



**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 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 Medical Hill Rehab Center, LLC.

REQUEST(S):

That the Board of Supervisors:

1. Approve an Agreement with Medical Hill Rehab Center, LLC in an amount not to exceed \$175,200 for the provision of a mental health rehabilitation program 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:

Medical Hill Rehab, LLC Center of Oakland, California provides skilled nursing mental health rehabilitation services to Tulare County residents who are severely and persistently mentally ill. Their services are designed for clients who require supervision and are expected to benefit from organized therapeutic activities that promote daily living skills. Such activities and services can include behavioral adjustment, self-help skills, pre-vocational preparation, alternate placement planning, and special needs in interpersonal relationships. This rehabilitation program is designed to improve the client's adaptive functioning and/or prevent any further deterioration of his or her adaptive functioning. Medical Hill Rehab Center, LLC has the experience and qualifications to provide the services Tulare County Health & Human Services Agency (HHS), Department of Mental Health requires. It is estimated that three (3) clients per month will benefit from the services of

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Medical Hill Rehab Center, LLC during Fiscal Year 2011/2012.

FISCAL IMPACT/FINANCING:

The maximum reimbursement for this Agreement will not exceed \$175,200 and will be included in the Fiscal Year 2011/2012 proposed budget. 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 that is not recommended because Tulare County HHSA, Department of Mental Health is mandated by Welfare & Institutions Code 5600.4 (f) to provide these services.

INVOLVEMENT OF OTHER DEPARTMENTS OR AGENCIES:

County Counsel.

ADMINISTRATIVE SIGN-OFF:

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

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

Agreement

