

DEPARTMENT: Human Services/BHRS

BY: James Rydingsword  
PHONE: (209) 966-2000

**RECOMMENDED ACTION AND JUSTIFICATION:**

The Department of Human Services has identified several areas in which mid-year budget adjustments were not adequate to see the department to the end of the fiscal year. It is respectfully requested that your Board approve the attached budget actions necessary for the completion of the fiscal year.

(4/5<sup>4/5</sup>)

(\$255,669)

**BACKGROUND AND HISTORY OF BOARD ACTIONS:**

Please see attached memo.

**ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:**

Please see attached memo.

Financial Impact? ( ) Yes (X) No	Current FY Cost: \$	Annual Recurring Cost: \$
Budgeted In Current FY? ( ) Yes ( ) No ( ) Partially Funded		
Amount in Budget: \$ _____		List Attachments, number pages consecutively
Additional Funding Needed: \$ _____		Board memo pg. 1
Source:		Intrabudget Transfer forms, pgs. 2-8
Internal Transfer _____		
Unanticipated Revenue _____	4/5's vote	
Transfer Between Funds _____	4/5's vote	
Contingency _____	4/5's vote	
( ) General ( ) Other		

**CLERK'S USE ONLY:**

Res. No. 08-200 Ord. No. \_\_\_\_\_  
 Vote - Ayes: 4 Noes: \_\_\_\_\_  
 Absent: \_\_\_\_\_  
 Approved \_\_\_\_\_  
 ( ) Minute Order Attached ( ) No Action Necessary

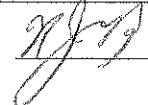
**COUNTY ADMINISTRATIVE OFFICER:**

Requested Action Recommended  
 No Opinion  
 Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

The foregoing instrument is a correct copy of the original on file in this office.

Date: \_\_\_\_\_  
 Attest: MARGIE WILLIAMS, Clerk of the Board  
 County of Mariposa, State of California

By: \_\_\_\_\_  
 Deputy

CAO: 



**MARIPOSA COUNTY  
HUMAN SERVICES DEPARTMENT**

P.O. Box 99 • Mariposa, CA 95338 • (209) 966-2000 • Fax (209) 966-8251

□ Behavioral Health & Recovery □ Community Action □ Housing Authority □ Public Guardian/Conservator □ Social Services  
JAMES A. RYDINGSWORD, DIRECTOR

May 13, 2008

TO: Members, Board of Supervisors  
Rick Benson, CAO  
FROM: James Rydingsword, Director *JWR*  
RE: Year End Budget Adjustments

**Recommendation**

It is respectfully requested that your Board approve the attached budget actions necessary for the completion of the fiscal year.

**Background/Current Situation**

The Department of Human Services has identified several areas in which mid-year budget adjustments were not adequate to see the department to the end of the fiscal year. Attached are several budget actions that will redistribute appropriations to line items that are in or will need increased funding for the remainder of this fiscal year.

**Financial**

The attached budget action forms redistribute appropriations within the following units:

Social Service Administration 001-0501

Social Service Programs 001-0506

Behavioral Health 001-0402

Alcohol & Drug 001-0403

Social Services Trust ~~363-0523~~

Mental Health Services Act 410-0524

Substance Abuse & Crime Prevention Act 343-0504

*Realignment 394-0523* *al*

There is no impact to the general fund.

## BUDGET ACTION FORM

FUND	DEP/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
001	0501	661.0201	Extra Help		20,000	
001	0501	661.0240	Standby		5,000	
001	0501	661.0302	Group Health for Retirees		54,345	
001	0501	661.0303	Unemployment		1,402	
001	0501	661.0406	Communications		7,000	
001	0501	661.0415	Memberships		4,800	
001	0501	661.0417	Office Expense		15,000	
001	0501	661.0430	Rent & Lease Equipment		750	
001	0501	661.0431	Rent & Lease-Buildings		7,500	
001	0501	661.0441	CalWORKs Transportation		19,000	
001	0501	661.0471	Copier Expense		2,500	
001	0501	307.9202	Public Conservator		(3,000)	
001	0501	308.1100	Misc Revenue		(1,750)	
001	0501	661.0413	Maintenance of Buildings			6,000
001	501	661.0418	Professional Services			7,000
001	0501	661.0419	Adult Protective Services			3,000
001	0501	661.0460	Utilities			3,000
001	0501	661.1090	Contingency			113,547
<b>TOTALS</b>					<b>132,547</b>	<b>132,547</b>

**ACTION REQUESTED:** (Check all that apply)

( ) Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the county budget, or in any one fund of the budget, or transferring appropriation from Contingencies

(X) Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget to another, or between categories within a budget unit;

**JUSTIFICATION** Year End adjustments to balance the budget unit.

DEPT HEAD SIGNATURE	DATE <span style="float: right;">5/2/2008</span>
APPROVED BY RES NO. <u>08-220</u> CLERK	DATE <u>5-22-08</u>

DEPARTMENT <u>Human Services</u>	AUDITOR'S USE ONLY BA #
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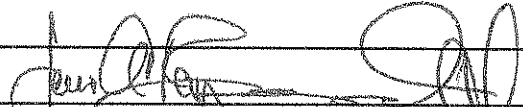
# BUDGET ACTION FORM

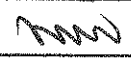
FUND	DEP/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
001	0506	671.0501	CalWORKs		52,721	
001	0506	671.0511	IHSS		2,000	
001	0506	671.0507	General Assistance			15,000
001	0506	305.6729	IHSS Waiver Adjustment		(11,000)	
001	0506	309.1694	Transfer In Realignment		(28,721)	
<b>TOTALS</b>					<b>15,000</b>	<b>15,000</b>

**ACTION REQUESTED:** (Check all that apply)

- Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the county budget, or in any one fund of the budget , or transferring appropriation from Contingencies
- Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget to another, or between categories within a budget unit;

**JUSTIFICATION** Year End adjustments to balance the budget unit.

DEPT HEAD SIGNATURE  DATE 5/2/2008

APPROVED BY RES NO. 08-220 CLERK  DATE 5-22-08

Social Service Programs  
DEPARTMENT Human Services

AUDITOR'S USE ONLY BA #
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## BUDGET ACTION FORM

FUND	DEP/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
394	0523	660.0416	Misc Expense			28,721
394	0523	660.0787	Transfer Out to 0506		28,721	
<b>TOTALS</b>					28,721	28,721

TRANSFER BETWEEN FUNDS				DEBIT	CREDIT
<b>TOTALS</b>					

**ACTION REQUESTED:** (Check all that apply)

- Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the county budget, or in any one fund of the budget , or transferring appropriation from Contingencies
- Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget to another, or between categories within a budget unit;

**JUSTIFICATION** Year End adjustments to balance the budget unit.

DEPT HEAD SIGNATURE	DATE 5/2/2008
APPROVED BY RES NO. 08-220 CLERK	DATE 5-22-08

Social Services Realignment  
 DEPARTMENT Human Services

**AUDITOR'S USE ONLY**  
 BA #

## BUDGET ACTION FORM

FUND	DEP/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
001	0402	622.0201	Extra Help		1,670	
001	0402	622.0419	Medical Fees		2,000	
001	0402	622.0426	IMD Contracts		13,500	
001	0402	622.0428	MIS Contract		34,970	
001	0402	622.0429	Publications			2,700
001	0402	622.0437	Purchased Services Other			4,000
001	0402	622.0440	Medications			5,000
001	0402	622.0480	Equipment			4,000
001	0402	622.1090	Contingency			36,440
<b>TOTALS</b>					52,140	52,140

TRANSFER BETWEEN FUNDS				DEBIT	CREDIT
<b>TOTALS</b>					

**ACTION REQUESTED: (Check all that apply)**

- ( ) Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the county budget, or in any one fund of the budget , or transferring appropriation from Contingencies
- (X) Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget to another, or between categories within a budget unit;

**JUSTIFICATION** Year End adjustments to balance the budget unit.

DEPT HEAD SIGNATURE	DATE <span style="float: right;">5/2/2008</span>
APPROVED BY RES NO. <u>08-220</u> CLERK	DATE <u>5-22-08</u>

*Behavioral Health*  
 DEPARTMENT Human Services

AUDITOR'S USE ONLY BA #
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## BUDGET ACTION FORM

FUND	DEP/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
001	0403	623.0126	A&D Specialist I-III		2,830	
001	0403	623.0201	Extra Help		1,050	
001	0403	623.0417	Office Expense		200	
001	0403	623.0460	Utilities		2,675	
001	0403	623.0490	Training & Seminars		200	
001	0403	623.0428	MIS Contract			6,955
<b>TOTALS</b>					6,955	6,955

TRANSFER BETWEEN FUNDS				DEBIT	CREDIT
<b>TOTALS</b>					

- ACTION REQUESTED:** (Check all that apply)
- Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the county budget, or in any one fund of the budget , or transferring appropriation from Contingencies
  - Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget to another, or between categories within a budget unit;

**JUSTIFICATION** Year End adjustments to balance the budget unit.

DEPT HEAD SIGNATURE	DATE <span style="float: right;">5/2/2008</span>
APPROVED BY RES NO. <u>08-220</u> CLERK	DATE <span style="float: right;">5-22-08</span>

*Alcohol & Drug*  
 DEPARTMENT Human Services

<b>AUDITOR'S USE ONLY</b> BA #
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## BUDGET ACTION FORM

FUND	DEP/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
410	0524	668.0428	MIS Contract		9,350	
410	0524	668.0431	Rent & Leases-Buildings		5,330	
410	0524	668.0490	Training & Seminars		1,000	
410	0524	668.1090	Contingency			15,680
<b>TOTALS</b>					15,680	15,680

TRANSFER BETWEEN FUNDS	DEBIT	CREDIT
<b>TOTALS</b>		

**ACTION REQUESTED:** (Check all that apply)

- Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the county budget, or in any one fund of the budget, or transferring appropriation from Contingencies
- Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget to another, or between categories within a budget unit;

**JUSTIFICATION** Year End adjustments to balance the budget unit.

DEPT HEAD SIGNATURE	DATE 5/2/2008
APPROVED BY RES NO. 08-230 CLERK	DATE 5.22.08

Mental Health Services Act  
DEPARTMENT Human Services

AUDITOR'S USE ONLY BA #
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# BUDGET ACTION FORM

FUND	DEP/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
343	0504	664.0406	Communications		510	
343	0504	664.0428	MIS Contract		2,766	
343	0504	664.0430	Rent & Lease Equipment		100	
343	0504	664.0471	Copier Expense		50	
343	0504	664.0480	Equipment		200	
343	0504	664.0429	Publications			100
343	0504	664.0425	Residential Treatment			3,526
<b>TOTALS</b>					<b>3,626</b>	<b>3,626</b>

TRANSFER BETWEEN FUNDS					DEBIT	CREDIT
<b>TOTALS</b>						

**ACTION REQUESTED:** (Check all that apply)

- ( ) Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the county budget, or in any one fund of the budget, or transferring appropriation from Contingencies
- (X) Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget to another, or between categories within a budget unit;

**JUSTIFICATION** Year End adjustments to balance the budget unit.

<b>DEPT HEAD SIGNATURE</b> <i>[Signature]</i>	<b>DATE</b> 5/2/2008
<b>APPROVED BY RES NO.</b> 08-220 <b>CLERK</b> <i>[Signature]</i>	<b>DATE</b> 5-22-08
Proposition 36 Substance Abuse: Crime Prevention Act <b>DEPARTMENT</b> Human Services	
<div style="border: 1px solid black; padding: 5px; width: fit-content;"> <b>AUDITOR'S USE ONLY</b>                      BA #                 </div>	

# BUDGET ACTION FORM

FUND	DEP/DIV	ACCOUNT	DESCRIPTION	PROJECT	INCREASE	DECREASE
001	0507	672.0406	Communications		1,000	
001	0507	672.0460	Utilities			1,000
<b>TOTALS</b>					1,000	1,000

TRANSFER BETWEEN FUNDS					DEBIT	CREDIT
<b>TOTALS</b>						

**ACTION REQUESTED:** (Check all that apply)

- Budget appropriation by Board of Supervisors (4/5ths Vote Required): Amending the total amount available in the county budget, or in any one fund of the budget , or transferring appropriation from Contingencies
- Transfer by Board of Supervisors (3/5ths Vote Required): Moving existing appropriations from one budget to another, or between categories within a budget unit;

**JUSTIFICATION** Mid-Year budget adjustments

DEPT HEAD SIGNATURE	DATE 5/2/08
APPROVED BY RES NO. 58-220 CLERK	DATE 5-22-08

DEPARTMENT Human Services	<b>AUDITOR'S USE ONLY</b> BA #
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