

THE INFORMATION IN THIS BOX IS NOT A PART OF THE CONTRACT AND IS FOR COUNTY USE ONLY



Contract Number
19-559 A-1

SAP Number
N/A

Human Services

Department Contract Representative	John Greswit, Contract Analyst
Telephone Number	(909) 388-0255
Contractor	California Department of Social Services
Contractor Representative	Information Security & Privacy Office - PSA
Telephone Number	cdsspsa@dss.ca.gov
Contract Term	09/01/19 through 03/01/24
Original Contract Amount	N/A
Amendment Amount	N/A
Total Contract Amount	N/A
Cost Center	N/A

Briefly describe the general nature of the contract:

Amendment No. 1 to the non-financial Data Privacy and Security Agreement with the California Department of Social Services, extending the termination date to allow ongoing transmissions of Personally Identifiable Information (PII), ensuring the privacy and security of PII is protected and maintained at the county level, for the period of September 1, 2019 through March 1, 2024.

FOR COUNTY USE ONLY

Approved as to legal form:

► Kaleigh Ragon

Kaleigh Ragon, Deputy County Counsel

Date February 21, 2023

Reviewed for Contract Compliance

► _____

Date _____

Reviewed/Approved by Department

► _____

Date _____

**AMENDMENT TO THE
PRIVACY AND SECURITY AGREEMENT (Agreement)
BETWEEN**

the California Department of Social Services (CDSS) and the
County of San Bernardino,
Department/Agency of Human Services Group;
parties to the Agreement #19-36, effective on September 1, 2019.

This Amendment entered into by between the
County of San Bernardino,
Department/Agency of Human Services Group,
(County Department) and CDSS, extends the termination date of the Agreement to
allow ongoing transmissions of PII while the renewal of the Agreement is negotiated and
finalized between CDSS and the County Departments/Agencies.

AGREEMENTS

CDSS and County Department/Agency mutually agree to modify the following parts of
the Agreement as set forth below:

XVIII. TERMINATION

- A. This Agreement shall terminate on either March 1, 2024 or upon execution of a
successor Agreement, whichever occurs sooner. The parties can agree in writing
to extend the term of the Agreement. County Department/Agency requests for an
extension shall be approved by CDSS and limited to no more than a six (6)
month extension.
- B. **Survival:** All provisions of this Agreement that provide restrictions on disclosures
of PII and that provide administrative, technical, and physical safeguards for the
PII in the County Department/Agency's possession shall continue in effect
beyond the termination or expiration of this Agreement, and shall continue until
the PII is destroyed or returned to CDSS.

Except as set forth in this Amendment, the Agreement is unaffected and shall continue
in full force and effect in accordance with its terms. If there is conflict between this
amendment and the Agreement, the terms of this amendment will prevail.


SIGNATORIES

The signatories below warrant and represent that they have the competent authority on behalf of their respective agencies to enter into the obligations set forth in this Agreement.

The authorized officials whose signature appears below have committed their respective agencies to the terms of the Agreement.

For the County of San Bernardino,

Department/Agency of Human Services Group,

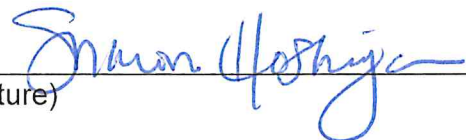

(Signature)

3/3/2023
(Date)

Leonard X. Hernandez
(Name)

Chief Executive Officer
(Title)

For the California Department of Social Services,


(Signature)

3.30.2023
(Date)

Sharon Hoshiyama
(Name)

Sharon
Chief, Contracts Bureau
(Title)



County of San Bernardino

DELEGATED AUTHORITY – DOCUMENT REVIEW FORM

This form is for use by any department or other entity that has been authorized by Board of Supervisors/Directors action to execute grant applications, awards, amendments or other agreements on their behalf. All documents to be executed under such delegated authority must be routed for County Counsel and County Administrative Office review prior to signature by designee.

Note: This process should NOT be used to execute documents under a master agreement or template, or for construction contract change orders. Contact your County Counsel for instructions related to review of these documents.

Complete and submit this form, along with required documents proposed for signature, via email to the department's County Counsel representative and Finance Analyst. If the documents proposed for signature are within the delegated authority, the department will submit the requisite hard copies for signature to the County Counsel representative. Once County Counsel has signed, the department will submit the signed documents in hard copy, as well as by email, to CAO Special Projects Team for review. If approved, the department will be provided routing instructions as well as direction to submit one set of the executed documents to the Clerk of the Board within 30 days.

For detailed instructions on submission requirements, reference Section 7.3 of the Board Agenda Item Guidelines as the Delegation of Authority does not eliminate the document submission requirements.

Department/Agency/Entity: Human Services

Contact Name: John Greswit Telephone: (909) 388-0255

Agreement No.: 19-559 Amendment No.: 1 Date of Board Item 8/20/19 Board Item No.: 31

Name of Contract Entity/Project Name: Department of Social Services (CDSS)/Data Privacy and Security Agreement

Explanation of request/Special Instructions:

Human Services is requesting approval for the Chief Executive Officer (CEO) to execute Amendment No. 1 to extend Agreement No. 19-559 for one year, at the request of the State CDSS. On 8/20/19 (Item No. 31), the Board approved Agreement No. 19-559 with the CDSS and authorized the CEO to execute any amendments on behalf of the County, subject to review by County Counsel. The term was previously extended by CDSS for six months through 3/01/23, via an email with the AEO (attached), pursuant to a six-month extension provision in the original agreement. The amendment for extension affords CDSS additional time to complete and negotiate the new agreement for data privacy and security with the County.

Insert check mark that the following required documents are attached to this request:

- ☒ Documents proposed for signature (Note: For contracts, include a signed non-standard contract coversheet for contracts not submitted on a standard contract form).
- ☒ Board Agenda item that delegated the authority

Department Routed to County Counsel	County Counsel Name: Kaleigh Ragon	Date Sent: 2/24/23
Reviewing County Counsel Use Only	Review Date <u>February 24, 2023</u> DocuSigned by: <u>Kaleigh Ragon</u> 1801CA Signature	Determination: <input checked="" type="checkbox"/> Within Scope of Delegated Authority <input type="checkbox"/> Outside Scope of Delegated Authority
CAO-Special Projects Use Only	Review Date <u>3/3/23</u> <u>[Signature]</u> Signature	Disposition: <input checked="" type="checkbox"/> Route for signature to: ____ Chair <input checked="" type="checkbox"/> CEO ____ Department ____ Return to Department for preparation of agenda item