

RESOLUTION NO. 22-8695

A RESOLUTION OF THE PLUMAS COUNTY BOARD OF SUPERVISORS AUTHORIZING THE PLUMAS COUNTY SHERIFF TO (1) CONTRACT WITH THE DEPARTMENT OF STATE HOSPITALS UNDER AGREEMENT NUMBER 21-76003-009, (2) EXECUTE DEPARTMENT OF STATE HOSPITALS' AGREEMENTS, AND (3) AMEND THE AGREEMENT AS REQUIRED.

WHEREAS, the County of Plumas and the Department of State Hospitals desire to contract under agreement number 21-76003-009; and,

WHEREAS, the California Department of State Hospitals will provide IST re-evaluation services for Plumas County defendants in accordance with Welfare and Institutions Code (WIC) section 4335.2; and,

WHEREAS, the California Department of State Hospitals requires the Board of Supervisors to adopt a resolution authorizing a single Contractor to sign the aforementioned agreement; and,

WHEREAS, the need to have re-evaluation services for defendants who are incompetent to stand trial is critical to proper placement of Plumas County Jail inmates, and it is to the County's benefit to authorize the Plumas County Sheriff to take such actions without delay.

NOW, THEREFORE BE IT RESOLVED that the Board of Supervisors of the County of Plumas, State of California:

1. Authorizes the Plumas County Sheriff to accept and bind the County to any and all agreements and amendments relating to Agreement Number 21-76003-009 to a maximum amount of \$21,000.00 (Twenty-One Thousand Dollars and Zero cents) for the life of the agreement which terminates on June 30, 2024.
2. Authorizes the Plumas County Sheriff to execute any and all Agreements and other documentation necessary to apply for and accept the agreement, subject to approval as to form by the Plumas County Counsel.

BE IT FURTHER RESOLVED, that the authority granted above does not affect the need to comply with the Plumas County Purchasing Policy with respect to the Agreement.

I hereby certify the foregoing resolution was introduced and read at the regular meeting of the County Board of Supervisors of the County of Plumas on the 3rd day of MAY, 2022 and the resolution was duly adopted at said meeting by the following vote:

AYES: 5
NOES: 0
ABSENT: 0
ABSTAIN: 0



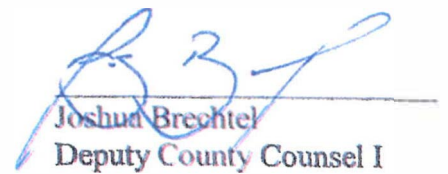
Kevin Goss, Chair
Plumas County Board of Supervisors

ATTEST:



Heidi White, Clerk of the Board of Supervisors
County of Plumas, State of California

Approved as to form:



Joshua Brechtel
Deputy County Counsel I

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES

STANDARD AGREEMENT

STD 213 (Rev. 04/2020)

AGREEMENT NUMBER 21-76003-009	PURCHASING AUTHORITY NUMBER (If Applicable) DSH-4440
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1. This Agreement is entered into between the Contracting Agency and the Contractor named below:

CONTRACTING AGENCY NAME

Department of State Hospitals

CONTRACTOR NAME

Plumas County Sheriff's Office

2. The term of this Agreement is:

START DATE

July 1, 2021

THROUGH END DATE

June 30, 2024

3. The maximum amount of this Agreement is:

\$21,000.00

Twenty-One Thousand Dollars and Zero Cents

4. The parties agree to comply with the terms and conditions of the following exhibits, which are by this reference made a part of the Agreement.

Exhibits	Title	Pages
Exhibit A	Scope of Work	4
Exhibit B	Budget Detail and Payment Provisions	5
Exhibit C	General Terms and Conditions - 04/2017	4
+ - Exhibit D	Special Terms and Conditions	8
+ - Exhibit F	Information Privacy and Security Requirements	12

Items shown with an asterisk (*), are hereby incorporated by reference and made part of this agreement as if attached hereto.

These documents can be viewed at <https://www.dgs.ca.gov/OLS/Resources>

IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.

CONTRACTOR

CONTRACTOR NAME (if other than an individual, state whether a corporation, partnership, etc.)

Todd Johns

CONTRACTOR BUSINESS ADDRESS

1400 East Main Street

CITY

Quincy

STATE

CA

ZIP

95971

PRINTED NAME OF PERSON SIGNING

Todd Johns

TITLE

Sheriff/ Coroner

CONTRACTOR AUTHORIZED SIGNATURE

DATE SIGNED

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES

STANDARD AGREEMENT

STD 213 (Rev. 04/2020)

AGREEMENT NUMBER 21-76003-009	PURCHASING AUTHORITY NUMBER (If Applicable) DSH-4440
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STATE OF CALIFORNIA

CONTRACTING AGENCY NAME

Department of State Hospitals

CONTRACTING AGENCY ADDRESS

1215 O Street, MS-1

CITY

Sacramento

STATE

CA

ZIP

95814

PRINTED NAME OF PERSON SIGNING

Tiffany Ladd

TITLE

Section Manager, PCSS

CONTRACTING AGENCY AUTHORIZED SIGNATURE

DATE SIGNED

CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL

EXEMPTION (If Applicable)

W & I Code 4335.2 (f)