member Transfer Program Participation Agreement (Participation Agreement), in the initial amount of \$59,689, and with funding thereafter in the amounts approved by the Board of Supervisors after assessment of actual service costs to the County as a Receiving and/or Sending County;
3. The Director of the Department of Behavioral Wellness to sign the Participation Agreement on behalf of the County up to the initial deposit amount of \$59,689; and
4. CalMHSA to act on behalf of County to transfer funds to a receiving county, consistent with the provisions of the Participation Agreement and W & I Code § 14717.1;

WHEREAS, on August 14, 2018, the Board of Supervisors approved and authorized the Director of Behavioral Wellness to sign the Participation Agreement on behalf of County in the amount of \$59,689.29 to the initial banking pool funding amount and pay the 5% administration fee of \$2,984.46 for a total contract amount of \$62,673.75;

WHEREAS, on February 25, 2020, the Board of Supervisors approved and authorized the execution of the First Amendment to the Participation Agreement to extend the term through June 30, 2020 and authorized payment of the annual administration fee of \$2,984.46 for the extended term;

WHEREAS, on, September 22, 2020, the Board of Supervisors approved and authorized the execution of the Second Amendment to the Inter-Member Transfer Program Participation Agreement to extend the term through June 30, 2021 and authorized payment of the annual administration fee of \$2,984.46 for the extended term; and

WHEREAS, the County wishes to transfer additional funds to CalMHSA for Fiscal Years 21-22 through 23-24 (July 1, 2021 through June 30, 2024) as needed for specialty mental health services provided to foster youth placed out of county, in an amount not to exceed \$200,000, for a total pool bank of \$262,673.46 inclusive of the \$59,689.75 initial banking pool funding and initial 5% administration fee of \$2,984.46, and with funding thereafter increased in amounts approved by the Board of Supervisors after assessment of actual service costs to the County as a Receiving and/or Sending County.

NOW, THEREFORE, BE IT RESOLVED, the Board of Supervisors of the County of Santa Barbara, acting as the governing body of the County of Santa Barbara, does hereby:

1. Rescind Resolution No. 18-103.
2. Authorize the County to continue its participation in the California Mental Health Services Authority (CalMHSA) Inter-Member Transfer Program.
3. Authorize the Department of Behavioral Wellness to transfer up to \$200,000 in additional funds to CalMHSA as needed, for a total contribution not to exceed \$262,673.75, and with funding thereafter increased in the amounts approved by the Board of Supervisors after assessment of actual service costs to the County as a Receiving and/or Sending County.
4. Authorize the Director of the Department of Behavioral Wellness to sign the Third Amendment to the Inter-Member Transfer Program Participation Agreement on behalf of the County.

PASSED AND ADOPTED by the Board of Supervisors of the County of Santa Barbara, State of California, this _____ day of _____, 2021, by the following vote:

AYES:
NOES:
ABSENT:
ABSTAIN:

COUNTY OF SANTA BARBARA

ATTEST:
MONA MIYASATO
COUNTY EXECUTIVE OFFICER
CLERK OF THE BOARD

By: _____
BOB NELSON, CHAIR
BOARD OF SUPERVISORS

By: _____
Deputy Clerk

APPROVED AS TO FORM:
RACHEL VAN MULLEM
COUNTY COUNSEL

APPROVED AS TO ACCOUNTING FORM:
BETSY M. SCHAFFER, CPA
AUDITOR-CONTROLLER

By: _____
Deputy County Counsel

By: _____
Deputy