

# Monterey County Board of Supervisors Referral Submittal Form

**Referral No. 2022.09**  
**Assignment Date: 2/08/22**  
(Completed by CAO's Office)

**SUBMITTAL - Completed by referring Board office and returned to CAO no later than noon on Thursday prior to Board meeting:**

Date: 2/3/22	Submitted By: Supervisor Lopez	District #: 3
Referral Title: Salinas Valley Five Cities Joint Powers Authority		
Referral Purpose: Explore the potential of creating a Salinas Valley Five Cities Joint Powers Authority to develop the broadband, and/or high-speed internet needed by all the communities and areas represented by the JPA.		
Brief Referral Description (attach additional sheet as required): California is facing a digital crisis, with far too many residents left without adequate and affordable broadband service. The COVID-19 pandemic has highlighted the lack of reliable and affordable internet service to the forefront due to the necessity of distance learning and remote working, tele-healthcare and remote access to employment, economic and human services. The Salinas Valley is no exception. There are numerous areas that prior to the pandemic were uncovered or inadequately covered. The result has been that Hartnell, School Districts and County Offices of Education have had to piece together interim solutions, such as hotspots, to enable distance learning for all students. Likewise, the five Cities (Salinas, Gonzales, Soledad, Greenfield, King City) were left trying to figure out how to quickly support these efforts, if at all, for their communities. It would be beneficial to work together and share costs to plan and implement the development of community broadband and/or high-speed internet.		
<b>Classification - Implication</b>		<b>Mode of Response</b>
<input type="checkbox"/> Ministerial / Minor <input type="checkbox"/> Land Use Policy <input type="checkbox"/> Social Policy <input type="checkbox"/> Budget Policy <input checked="" type="checkbox"/> Other: <u>IT/Infrastructure</u>		<input type="checkbox"/> Memo <input checked="" type="checkbox"/> Board Report <input checked="" type="checkbox"/> Presentation
		<b>Requested Response Timeline</b>
		<input checked="" type="checkbox"/> 2 weeks <input type="checkbox"/> 1 month <input type="checkbox"/> 6 weeks <input type="checkbox"/> Status reports until completed <input type="checkbox"/> Other: _____ <input type="checkbox"/> Specific Date: _____

**ASSIGNMENT – Provided by CAO at Board Meeting. Copied to Board Offices and Department Head(s) Completed by CAO's Office:**

Department(s): <u>ITD/County Counsel</u>	Referral Lead: <u>Eric Chatham</u> Support Lead: <u>Les Girard</u>	Board Date: <u>2/08/22</u>
--	---	----------------------------

**REASSIGNMENT – Provided by CAO. Copied to Board Offices and Department Head(s). Completed by CAO's Office:**

Department(s):	Referral Lead:	Date:
----------------	----------------	-------

**ANALYSIS - Completed by Department and copied to Board Offices and CAO:**

Department analysis of resources required/impact on existing department priorities to complete referral:	
Analysis Completed By: _____	<b>Department's Recommended Response Timeline</b>
Date: _____	<input type="checkbox"/> By requested date <input type="checkbox"/> 2 weeks <input type="checkbox"/> 1 month <input type="checkbox"/> 6 weeks <input type="checkbox"/> 6 months <input type="checkbox"/> 1 year <input type="checkbox"/> Other/Specific Date: _____

**REFERRAL RESPONSE/COMPLETION - Provided by Department to Board Offices and CAO:**

Referral Response Date:	Board Item No.:	Referrals List Deletion:
-------------------------	-----------------	--------------------------

**Note:** Please cc Karina Bokanovich, Rocio Quezada and Maegan Ruiz-Ignacio on all CAO correspondence relating to referrals.