



Legislation Details (With Text)

File #: 20-862 **Version:** 1 **Name:**
Type: Report **Status:** Agenda Ready
File created: 9/8/2020 **In control:** BOARD OF SUPERVISORS
On agenda: 9/15/2020 **Final action:**
Title: Approve continuation of the COUNTY OF LAKE COVID-19 PUBLIC HEALTH EMERGENCY Return to Work – Worksite Protection Protocol
Sponsors: Administrative Office
Indexes:
Code sections:
Attachments: 1. COVID 19 Return to Work Protocol 091520 no change

| Date | Ver. | Action By | Action | Result |
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Memorandum

Date: September 15, 2020
To: The Honorable Moke Simon, Chair, Lake County Board of Supervisors
From: Carol J. Huchingson, County Administrative Officer
Subject: Approve continuation of the COUNTY OF LAKE COVID-19 PUBLIC HEALTH EMERGENCY Return to Work - Worksite Protection Protocol

Executive Summary: (include fiscal and staffing impact narrative):

As your Board recalls, when you first approved the COVID-19 Return to Work Protocol on May 19, 2020, you directed that it be reviewed every 30 days. Review and revisions have previously occurred on June 16, 2020, July 14, 2020, July 21, 2020 and on August 11, 2020.

As you know, staff fully expected that the Protocol would be a living document. Over the past month, your department heads have not reported any issues necessitating revision at this time. As a result, staff recommends your Board authorize continuation of the protocol as written, with ongoing thirty day reviews.

If not budgeted, fill in the blanks below only:

Estimated Cost: _____ Amount Budgeted: _____ Additional Requested: _____ Future Annual Cost: _____

Consistency with Vision 2028 and/or Fiscal Crisis Management Plan (check all that apply):

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> Well-being of Residents | <input type="checkbox"/> Public Safety | <input type="checkbox"/> Infrastructure | <input type="checkbox"/> Not applicable |
| <input type="checkbox"/> Economic Development | <input checked="" type="checkbox"/> Disaster Recovery | <input checked="" type="checkbox"/> County Workforce | <input type="checkbox"/> Technology Upgrades |
| <input type="checkbox"/> Community Collaboration | <input checked="" type="checkbox"/> Business Process Efficiency | <input type="checkbox"/> Clear Lake | <input type="checkbox"/> Revenue Generation |
| | | | <input type="checkbox"/> Cost Savings |

If request for exemption from competitive bid in accordance with County Code Chapter 2 Sec. 2-38, fill in blanks below:

Which exemption is being requested?
How long has Agreement been in place?
When was purchase last rebid?
Reason for request to waive bid?

Recommended Action:

**Authorize continuation of the COUNTY OF LAKE COVID-19 PUBLIC HEALTH EMERGENCY
Return to Work - Worksite Protection Protocol, subject to ongoing thirty day reviews.**