



RESOLUTION NO. 045-2009
OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO

WHEREAS, the State Legislature enacted Assembly Bill 1491 in Fiscal Year 1991-92 to give counties a source of funding for their public health, mental health, and certain social services programs; and

WHEREAS, the Welfare and Institutions Code Section 17600 created the Local Revenue Fund and each County receives realignment funds from the State Local Revenue Fund, and each County must establish a Local Health and Welfare Trust fund, which has three separate sub accounts: the mental health sub account, the social services sub account, and the health sub account; and

WHEREAS, Welfare and Institutions Code section 17600.20(a) states: "Any county or city may reallocate money among accounts in the Local Health and Welfare Trust fund, not to exceed 10% of the amount deposited in the account from which the funds are reallocated for that fiscal year"; and

WHEREAS, Assembly Bill 1491 requires the Board of Supervisors to hold a regularly scheduled public hearing to document the reallocation of Realignment revenue; and

WHEREAS, the Board must make a finding that the reallocation is the "most cost-effective use of available resources to maximize client outcome.

BE IT RESOLVED that the Board of Supervisors hereby authorizes the transfer of up to 10% of Fiscal Year 2008-09 Realignment revenue from the Health sub account and the Social Services sub account to the Mental Health sub account, the exact amounts of which shall be determined and submitted to the Board in the form of a budget transfer request accompanied by an updated analysis of consequences to the impacted departments.

BE IT FURTHER RESOLVED that the Board of Supervisors finds this transfer of Realignment revenues to be the most cost-effective use of available revenues to maximize client outcomes.

PASSED AND ADOPTED by the Board of Supervisors of the County of El Dorado at a regular meeting of said Board, held the 23 day of February, 2009, by the following vote of said Board:

Attest:

Suzanne Allen de Sanchez
Clerk of the Board of Supervisors

By: _____

Deputy Clerk

Ayes: James R. Sweeney, John R. Knight,
Ray Nutting, Ron Briggs, Norma Santiago
Noes: None
Absent: None

Chairman, Board of Supervisors
Ron Briggs

I CERTIFY THAT:

THE FOREGOING INSTRUMENT IS A CORRECT COPY OF THE ORIGINAL ON FILE IN THIS OFFICE.

DATE: _____

Attest: SUZANNE ALLEN DE SANCHEZ, Clerk of the Board of Supervisors of the County of El Dorado, State of California.

By: _____