

Contra Costa County Board of Supervisors



Triennial Sunset Review of Appointed Boards, Committees, & Commissions

Phase II

INTRODUCTION

Contra Costa County is governed by a five-member Board of Supervisors elected by the citizens of our county. The work of the Board of Supervisors is augmented by various boards, committees, and commissions that are comprised of residents who are appointed by the Board of Supervisors. These appointed bodies are formed to provide support and citizen input by making recommendations to the Board of Supervisors on various issues such as service delivery problems or community needs. County advisory bodies are created in response to specific community needs or as a result of state and federal legislation or contractual agreements with other public agencies. These bodies serve as direct links between the Board of Supervisors and our community while expanding communication between the public and County government and enhancing the quality of life for our residents.

SUMMARY OF THE TRIENNIAL SUNSET REVIEW PROCESS

The Contra Costa County Board of Supervisors adopted Resolution No. 2012/261 on June 26, 2012, establishing a “triennial sunset review process” for most county advisory bodies whose members are appointed by the Board of Supervisors. Each year the Clerk of the Board schedules one-third of these bodies for review by the County Administrator's Office and the Internal Operations Committee of the Board of Supervisors.

The purpose of the Triennial Sunset Review is to provide the Board of Supervisors with a method to periodically evaluate the purpose, performance, and effectiveness of advisory bodies. For additional information about the review procedure, please refer to [Resolution 2012/261](#) and the [Advisory Body Handbook](#).

INSTRUCTIONS

Phase II of the Triennial Review will cover the years 2021, 2022, and 2023. Please complete all three parts of the attached survey, including [Part I: Questions](#),

Part II: Materials, and [Part III: Signatures & Certification](#).

Completed surveys are due to the Clerk of the Board by **Friday, November 29, 2024**. You can submit your completed materials to Lauren Hull, Senior Management Analyst for the Clerk of the Board by *either* e-mail or hardcopy mail.

E-mail: Lauren.Hull@cob.cccounty.us

Mail: Contra Costa County Clerk of the Board
 Attn: Lauren Hull, Senior Management Analyst
 1025 Escobar Street, 1st Floor
 Martinez, CA 94553

Should you have any questions, please contact Lauren Hull at the above e-mail address or at (925) 655-2007.

**Contra Costa County Board of Supervisors
Triennial Sunset Review of Appointed Boards, Committees, & Commissions**

Part I: Questions

STAFFING & CONTACT INFORMATION

Name of Advisory or Independent Body: Advisory Council on Equal Employment Opportunity (ACEEO)

Name of Person Completing the Triennial Review Survey: *Click or tap here to enter text.*

Chairperson Name: Leonard Ramirez

Main Staff Person Name: Antoine Wilson

Staff Agency/Department: Risk Management

Main Staff Telephone Number: 925-335-1455

Main Staff Email: Antoine.Wilson@riskm.cccounty.us

Website (enter "N/A" if the body does not have a website): N/A

How many staff members provide support for this body? 2

On average, how many total hours per week of staff support does this body utilize? *Click or tap here to enter text.*

MEMBERSHIP

1. How many authorized, voting seats are on the body? 13

2. How many authorized, voting seats are currently filled? 11

3. Does the body have a sufficient number of members to achieve its mission?

Yes

No

If "No", do you recommend an adjustment to the number of seats (an increase, decrease, or other restructuring)?

Click or tap here to enter text.

4. Does the body have a sufficient composition of members/types of seats to achieve its mission?

Yes

No

If “No”, please indicate which seats you would modify and why.
Click or tap here to enter text.

5. **Has the body experienced any membership challenges (i.e. high vacancy rates, trouble filling seats, high member turnover, difficulty meeting quorum, or issues with recruitment and retention)?**

- Yes
 No

If “Yes”, please describe the membership challenges experienced.
Difficulty filling seats and issues with recruitment.

6. **Are there special qualifications, requirements, or prerequisites for members to serve on the body?**

- Yes
 No

If “Yes”, please explain whether the requirements are important and necessary, or describe any issues where these requirements have limited recruitment of potential candidates.

The requirements to be a resident of or be employed in the County are important and necessary to improving the work done for the County.

MEETINGS

1. **How many “full body” meetings were scheduled during the last 36 months?** 33
2. **How many “full body” meetings were cancelled during the last 36 months?** 3
3. **How many “full body” meetings were cancelled during the last 36 months specifically due to a lack of quorum?** 3
4. **How many subcommittees does the body have and how frequently do they meet?**
Click or tap here to enter text.
5. **How many times did members attend meetings remotely for “just cause” in the past year?** 2
6. **How many times did members attend meetings remotely for “emergency circumstances” in the past year?** 2
7. **Aside from being in person, how can members of the public view meetings and provide public comment?**
 N/A (i.e. attending in person is the only option)
 Via both phone and an online platform
 Via phone only
 Via an online platform only

COMMUNITY INFORMATION, OUTREACH, & MEETING NOTICES

1. How does the body engage stakeholders and the general public on issues and programs within the body's area of responsibility? *Click or tap here to enter text.*
2. How are stakeholder and public input incorporated into the body's mission and objectives? *Click or tap here to enter text.*
3. What outreach efforts are undertaken to encourage public participation in meetings and sponsored activities? *Click or tap here to enter text.*
4. How far in advance of the meeting date does the body post its agenda? 1 week before meeting.
5. Where are meeting notices (e.g., agendas & cancellation notices) posted? Please note all locations, both physical and electronic. Legistar
6. How are meeting agendas currently created, as of the date of this survey?
 - Legistar
 - Microsoft Word
 - Other Application (please specify): *Click or tap here to enter text.*
7. What information is regularly presented to the body's members to keep them informed of the body's performance? *Click or tap here to enter text.*

MISSION & PURPOSE

1. Is this body or its activities mandated by state or federal law or regulations?
 - Yes
 - No

If "Yes", please provide the citation to the applicable law. *Click or tap here to enter text.*
2. What is the original purpose and responsibility of the body, as prescribed in its establishing documents? *Click or tap here to enter text.*
3. Have there been major changes to the body's responsibility (such as changes in legal mandates or in the major activities that it has undertaken)?
 - Yes
 - No

If "Yes", please describe these changes. *Click or tap here to enter text.*
4. Are the body's bylaws reflective of the body's current mission, purpose, and focus?
 - Yes
 - No
 - N/A - body does not currently have bylaws

If “No”, please describe how the body’s current mission, purpose, or focus differ from the existing bylaws.

Click or tap here to enter text.

5. Do you recommend changes to the body’s mission, purpose, or focus?

Yes

No

If “Yes”, please explain the changes you would suggest and why.

Click or tap here to enter text.

6. What target population or priority communities are served by the body? *Click or tap here to enter text.*

7. List activities, services, programs, and/or special projects the body delivers to achieve its current mission. *Click or tap here to enter text.*

BUDGET

1. Does the body have an annual operating budget?

Yes

No

2. Does the body collaborate with any private organization (not the county or an associated governmental agency) that provides, holds, and/or disburses funds on behalf of the body, such as a “Friends” committee or other organization?

Yes

No

If “Yes”, please list the organization.

Click or tap here to enter text.

CHALLENGES

1. Are there any additional challenges or problems that the body has been unable to resolve or wishes to bring to the attention of County Administration and/or the Board of Supervisors?

Yes

No

If “Yes”, please provide a description of the challenge or concern.

Click or tap here to enter text.

If “Yes”, please also list who is affected by this challenge or problem.

Click or tap here to enter text.

If “Yes”, please also list what changes or other recommendations the committee has considered in response.

Click or tap here to enter text.

ACCOMPLISHMENTS & IMPACT

- 1. Describe the specific impact of the work of the body and its work in achieving its mission.** *Click or tap here to enter text.*
- 2. Describe any effects the body has had on the target population or community.** *Click or tap here to enter text.*
- 3. Optional: Describe any additional comments on the effectiveness of the accomplishments and impact of the body.** You may use this space to share additional comments about the work of the body, its effectiveness, the services it provides, or any other related achievements. *Click or tap here to enter text.*

Part II: Materials

Please attach or provide links to the following materials.

- Agendas from the most recent past 5 meetings:
 - Attached; *or*
 - Link: *Click or tap here to enter text.*

- Minutes (or records of action) from the most recent past 5 meetings:
 - Attached; *or*
 - Link : *Click or tap here to enter text.*

- Bylaws currently in effect:
 - This body does not have bylaws; *or*
 - Attached; *or*
 - Link: *Click or tap here to enter text.*

- Annual Reports for years 2021, 2022, and 2023 if available, as submitted to the Board of Supervisors:
 - There are no annual reports for the years 2020-2022; *or*
 - Attached; *or*
 - Link: *Click or tap here to enter text.*

Part III: Signatures & Certification

Please print, handwrite, and sign this section after reading the certification below:

I certify that I have reviewed this survey and believe that our board, committee, or commission's (body's) responses to the Triennial Review Phase II survey are complete and accurate.

Name of Board, Committee, or Commission (body) Chairperson: _____

Signature of Chairperson: _____

Date: _____

Name of Board, Committee, or Commission (body) Staff Person: _____

Signature of Staff Person: _____

Date: _____

Please direct completed surveys and any questions to:

Lauren Hull, Senior Management Analyst for the Clerk of the Board
Lauren.Hull@cob.cccounty.us
(925) 655-2007

Thank you for your time and cooperation!

