



COUNTY OF HUMBOLDT

AGENDA ITEM NO.
C27

For the meeting of: June 26, 2018

Date: June 6, 2018
To: Board of Supervisors
From: Connie Beck, Director *Connie Beck*
Department of Health and Human Services – Social Services Branch
Subject: Approve appropriation transfer in fund 1110 to increase/decrease appropriation in fiscal year 2017-18. (4/5 vote required)

RECOMMENDATION(S):

That the Board of Supervisors approve an appropriation transfer in Fund 1110 to increase/decrease appropriations per attachment A in fiscal year 2017-18. *(4/5 VOTE REQUIRED)*

SOURCE OF FUNDING:

Social Services Assistance

DISCUSSION:

The Department of Health and Human Services (DHHS) is mandated to provide assistance payments for Foster Care and Aid to Adoption programs. These programs provide assistance to children and families who provide a safe Foster Care home or who adopt dependent children through the Child Welfare System. Costs covered include both the Foster Care, and Aid to Adoption (AAP) Assistance payments. Due to implementation of Continuum of Care Reform (CCR) by California Department of Social Services (CDSS) the Foster Care, Aid to Adoptions, and Group Home Rates received an interim rate increase. These increased rates are based on the child's needs rather than the parental/family/group home qualifications. Basic rates effective July 1, 2017 ranged from \$923 to \$1,235 per month per child, and the most commonly used Group home rates ranged from \$7,629 to \$10,810 per month per child. Effective January 1, 2018, current Foster Care Cases and new Foster Care cases started transitioning to the new higher rates. Simultaneously more group homes were becoming licensed as STRTPs (Short Term Residential Treatment

Prepared by Elizabeth Rhodes, Administrative Analyst CAO Approval *E. Rhodes*

REVIEW: Auditor *CD* County Counsel Personnel Risk Manager Other

TYPE OF ITEM:
 Consent
 Departmental
 Public Hearing
 Other

BOARD OF SUPERVISORS, COUNTY OF HUMBOLDT
Upon motion of Supervisor *Bass* Seconded by Supervisor *Fennell*
Ayes *Bass, Fennell, Sundberg, Sohn*
Nays
Abstain
Absent *Wilson*

PREVIOUS ACTION/REFERRAL:

Board Order No. _____
Meeting of: _____

and carried by those members present, the Board hereby approves the recommended action contained in this Board report.

Dated: *6/26/18*
By: *[Signature]*
Kathy Hayes, Clerk of the Board

Programs), thus changing most Group Home placement payments to the STRTP Rate of \$12,498 per month per child. The California State licensing of the STRTPs has commonly been backdated to the Institution’s application date, resulting in substantial supplemental assistance payments paid to STRTP placements during fiscal year (FY) 2017-18.

In addition to the increased interim basic rates, case counts have recently increased, as well:

| Case Counts | June 2013 | June 2014 | June 2015 | June 2016 | June 2017 | April 2018 |
|-------------|-----------|-----------|-----------|-----------|-----------|------------|
| FC Cases | 284 | 296 | 361 | 316 | 322 | 369 |
| AAP Cases | 356 | 358 | 358 | 360 | 355 | 425 |
| AAP WRAP | 4 | 2 | 2 | 0 | 5 | 3 |

Due to the increased assistance payment rates and increased case counts for Foster Care, Aid to Adoptions (AAP), and Group Home Placements, and increased case counts, an appropriation transfer is needed in Fund 1110 Assistance Fund from Budget Unit 517 – Temporary Assistance to needy families to 518 – Foster Care to cover mandated assistance payments in FY 2017-18.

FINANCIAL IMPACT:

Approval of the appropriation transfer in Fund 1110 – Social Services Assistance (Attachment A) will not increase or decrease the overall fund. The recommendation before your Board will transfer \$2,000,000 from 1110-517-3127 Assistance Payments: \$1,500,000 to 1110-518-3620 Aid to Adoptions (Assistance Payments), and \$500,000 to 1110 518 3127 (Foster Care) Assistance Payments. Budget 517 has sufficient funding to cover these mandated assistance payments in 518, as the usage of Temporary Assistance to Needy Families (TANF) assistance payments in 517, was less than predicted in FY 2017-18. Budget units 517 and 518 are intended to serve needy families with mandated assistance payments. There will be no additional impact to the county General Fund.

The proposed appropriation transfer supports the Board's Strategic Framework by protecting vulnerable populations and providing community-appropriate levels of service.

OTHER AGENCY INVOLVEMENT:

Auditor’s Office

ALTERNATIVES TO STAFF RECOMMENDATIONS:

The Board could choose not to approve the attached appropriation transfer however this is not recommended. The appropriation transfer is necessary to allow for assistance payments in budget unit 518 for 2017-18 fiscal year end.

ATTACHMENTS:

A) Appropriation Transfer in Fund 1110 to increase/decrease appropriation in fiscal year 2017-18.

COUNTY OF HUMBOLDT
REQUEST FOR BUDGET TRANSFER/ADJUSTMENT

Attachment 1

A _____

DEPARTMENT: Assistance/Foster Care

DEPARTMENT #: _____ POSTING DATE: 6/1/2018

1.) The reason for this budget transfer request is:

| | | |
|----------|---|---------------|
| _____ | Transfer within expenditure/revenue category (with Auditor Approval) | Original only |
| _____ | Transfer between expenditure/revenue category (with CAO & Auditor Approval) | Original +1 |
| _____ | Increase/decrease Intrafund Transfer account (with Board Approval)* | Original +1 |
| _____ | Transfer to or from Contingencies (with Board Approval)* | Original +1 |
| X | Increase/decrease budget unit appropriation (with Board approval)* | Original +1 |
| _____ | Establish/transfer funds in Fixed Assets <\$10,000 (CAO & Auditor Approval) | Original +1 |
| _____ | Establish/transfer funds in Fixed Assets >\$10,000 (with Board Approval)* | Original +1 |

| 2.) | Transfer to Account: | | | Transfer from Account: | |
|-----|----------------------|----------------|---------------------|------------------------|---------------------|
| | Amount: | Number: | Name: | Number: | Name: |
| | \$ 1,500,000.00 | 1110 518 3-620 | Aid to Adoptions | 1110 517 3-127 | Assistance Payments |
| | \$ 500,000.00 | 1110 518 3-127 | Assistance Payments | 1110 517 3-127 | Assistance Payments |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

3.) In the space below, state (a) reason for transfer request, (b) reason why there are sufficient balances in affected accounts, and (c) why transfer cannot be delayed until next budget year.

PER AGENDA ITEM No. _____

4.) Department Authorization: _____ Date 6/6/18 (signed) 

5.) Account balances verified by Auditor-Cont _____ Date 6/6/18 (signed) 

6.) /Approved _____ /Not approved _____ /Recommended _____ /Not recommended _____
 County Administrative Officer: _____ Date 6/26/18 (signed) 

INSTRUCTIONS

SEND ORIGINAL REQUEST FOR BUDGET TRANSFER DIRECTLY TO THE AUDITOR-CONTROLLER.