

TO: Workforce Investment Board

DATE: 1/24/02

**FROM: Planning, Policy Development
& Legislation Committee**

- For Action**
- For Information**
- Meeting Notes**

SUBJECT: Amended Memorandum of Understanding, Department of Rehabilitation

PROPOSED MOTION(S): The WIB approve the amended MOU between the Department of Rehabilitation and the WIB, and the WIB recommend approval to the Chief Elected Official [CEO].

DISCUSSION: Section 121 of the Workforce Investment Act outlines the requirement for the WIB, with CEO agreement, to develop and enter into a MOU with the One Stop partners. The initial MOUs described the operation of the local One-Stop delivery system; however, the MOUs did not describe the funding arrangements for services and operating costs of the One-Stop delivery system. Several meetings between the senior One-Stop partners and the WIB Executive Committee resulted in the partners agreeing to share costs through in-kind contributions [part time staff] and the One Stop Operator would provide full-time staff along with equipment and facilities. In addition to the resource and cost sharing agreement , the amended MOU incorporates common intake and referral forms along with other minor administrative changes.

ATTACHMENT(S): Amended MOU

**AMENDMENT TO MEMORANDUM OF UNDERSTANDING
BETWEEN THE MERCED COUNTY WORKFORCE INVESTMENT BOARD
AND MANDATED ONE-STOP PARTNERS
PURSUANT TO THE WORKFORCE INVESTMENT ACT OF 1998 (WIA)**

**PARTNER AGENCY: California State Department of Rehabilitation
AMENDMENT NUMBER 1
MOU AGREEMENT NUMBER 2001103**

THIS AMENDMENT to the Memorandum of Understanding between the CA State Department of Rehabilitation (DR) and the Workforce Investment Board is executed this ____ day of _____, 2001.

WHEREAS, the parties entered into an agreement for said services on May 15, 2001, a copy of which is attached as "Exhibit A," and

WHEREAS, the parties mutually desire to continue with said agreement as modified hereinafter. It is agreed as follows:

Page 5: Release of Information: Add to paragraph: DR agrees to honor the attached Information Survey (IS) Form at Attachment A, for information release.

Page 5, CROSS-REFERRAL: Amend to reflect: All One-Stop Partners will utilize the common Information Survey (I/S) Form, at Attachment A, for cross referrals within the One-Stop Centers. The I/S, in conjunction with the eligibility and assessment process, will be used to determine the training/service needs for adults and dislocated workers. For referrals outside the One-Stop Centers, the Partners will utilize the common Worknet of Merced County Interagency Referral Form at Attachment B. The referring partner will annotate the referral form to reflect the types of services needed, the referral agency, sign/date the form and direct the client to the appropriate servicing partner/agency.

Page 5, RESOURCE SHARING: Amend to reflect: The partners agree to share resources in accordance with the attached Resource/Cost Sharing Agreement. The Resource/Cost Sharing Agreement is the partner's financial commitment for the period of one year as stated in the attached agreement. The One-Stop system is a work in progress, and its cost and the partner resource contributions are expected to evolve as the system evolves. As partner contributions change, based on either the ability of the partner to contribute/or an increased need for services in the One-Stop Center, this Resource/Cost Sharing Agreement may be modified with the mutual consent of the partner and the Workforce Investment Board.

Page 5, D. Amend to include: Core Services provided to individuals with disabilities (enrolled for DR services):

- Brochures and public relations information
- Orientation sessions for persons referred to DR by One-Stop staff
- Intake
- Evaluations
- Case Staffing

Page 8, DISPUTES: Add to paragraph: If the dispute cannot be resolved through the local Board, the matter must be referred to the State Workforce Investment Board for resolution.
Amendment # 1 of MOU between WIB & CA State Department of Rehabilitation, # 2001103

Page 8 : Add **H.** One-Stop co-location of staff for Ca State Department of Rehabilitation. CA State Department of Rehabilitation agrees to provide a representative a minimum of 8 hours per week.

Page 8: ADD: I. Cost Sharing/Allocation: CA State Department of Rehabilitation agrees to share the costs associated with providing shared services at the One-Stop Center. Initially, and until further negotiation, CA State Department of Rehabilitation will share the costs through in-kind contributions as follows::

<u>Staff</u>	<u>Time</u>	<u>In-Kind</u>
1 Staff	A minimum of 8 hours per week	\$20,000
Supervision	(included in FTE for staff)	
Total		\$20,000

Add **Page 10 & 11:** Attachment A, Information Survey

Add **Page 12:** Attachment B, Worknet of Merced County, Interagency Referral Form

Except as herein modified, all terms and conditions in said MOU (# 2001103) as heretofore approved, remain unchanged and in full force and effect.

Amendment # 1 of MOU between WIB & CA State Department of Rehabilitation, # 2001103

AUTHORITY AND SIGNATURES: The individuals signing below have the authority to commit the partner they represent to the terms of this Amendment to the MOU and do so commit by signing.

Merced County Workforce Investment Board

Rick Osirio Chair, Merced County Workforce Investment Board Date _____

Merced County Board of Supervisors

Joe Rivero, Chair, Merced County Board of Supervisors Date _____

One-Stop Partner: CA State Department of Rehabilitation

Dean Cormany, Fresno District Administrator, Dept. of Rehabilitation Date _____

APPROVED AS TO LEGALITY AND FORM
DENNIS L. MYERS, COUNTY COUNSEL

BY _____ DATE

Deputy