



**Health & Human Services  
Agency  
COUNTY OF TULARE  
AGENDA ITEM**

**BOARD OF SUPERVISORS**

ALLEN ISHIDA  
District One

PETE VANDER POEL  
District Two

PHILLIP A. COX  
District Three

J. STEVEN WORTHLEY  
District Four

MIKE ENNIS  
District Five

**AGENDA DATE:** June 7, 2011

|  |     |                                     |    |                                     |     |                                     |
|--|-----|-------------------------------------|----|-------------------------------------|-----|-------------------------------------|
| Public Hearing Required  | Yes | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> | N/A | <input type="checkbox"/>            |
| Scheduled Public Hearing w/Clerk   | Yes | <input type="checkbox"/>            | No | <input type="checkbox"/>            | N/A | <input checked="" type="checkbox"/> |
| Published Notice Required  | Yes | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> | N/A | <input type="checkbox"/>            |
| Advertised Published Notice  | Yes | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| Meet & Confer Required   | Yes | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> | N/A | <input type="checkbox"/>            |
| Electronic file(s) has been sent   | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            | N/A | <input type="checkbox"/>            |
| Budget Transfer (Aud 308) attached   | Yes | <input type="checkbox"/>            | No | <input type="checkbox"/>            | N/A | <input checked="" type="checkbox"/> |
| Personnel Resolution attached  | Yes | <input type="checkbox"/>            | No | <input type="checkbox"/>            | N/A | <input checked="" type="checkbox"/> |
| Resolution, Ordinance or Agreements are attached and signature line for Chairman is marked with tab(s)/flag(s) | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            | N/A | <input type="checkbox"/>            |

CONTACT PERSON: Kyla Surratt PHONE: 624-8000

**SUBJECT:** Approval of agreement with Victor Treatment Centers, Inc.

**REQUEST(S):**

That the Board of Supervisors:

1. Approve an agreement with Victor Treatment Centers, Inc. in an amount not to exceed \$140,000, for the provision of Intensive Day Treatment services (Full Day) to Tulare County minors from July 1, 2011 through June 30, 2012; and
2. Authorize the Chairman of the Board to sign three (3) copies of the agreement.

**SUMMARY:**

For improved Quality of Life, Victor Treatment Centers, Inc., Rate Classification Level (RCL) 13/14 Group Home provides Intensive Day Treatment and Specialty Mental Health Services to Tulare County minors. These minors have been diagnosed as severely emotionally disturbed (SED). In addition, Victor Treatment Centers' program is geared toward reducing and/or eliminating other restrictive and costly admissions to higher levels of care, i.e. Community Treatment Facilities (CTF's). Victor Treatment Centers are located in Stockton, Santa Rosa, San Bernardino, Riverside, and Redding, Ca. Victor Treatment Centers currently provides services for two (2) Tulare County minors.

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**FISCAL IMPACT/FINANCING:**

The maximum amount of this agreement for Fiscal Year 2011/2012 is \$140,000 and will be included in the Fiscal Year 2011/2012 budget. This agreement is funded by Medi-Cal revenues and realignment funds. No Net County Cost.

**LINKAGE TO THE COUNTY OF TULARE STRATEGIC BUSINESS PLAN:**

The County's five-year strategic plan includes the Quality of Life Initiative that encourages innovative provision of quality supportive services for at-risk adults, youth and children in state and federally mandated programs. This agreement increases the ability to fulfill that obligation.

**ALTERNATIVES:**

The Board could choose not to approve this agreement, but this is not recommend as this may result in placement of these minors in a State Hospital or Institution for Mental Disease (IMD) at a much higher cost.

**INVOLVEMENT OF OTHER DEPARTMENTS OR AGENCIES:**

County Counsel

**ADMINISTRATIVE SIGN-OFF:**

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Cheryl L. Duerksen Ph.D.  
Director of Mental Health

Cc: Auditor/Controller  
County Counsel  
County Administrative Office (3)

Agreement

**BEFORE THE BOARD OF SUPERVISORS  
COUNTY OF TULARE, STATE OF CALIFORNIA**

IN THE MATTER OF: )  
Approval of agreement with Victor ) RESOLUTION NO. \_\_\_\_\_  
Treatment Centers, Inc. ) AGREEMENT NO. \_\_\_\_\_

UPON MOTION OF SUPERVISOR \_\_\_\_\_, SECONDED BY  
SUPERVISOR \_\_\_\_\_, THE FOLLOWING WAS ADOPTED BY THE  
BOARD OF SUPERVISORS, AT AN OFFICIAL MEETING HELD \_\_\_\_\_  
\_\_\_\_\_, BY THE FOLLOWING VOTE:

AYES:  
NOES:  
ABSTAIN:  
ABSENT:

ATTEST: JEAN M. ROUSSEAU  
COUNTY ADMINISTRATIVE OFFICER/  
CLERK, BOARD OF SUPERVISORS

BY: \_\_\_\_\_  
Deputy Clerk

\* \* \* \* \*

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2. Authorized the Chairman of the Board to sign three (3) copies of the agreement.