

1 **BOARD OF SUPERVISORS, COUNTY OF LAKE, STATE OF CALIFORNIA**

2 **RESOLUTION NO. _____**

3 **A RESOLUTION OF THE BOARD OF SUPERVISORS APPROVING AMENDMENT #A-1 TO**
4 **THE STANDARD AGREEMENT #19-5042 BETWEEN THE COUNTY OF LAKE AND CALIFORNIA**
5 **DEPARTMENT OF SOCIAL SERVICES FOR RESOURCE FAMILY APPROVAL PROGRAM**
6 **SERVICES AND AUTHORIZING THE DIRECTOR OF SOCIAL SERVICES TO SIGN THE**
7 **AMENDMENT**

8
9 **WHEREAS**, according to the Resource Family Approval Program and Welfare and Institutions Code §
10 16519.5 (d)(3)(B), resource family permanency assessments should include a family evaluation that consists of but
11 is not limited to, interviews of an applicant to assess the applicant's personal history, family dynamic, and need for
12 support or resources, and a risk assessment; and
13

14 **WHEREAS**, from July 1, 2019 to June 30, 2021, California Department of Social Services agrees to
15 provide family evaluation services for the Lake County Department of Social Services in order to expedite the
16 process for families applying to the program; and
17

18 **WHEREAS**, on April 14, 2020, Lake County Board of Supervisors passed and adopted Resolution #2020-
19 40, approving Standard Agreement #19-5042 with California Department of Social Services for Resource Family
20 Approval Program Services, and authorizing the Director of Social Services to sign; and
21

22 **WHEREAS**, California Department of Social Services issued Amendment #A-1 to the Standard
23 Agreement #19-5042 in order to increase the total compensation to forty-two thousand five hundred sixty dollars
24 (\$42,560.00) per fiscal year.
25

26 **NOW, THEREFORE, BE IT RESOLVED:**

27 The Amendment #A-1 to the Standard Agreement #19-5042 between County of Lake and California
28 Department of Social Services for Resource Family Approval Program Services is approved; and

RESOLUTION NO. _____

BE IT FURTHER RESOLVED:

The Director of Social Services is authorized to sign Amendment #A-1 to the Standard Agreement #19-5042 between County of Lake and California Department of Social Services for Resource Family Approval Program Services.

THIS RESOLUTION was passed and adopted by the Board of Supervisors of the County of Lake at a regular meeting thereof on _____, 2020 by the following vote:

AYES:

NOES:

ABSENT OR NOT VOTING:

ATTEST: CAROL J. HUCHINGSON

COUNTY OF LAKE

Clerk to the Board of Supervisors

By: _____

Chair, Board of Supervisors

APPROVED AS TO FORM:

ANITA L. GRANT

County Counsel

By:  _____