#### CONTRACT TO PROVIDE SAFECARE® PROGRAM SERVICES

Santa Barbara County
Department of Social Services

## First Amendment Effective upon Execution

This is a first amendment to the Agreement for Services of Independent Contractor between the **County of Santa Barbara** (COUNTY) and **Child Abuse Listening & Mediation (CALM)** (CONTRACTOR), for the continued provision of the SafeCare® Program, an evidence-based, in-home training curriculum for parents who are at-risk or have been reported for child maltreatment in South and mid-County (Santa Barbara and Lompoc area); to serve as the lead for training/coaching new home visitors as needed within the project; and to cascade the SafeCare® model further into the Santa Barbara County service delivery systems.

#### **RECITALS**

Whereas, the parties desire to amend the Agreement to extend the term of the existing Agreement; and

Whereas, this First Amended Agreement incorporates the terms and conditions set forth in the original Agreement, approved by the County Board of Supervisors on October 26, 2010.

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, COUNTY and CONTRACTOR agree as follows.

#### 1. Amendments

- A. The Agreement is amended as follows:
  - <u>TERM</u>. For the extension period, CONTRACTOR shall commence performance on *July 1*, 2011 and end performance upon completion, but no later than *June 30*, 2012, unless otherwise directed by COUNTY or unless earlier terminated. The COUNTY at the end of the Agreement term has an option to renegotiate *one* (1) additional annual year renewal, without rebidding.
- B. Add Exhibit B-2, FY 11/12.

**Budget for** 

Name of Applicant Agency: Child Abuse Listening and Mediation, Inc. (CALM)

Term Beginning: 7/1/2011 Term Ending: 06/30/2012

## A. SALARIES AND EMPLOYEE BENEFITS

1) Salaries - List each position to be funded by this award.

Position(s)	Full-Time Equivalent (FTE) <sup>1</sup>	Budget for Contract Term
Direct Service Positions		
Bilingual Home Visitors	3.00	\$ 110,033.00
Administrative Positions		
Program Manager	0.05	\$ 4,134.00
Sub-Total Salaries:		
		\$ 114,167.00

<sup>&</sup>lt;sup>1</sup> FTE = Amount of time employee works on this program. State as a percentage based upon a 40 hour work week.

2) Employee Benefits - List type of employee benefit(s) and amount budgeted.

Type of Employee Benefit	Budget for Contract Term
Direct Service Positions	\$ 44,977.00
Health, Dental, Life, Holiday, PTO, Workers Comp, Payroll Taxes, SUI	
Administrative Positions	\$ 1,941.00
Sub-Total Employee Benefits	\$ 46,918.00
Percentage Benefits	41.1%
TOTAL SALARIES AND EMPLOYEE BENEFITS	\$ 161,085.00

## **B. SERVICES AND SUPPLIES**

1) Services - List any consultant(s) or contract services

Name of Consultant(s)/Contract Services	Contract Term
	\$ -

LINE ITEM BUDGET	EXH	EXHIBIT B-2		
	Sub-Total Services	\$ -		

# 2) Supplies

Item	Budget for Contract Term
Office Expense*	\$ 2,881.00
Program Expense*	\$ 1,000.00
Telephone*	\$ 1,000.00
Mileage*	\$ 2,500.00
Other*	
Sub-Total Supplies	\$ 7,381.00
TOTAL SERVICES AND SUPPLIES	\$ 7,381.00

## C. OPERATING EXPENSES

Item*	Budget for Contract Term
Facility Lease/Rental	\$ -
Equipment Lease/Rental*	\$ -
Furnishings*	\$ -
Maintenance	\$ -
Utilities	\$ -
Insurance (Refer to General Contract Provisions for Insurance Requirements)	\$ -
Other*	\$ -
Indirect Costs	\$ 22,305.00
Total Operating Expenses	\$ 22,305.00
GRAND TOTAL LINE ITEM BUDGET	\$ 190,771.00
Minus Revenue	\$ 3,271.00
TOTAL BEING REQUESTED	\$ 187,500.00
TOTAL BEING REQUESTED	φ 101,500.00

IN WITNESS WHEREOF, this Second Amendment to the Agreement has been executed by parties hereto upon this date first above written.

	COUNTY OF SANTA BARBARA
ATTEST: CHANDRA L. WALLAR	By: Chair, Board of Supervisors  Date: KATHY M. GALLAGHER DEPARTMENT OF SOCIAL SERVICES-DIRECTOR
BY:Clerk of the Board	By: Date:
APPROVED AS TO ACCOUNTING FORM: ROBERT W. GEIS, CPA AUDITOR-CONTROLLER	APPROVED AS TO FORM: DENNIS MARSHALL COUNTY COUNSEL
By Deputy	By Deputy County Counsel
APPROVED AS TO INSURANCE FORM: RAY AROMATORIO RISK MANAGEMENT	
By: Risk Manager	

IN WITNESS WHEREOF, this Second Amendment to the Agreement has been executed by participate the participate of the second amendment to the Agreement has been executed by participate the participate of th	S
CONTRACTOR: CALM	
By:	
Date:	