

**CITY OF EL PASO, TEXAS
AGENDA ITEM
DEPARTMENT HEAD'S SUMMARY FORM**

DEPARTMENT: City Attorney

AGENDA DATE: February 1, 2011

CONTACT PERSON NAME AND PHONE NUMBER: Elaine S. Hengen, Senior Assistant City Attorney, 541-4550

DISTRICT(S) AFFECTED: All

SUBJECT:

APPROVE a resolution / ordinance / lease to do what? OR AUTHORIZE the City Manager to do what? Be descriptive of what we want Council to approve. Include \$ amount if applicable.

Resolution that the Mayor be authorized to sign an Amendment to the Interlocal Agreement between the City of El Paso, the County of El Paso, and the El Paso County Hospital District to provide for the termination of the City's participation in the El Paso MHMR Center; and that the City Manager provide notice to the Texas Department of State Health Services of the termination of the City's participation.

BACKGROUND / DISCUSSION:

Discussion of the what, why, where, when, and how to enable Council to have reasonably complete description of the contemplated action. This should include attachment of bid tabulation, or ordinance or resolution if appropriate. What are the benefits to the City of this action? What are the citizen concerns?

Based on the City Council's action on January 11, 2011 that the City will withdraw from participation as a MHMR sponsoring agency, the County and the Hospital District have proposed an amendment to the Interlocal Agreement to provide for the City's immediate withdrawal. The Agreement currently provides that the City give 90 days notice of its termination. The proposed amendment would forego this notice and waiting period and provide for an immediate and orderly transition. The City still needs to provide notice to the Texas Department of State Health Services of the termination of its participation, so the resolution provides for the City Manager to give this notice.

PRIOR COUNCIL ACTION:

Has the Council previously considered this item or a closely related one?

This item is a follow-up to the Council's decision on January 11, 2011 to withdraw from the Interlocal Agreement.

AMOUNT AND SOURCE OF FUNDING:

How will this item be funded? Has the item been budgeted? If so, identify funding source by account numbers and description of account. Does it require a budget transfer?

BOARD / COMMISSION ACTION:

Enter appropriate comments or N/A

*****REQUIRED AUTHORIZATION*****

DEPARTMENT HEAD:

RESOLUTION

BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF EL PASO:

That the Mayor be authorized to sign an Amendment to the Interlocal Agreement between the City of El Paso, the County of El Paso, and the El Paso County Hospital District to provide for the termination of the City's participation in the El Paso MHMR Center; and that the City Manager provide notice to the Texas Department of State Health Services of the termination of the City's participation.

APPROVED this 1st day of February 2011.

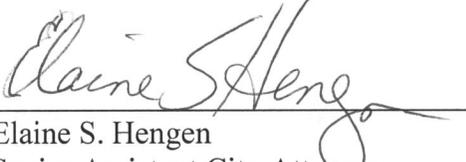
CITY OF EL PASO

John F. Cook, Mayor

ATTEST:

Richarda Duffy Momsen
City Clerk

APPROVED AS TO FORM:



Elaine S. Hengen
Senior Assistant City Attorney

IN WITNESS WHEREOF, the County of El Paso, the City of El Paso, and the El Paso County Hospital District have executed this Amendment to Interlocal Agreement as of the date last written below.

ATTEST:

THE COUNTY OF EL PASO

County Clerk

By _____
County Judge Veronica Escobar
Date: January 24, 2011

ATTEST:

THE CITY OF EL PASO

City Clerk

By _____
Mayor John Cook
Date: _____

ATTEST:

EL PASO COUNTY HOSPITAL DISTRICT

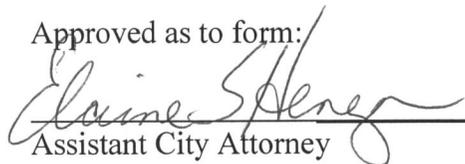
Secretary

By _____
Dr. Jose Luna
Chair
Hospital District Board of Managers
Date: _____

Approved as to form:

Assistant County Attorney

Approved as to form:



Assistant City Attorney

Approved as to form:

Chief Legal Officer for the Hospital District