

94-536

MARIPOSA COUNTY
BOARD OF SUPERVISORS

AGENDA
ACTION FORM

DATE: 12/13/94
AGENDA ITEM NO. 10-B

HUMAN SERVICES DEPARTMENT BY: TOM ARCHER PHONE: 966-2131

RECOMMENDED ACTION AND JUSTIFICATION: (POLICY ITEM: YES ___ NO: ___)

Adopt resolution approving changes in the KingsView PC1000 Alcohol and Drug Diversion Program to bring it into conformity with requirements in the new State legislation (AB3555) which takes effect January 1, 1995.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

KingsView has provided an Alcohol and Drug Diversion program for several years which is utilized by the courts and probation for individuals considered suitable for such a program. This program operates under the approval and certification of the County Alcohol and Drug Administrator who is the Director of Human Services. Recent legislation requires modification in the program to bring it into conformity with changes in Penal Code 1000 which takes effect January 1, 1995. Few changes are actually necessary at this time since programs have been modified over time in anticipation of the new legislation. The changes involve (1) an increase in program hours from 18 to 24, (2) a change in program structure to accommodate added hours, (3) a change in fee structure to accommodate fee exemptions for persons who cannot afford to pay. These changes have been made to the satisfaction of the County Alcohol and Drug Administrator and require approval from the Board of Supervisors in order to be implemented. There are no County costs involved in this program.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

Do not approval KingsView's program. Courts and probation would need to refer to out of county diversion programs until another program was developed and implemented in Mariposa.

COSTS: (x) Not Applicable
A. Budgeted current FY \$ _____
B. Total anticipated costs \$ _____
C. Required Add'l funding \$ _____
D. Source: _____

SPECIAL INSTRUCTIONS:
List the attachments and number pages accordingly:

SOURCE: () 4/5ths vote required
A. Internal transfers \$ _____
B. Unanticipated revenues \$ _____
C. Reserve for contingency \$ _____
D. Description: _____

Balance in Reserve for Contingencies, if approved: \$ _____

CLERK'S USE ONLY:

Resolution No.: 94-536

Ordinance No.: _____

Vote - Ayes: 4 Noes: _____

Absent: 0 Abstain: _____

hww) Approved () Denied
() Minute Order Attached

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

Date: _____

ATTEST: MARGIE WILLIAMS

Clerk of the Board of Supervisors
County of Mariposa, State of CA

By: _____
Deputy Clerk of the Board

ADMINISTRATIVE OFFICER'S RECOMMENDATION:

This item on agenda as:

- Recommended
- Not Recommended
- Policy Determination
- Submitted w/Comment
- Returned for further action

Comment: _____

A.O. Initials: *W*