

**Before the Board of Supervisors in and for the
County of Monterey, State of California**

Resolution No.

Approve and Adopt the revised Tentative)
Side Letter Agreement between the Service)
Employees International Union (SEIU) Bank)
of Monterey County in the amount of)
\$250,000 Local 2015, representing the In)
Home Supportive Services Providers,)
effective upon Board approval, Effective)
upon Board Approval through February 28,)
2021.)

WHEREAS, the Service Employees International Union, Local 2015 (SEIU) is the recognized bargaining unit for the In-Home Support Services providers (“Providers”) in the County of Monterey (the “County”), and

WHEREAS, the County’s In-Home Supportive Services Public Authority (the “Public Authority”) and SEIU are required under the Meyers-Milias-Brown Act to meet and confer in good faith regarding wages, hours, benefits and other terms and conditions of employment; and

WHEREAS, the Monterey County Board of Supervisor’s approved and adopted and agreement and side letter on February 26, 2019; and

WHEREAS, the Public Authority and SEIU having met and conferred in good faith reached a total tentative agreement on the revised Side Letter for health benefits for the IHSS Providers on February 27, 2020; and

WHEREAS, the health benefits increased from \$0.44 to \$0.48 per hours worked by the IHSS Providers; and

WHEREAS, the State will require 60 days to implement the rate change, with an estimated date of July 1, 2020;

NOW, THEREFORE,

BE IT RESOLVED by the Board of Supervisors for the County of Monterey as follows:

1. Pursuant to the Tentative revised side letter to the Agreement, effective upon Union ratification and Board and State approval, the Public Authority SOC449 Rate package results in the following: IHSS Base wage of \$13.00 and a continuing wage supplemental of \$1.29, \$0.48 for health benefits, administrative rate of \$0.18 per provider hour, and payroll taxes of \$1.57 per hour as indicated in the SOC449 Form attached.
2. Health and Safety supplies in the amount of \$5,000 will continue to be provided to the IHSS Providers annually.

PASSED AND ADOPTED upon motion of Supervisor _____, seconded by Supervisor _____ and carried this ____ day of _____ by the following vote, to wit:

AYES:

NOES:

ABSENT:

I, Valerie Ralph, Clerk of the Board of Supervisors of the County of Monterey, State of California, hereby certify that the foregoing is a true copy of an original order of said Board Supervisors duly made and entered in the minutes thereof of Minute Book ____, for the meeting on _____.

Dated:

Valerie Ralph, Clerk of the Board of Supervisors
County of Monterey, State of California

By _____
Deputy