

**Monterey County Board of Supervisors
Referral Submittal Form**

Referral No. 2022.24
Assignment Date: 11/8/2022
(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: 11/03/22	Submitted By: Supervisor Lopez	District #: 3
Referral Title: LGBTQ Commission		
Referral Purpose: To create a commission that monitors and makes recommendations around policies that impact LGBTQ communities, in order to provide leadership and support for the well-being and longevity of LGBTQ communities in Monterey County through coordinated, integrated approaches		
Brief Referral Description (attach additional sheet as required): To create a strong bridge throughout Monterey County that affirms and embraces the whole person, especially LGBTQ individuals and their families. We need to create inclusive systems of support that respond to the critical, often diverse, and complex, needs of this county, with a special focus on LGBTQ communities who have been largely underserved. The commission should consist of one appointed representative from each supervisorial district, one county agency representative, and one member appointed at large. The commission shall have the following goals but not limited:		
<ul style="list-style-type: none"> • Offering guidance to County departments seeking to serve LGBTQ individuals fairly and properly • Ensuring all County departments are following best practices when it comes to treatment of LGBTQ clients, residents, and employees • Identifying further gaps in services to LGBTQ residents and develop resources to address them • Promoting and collaborating on LGBTQ community events, including those that foster dialogue and increase access to services for the most disenfranchised members of the LGBTQ community • Consider proposed legislation and how it would impact the LGBTQ community 		
Classification - Implication		Mode of Response
<input type="checkbox"/> Ministerial / Minor	<input type="checkbox"/> Memo <input checked="" type="checkbox"/> Board Report <input type="checkbox"/> Presentation	Requested Response Timeline
<input type="checkbox"/> Land Use Policy		
<input checked="" type="checkbox"/> Social Policy	<input type="checkbox"/> 2 weeks <input type="checkbox"/> 1 month <input type="checkbox"/> 6 weeks	
<input type="checkbox"/> Budget Policy	<input checked="" type="checkbox"/> Status reports until completed	
<input type="checkbox"/> Other: _____	<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): Civil Rights Office	Referral Lead: Juan Rodriguez	Board Date: 11/8/2022
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REASSIGNMENT – Provided by CAO. Copied to Board Offices and Department Head(s). Completed by CAO's Office:

Department(s):	Referral Lead:	Date:
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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:	Department's Recommended Response Timeline

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

Referral Response Date:	Board Item No.:	Referrals List Deletion:
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Note: Please cc Claudia Escalante, Karina Bokanovich, Rocio Quezada and Maegan Ruiz-Ignacio on all CAO correspondence relating to referrals.