

Second Amendment 2015-2017

TO AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR

This Second Amendment (hereafter Second Amended Contract) to the Agreement for Services of Independent Contractor, **BC 17-083**, is made by and between the **County of Santa Barbara** (County) and **Barton & Associates, Inc.** (Contractor), for the continued services specified herein.

Whereas, Contractor represents that it is specially trained, skilled, experienced, and competent to perform the special services required by County and County desires to retain the services of Contractor pursuant to the terms, covenants, and conditions referenced herein;

Whereas, at the request of County, Contractor provides locum tenens temporary physicians who provide psychiatric services at County Mental Health facilities, and County has ongoing needs for psychiatric staff at outpatient facilities;

Whereas, County anticipates that Contractor will provide, at the request of County, a greater number of services than originally contemplated by the original Agreement, and will incur expenses beyond the value of this Agreement. So as to compensate Contractor for the additional services to be rendered under the Agreement, this Second Amendment adds funds in the amount of \$545,000, to the prior FY 16-17 contract maximum amount of \$1,500,000 for a new Total Contract Maximum not to exceed \$2,465,000 through June 30, 2017; and

Whereas, this Second Amended Contract incorporates the terms and conditions set forth in the Agreement approved by the County Board of Supervisors on June 21, 2016 and the First Amendment approved by the County Board of Supervisors on February 28, 2017, except as modified by this Second Amended Contract.

NOW, THEREFORE, in consideration of the mutual covenants and conditions contained herein, County and Contract agree as follows:

I. **Delete Section 1 of Exhibit B, and replace with the following:**

1. **CONTRACT MAXIMUM.** For services to be rendered under this contract, Contract shall be paid at the rate(s) specified in the Schedule of Rates (Exhibit B-1), with a maximum value not to exceed \$420,000 for FY 15-16 and \$2,045,000 for FY 16-17.

II. **Delete Exhibit B-1, Schedule of Rates, and replace with the following:**

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**EXHIBIT B-1
Schedule of Rates**

	Psychiatry (including Child & Adolescent)	Nurse Practitioner/Physician Assistant
Hourly Rate Range, All inclusive (8 hour per day/40 hour per week minimum)	\$250-\$350	\$140-\$200
Beeper Fee Weeknight (5PM to 8AM)*	\$500-\$600 per night	N/A
Beeper Fee Weekend (8AM to 8AM per 24 hours, no proration for partial days)*	\$600-700 per day	N/A
**All overtime will be calculated at 1.5 times the regular hourly rate		
Total Contract Maximum FY 15-16		\$420,000
Total Contract Maximum FY 16-17		\$2,045,000

The aforementioned rates are all-inclusive base rates only, and if Contractor determines, in its sole discretion that Professionals cannot be placed at the above fees then Professionals with higher rates will be submitted to County for consideration of an Assignment. This section does not preclude other Professionals not mentioned above from being placed at County under this Contract. The schedule of rates for other such Professionals is attached hereto as Exhibit B-2 and incorporated herein by reference.

*Overtime applies for time worked while on-call.

**For hours in excess of 40 hours per week.

III. All other terms remain in full force and effect.

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SIGNATURE PAGE

Second Amendment to Agreement for Services of Independent Contractor between the **County of Santa Barbara** and **Barton & Associates, Inc.**

IN WITNESS WHEREOF, the parties have executed this Second Amendment to be effective on the date executed by COUNTY.

COUNTY OF SANTA BARBARA:

By: _____
JOAN HARTMANN
CHAIR, BOARD OF SUPERVISORS

Date: _____

ATTEST:

MONA MIYASATO
COUNTY EXECUTIVE OFFICER
CLERK OF THE BOARD

By: _____
Deputy Clerk

Date: _____

CONTRACTOR:

Barton & Associates, Inc.

By: _____
Senior Manager

Name: _____
Brooke Meadors

Date: _____

APPROVED AS TO FORM:

MICHAEL C. GHIZZONI
COUNTY COUNSEL

By: _____
Deputy County Counsel

APPROVED AS TO ACCOUNTING FORM:

THEODORE A. FALLATI, CPA
AUDITOR-CONTROLLER

By: _____
Deputy

RECOMMENDED FOR APPROVAL:

ALICE GLEGHORN, PH.D., DIRECTOR
DEPARTMENT OF BEHAVIORAL
WELLNESS

By: _____
Director

APPROVED AS TO FORM:

RAY AROMATORIO
RISK MANAGEMENT

By: _____
Risk Management