

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

813



FROM: Auditor-Controller

SUBMITTAL DATE:
September 16, 2013

SUBJECT: Report on Disaster Recovery

RECOMMENDED MOTION: That the Board of Supervisors:
1. Receive and file report on Disaster Recovery

BACKGROUND:
Summary

The County Auditor-Controller requests that the Board provide strategic direction to Riverside County's Information Technology Department (RCIT) to formulate a Disaster Recovery Plan for business continuity and mitigate the impact of an unforeseen event or disaster. Ongoing talks since 2008 have not yielded a plan to date.

It is imperative that immediate action be taken to reduce enterprise-wide risk exposure. This includes protection of the County's financials, its ability to meet payroll and to generate capital if and when needed. Request also includes protection of Riverside County's Regional Medical Center (RCRMC) and Department of Public Social Services' (DPSS) systems to keep those departments functioning during an unforeseen event or disaster.

Paul Angulo

Paul Angulo, CPA, M.A.
County Auditor-Controller

Departmental Concurrence

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0	Consent <input checked="" type="checkbox"/> Policy <input type="checkbox"/>
NET COUNTY COST	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0	

SOURCE OF FUNDS:	Budget Adjustment: No
	For Fiscal Year: n/a

C.E.O. RECOMMENDATION: APPROVE
BY: *Karen L. Johnson*
County Executive Office Signature

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Ashley, seconded by Supervisor Stone and duly carried by unanimous vote, IT WAS ORDERED that the above matter is received and filed as recommended.

Ayes: Jeffries, Tavaglione, Stone, Benoit and Ashley
Nays: None
Absent: None
Date: ~~2013~~ September 24, 2013
xc: Auditor

Kecia Harper-Ihem
Clerk of the Board
By: *Kecia Harper-Ihem*
Deputy

- A-30
- Positions Added
- 4/5 Vote
- Change Order

Prev. Agn. Ref.: | **District:** ALL | **Agenda Number:**

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