

RUSH!

Contract #: 097-M1710
Index Code: 419500

CONTRACT ROUTING SHEET

Date Prepared: 06-14-2016 06-29-2016

Need Date: 07-05-2016
Needs to be on 08-02-2016 Agenda

PROCESSING DEPARTMENT:

Department: HHSA/MH
Dept. Contact: Zhana Mc Cullough
Phone #: Ext. 7154

CONTRACTOR:

Name: CA Dept. of Health Care Services
1500 Capitol Avenue, MS 2702
Sacramento, CA 95899

Department
Head Signature: *Don Ashton*
Don Ashton, M.P.A., Director

CONTRACTING DEPARTMENT: HHSA/Mental Health Division

Service Requested: Performance Agreement

Contract Term: 07/01/2016 - 06/30/2017 Contract/Grant Value: \$0

Compliance with Human Resources requirements? N/A x Yes No:

Compliance verified by: n/a

COUNTY COUNSEL: (Must approve all contracts and MOU's)

Approved: x Disapproved: Date: 7/7/16 By: *[Signature]*
Approved: Disapproved: Date: By:

EL DORADO COUNTY COUNSEL
2016 JUL 29 AM 9:11

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: Disapproved: Date: 7-8-16 By: *[Signature]*
Approved: Disapproved: Date: By:

NOTHING FOR RISK
16 JUL 08 AM 09:22

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

Departments:
Approved: Disapproved: Date: By:
Approved: Disapproved: Date: By:

[Signature] 6/28/16
CFO Review Date

[Signature] 6/16/16
Deputy Director, Administration and Contracts Date

@ 6/15/16
zyc k 6/24/16

Contract #: 097-M1710
Index Code: 419500

CONTRACT ROUTING SHEET

2 of 2

Date Prepared: 06-14-2016

Need Date: 06-28-2016

PROCESSING DEPARTMENT:

Department: HHS/MH

Dept. Contact: Zhana Mc Cullough

Phone #: Ext. 7154

Department

Head Signature: Don Ashton, M.P.A., Director

CONTRACTOR:

Name: CA Dept. of Health Care Services

1500 Capitol Avenue, MS 2702

Sacramento, CA 95899

CONTRACTING DEPARTMENT: HHS/Mental Health Division

Service Requested: Performance Agreement

Contract Term: 07/01/2016 – 06/30/2017

Contract/Grant Value: \$0

Compliance with Human Resources requirements? N/A Yes No:

Compliance verified by: n/a

COUNTY COUNSEL: (Must approve all contracts and MOU's)

Approved: _____ Disapproved: _____ Date: _____ By: _____

Approved: _____ Disapproved: _____ Date: _____ By: _____

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: _____ Disapproved: _____ Date: _____ By: _____

Approved: _____ Disapproved: _____ Date: _____ By: _____

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

Departments:

Approved: Disapproved: _____ Date: 6/22/16 By: 

Approved: _____ Disapproved: _____ Date: _____ By: _____

CFO Review _____ Date _____

Deputy Director, Administration and Contracts _____ Date _____



County of El Dorado

Information Technologies

Jon Henry
Deputy Director

Address: 360 Fair Lane
Placerville, CA 95667
Voice (530) 621-5452

MEMORANDUM

Date: June 22, 2016

To: Zhana McCullough, HHSA/Public Health

Subject: Contract Review, HHSA #097-M1710 Mental Health Division Performance Agreement

Information Technologies reviewed the subject contract, and the following items are noted:

This is a renewal of a previously reviewed agreement. There were some issues noted on previous review (see attached memo). The issue regarding removable media devices remains the same. The other two issues have been addressed with changes in IT Department policy and procedures.

"The commitment of the Information Technologies staff is to deliver creative, practical solutions and services in support of the current and future technological needs of El Dorado County."

Contract #: 024-M1610
Index Code: 419500

CONTRACT ROUTING SHEET

2 of 2

Date Prepared: April 21, 2015

Need Date: April 28, 2015

PROCESSING DEPARTMENT:

Department: HHSA/Mental Health
Dept. Contact: Zhana Mc Cullough
Phone #: Ext. 7154
Department
Head Signature: _____

CONTRACTOR:

Name: CA Dept. of Health Care Services
Address: 1501 Capitol Avenue, Suite 71.5195
Sacramento, CA 95899
Phone: _____

Don Ashton, M.P.A., Director

CONTRACTING DEPARTMENT: HHSA/Mental Health

Service Requested: Performance Agreement
Contract Term: 07/01/2015 - 06/30/2016 Contract/Grant Value: \$0.00
Compliance with Human Resources requirements? N/A X Yes _____ No: _____
Compliance verified by: Funding Agreement

COUNTY COUNSEL: (Must approve all contracts and MOU's)

Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

NOTE: Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

Departments: Information Technologies
Approved: ✓ Disapproved: _____ Date: 4/27/15 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

Please contact (NAME + EXT) with questions or for contract packet pick-up. Thank you!

CFO Review _____ Date _____

Program Manager II, Administration and Contracts _____ Date _____



County of El Dorado Information Technologies

Jon Henry
Deputy Director

Address: 360 Fair Lane
Placerville, CA 95667
Voice (530) 621-5452

MEMORANDUM

Date: April ²⁷~~1~~, 2015

To: Zhana McCullough, HHSA

Subject: Contract Review, HHSA Contract #024-M1610

Information Technologies reviewed the subject contract, and the following items are noted:

Exhibit D, paragraph 6 A 2) d. *Removable media devices*

Written policy prohibits use of unapproved, unencrypted removable storage. However, currently there is no hardware configuration in place to enforce the policy.

Exhibit D, paragraph 6 A 2) f. *Patch Management*

Current IT system policy does not force reboots of desktop machines. To mitigate this gap, IT will begin forcing reboots of HHSA workstations as needed for compliance. This may impact users who routinely leave workstations turned on for extended periods of time (weeks or months, in some cases).

Exhibit D, paragraph 6 A 2) g. *User IDs and Password Controls*

Password complexity and change frequency is in force for some users. To comply, IT will begin enforcing the complexity and frequency policies for all applicable HHSA users, including local admin accounts.

"The commitment of the Information Technologies staff is to deliver creative, practical solutions and services in support of the current and future technological needs of El Dorado County."