

County of Santa Barbara BOARD OF SUPERVISORS

Minute Order

December 8, 2015

Present: 5 - Supervisor Carbajal, Supervisor Wolf, Supervisor Farr, Supervisor Adam, and Supervisor Lavagnino

ALCOHOL, DRUG AND MENTAL HEALTH SERVICES

File Reference No. 15-00940

RE: Consider recommendations regarding Fiscal Year (FY) 2015-2016 Alcohol and Drug Program (ADP) Non-Perinatal Intensive Outpatient Treatment Services Amendments and Budget Revision Request, as follows: (4/5 Vote Required)

a) Approve and authorize the Chair to execute a First Amendment for Services of Independent Contractor with Good Samaritan Shelter Inc., (a local vendor), to add Non-Perinatal Intensive Outpatient Treatment Services, and to increase the contract amount by \$50,000.00 for a maximum contract amount not to exceed \$1,879,729.00 through June 30, 2016;

b) Approve and authorize the Chair to execute a First Amendment for Services of Independent Contractor with Mental Health Systems, Inc. (a local vendor), to add Non-Perinatal Intensive Outpatient Treatment Services, and to increase the contract amount by \$125,000.00 for a maximum contract amount not to exceed \$1,120,481.00 through June 30, 2016;

c) Approve and authorize the Chair to execute a First Amendment for Services of Independent Contractor with Sanctuary Psychiatric Centers (a local vendor), to add Non-Perinatal Intensive Outpatient Treatment Services, and to increase the contract amount by \$75,000.00 for a maximum contract amount not to exceed \$279,790.00 through June 30, 2016;

d) Approve Budget Revision Request No. 0004196 increasing appropriations of \$250,000.00 FY 2015-2016 in the Alcohol, Drug and Mental Health Services (ADMHS) Department, Alcohol and Drug Programs Fund for Services and Supplies, funded by unanticipated revenue from Drug Medi-Cal; and

e) Determine that the above actions are government fiscal activities or funding mechanisms which do not involve any commitment to any specific project which may result in a potentially significant impact on the environment, and are therefore not a project under the California Environmental Quality Act (CEQA) pursuant to section 15378(b)(4) of the CEQA guidelines.

A motion was made by Supervisor Farr, seconded by Supervisor Lavagnino, that this matter be Acted on as follows:.

a) through c) Approved; Chair to execute;

d) and e) Approved.

The motion carried by the following vote:

Ayes: 5 - Supervisor Carbajal, Supervisor Wolf, Supervisor Farr, Supervisor Adam, and Supervisor Lavagnino

OF SANTA	AGENI Clerk of the B 105 E. Anapar Santa Bar	F SUPERVISORS DA LETTER oard of Supervisors mu Street, Suite 407 bara, CA 93101) 568-2240	Agenda Number:	
2015 NOV 24 PM 3: 34	COUNTY OF SAVIA BAPEARA CLERK OF THE EQARD OF SUPERVISORS		Department Name: Department No.: For Agenda Of: Placement: Estimated Time: Continued Item: If Yes, date from: Vote Required:	ADMHS 043 December 8, 2015 Administrative No 4/5
TO: FROM: SUBJECT:		Alice Gleghorn, Ph. Alcohol, Drug, and	Mental Health Servic l and Drug Program l ive Outpatient Trea	Manager, 681-5220
County Coun As to form: Ye	sel Concurrence	0		ntroller Concurrence Yes

Other Concurrence: Risk Management As to form: Yes

Recommended Actions:

That the Board of Supervisors:

- A. Approve and authorize the Chair to execute a First Amendment for Services of Independent Contractor with Good Samaritan Shelter Inc., (a local vendor), to add Non-Perinatal Intensive Outpatient Treatment Services, and to increase the contract amount by \$50,000 for a maximum contract amount not to exceed \$1,879,729 through June 30, 2016.
- B. Approve and authorize the Chair to execute a First Amendment for Services of Independent Contractor with **Mental Health Systems, Inc.** (a local vendor), to add Non-Perinatal Intensive Outpatient Treatment Services, and to increase the contract amount by **\$125,000** for a maximum contract amount not to exceed **\$1,120,481** through June 30, 2016.
- C. Approve and authorize the Chair to execute a First Amendment for Services of Independent Contractor with Sanctuary Psychiatric Centers (a local vendor), to add Non-Perinatal Intensive Outpatient Treatment Services, and to increase the contract amount by \$75,000 for a maximum contract amount not to exceed \$279,790 through June 30, 2016.
- D. Approve Budget Revision Request (BRR#0004196) increasing appropriations of \$250,000 FY 2015-2016 in the ADMHS Department, Alcohol and Drug Programs Fund for Services and Supplies, funded by unanticipated revenue from Drug Medi-Cal.

E. Determine that the above actions are government fiscal activities or funding mechanisms which do not involve any commitment to any specific project which may result in a potentially significant impact on the environment, and are therefore not a project under the California Environmental Quality Act (CEQA) pursuant to section 15378(b)(4) of the CEQA guidelines.

Summary Text:

In July 2015, the County of Santa Barbara Alcohol, Drug and Mental Health Services (ADMHS) Division of Alcohol and Drug Programs (ADP) initiated a Request for Proposal (RFP) for a Pilot Program that offered Non-Perinatal Intensive Outpatient Treatment (IOT) Services. IOT services which were previously only available to those who are pregnant, postpartum, or youth eligible for Early and Periodic Screening, Diagnosis and Treatment, have been expanded in order to conform to requirements of the Affordable Care Act. These services are now authorized for all beneficiaries who meet the requirement for medical necessity. Three Community Based Organizations were selected through the RFP process to provide IOT services: Good Samaritan Shelter Inc., Mental Health Systems, and Sanctuary Psychiatric Centers. Approval of the recommended actions will allow ADMHS to provide additional substance use disorder services.

Background:

ADMHS' IOT is an outpatient treatment model. It encourages timely admission and assessment, the use of motivational interviewing techniques to engage clients, client-centered and strength based treatment planning, psycho/educational group counseling that encourages peer interaction, relapse prevention, random urinalysis to validate client abstinence and to promote accountability, recovery-focused celebratory activities, and after care linkages for support. The primary goal of the program aligns itself with the overall mission of ADMHS and seeks to help clients reduce the harm and eliminate substance use and abuse. The length of the IOT pilot program contracts will be through June 30, 2016 and renewable for additional year-long terms based on performance. The goal is to serve 50 clients in IOT during FY 15-16, for 180 days with a transition to Outpatient Drug-Free Services (ODF) as deemed necessary by the American Society of Addiction Medicine (ASAM) criteria and medical necessity.

Good Samaritan Shelter Services, Inc. (Good Samaritan) provides services in North County including outpatient individual and group counseling, residential detoxification, and drug testing. Good Samaritan provides perinatal treatment services including transitional living centers and individual group counseling for pregnant and parenting women. Good Samaritan is anticipated to serve 10 IOT clients in Lompoc during FY 15-16.

Mental Health Systems, Inc. (MHS) provides treatment services including outpatient individual and group counseling and drug testing in Santa Maria. MHS also provides services to Substance Abuse Treatment Court (SATC) participants and offers peer supported self-help groups to clients who are waiting to enter treatment programs. MHS is anticipated to serve 25 IOT clients in Santa Maria during FY 15-16.

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Sanctuary Psychiatric Centers (Sanctuary) currently operates an adult outpatient treatment program to assist clients with co-occurring substance abuse and mental health issues to obtain and maintain sobriety. Treatment services include best practice outpatient individual and group counseling, and drug testing. Through ADMHS' contract, Sanctuary serves DMC clients as well as Court-ordered adults referred by Santa Barbara Drug Courts. Sanctuary is anticipated to serve 15 IOT clients in Santa Barbara during FY 15-16.

Fiscal and Facilities Impacts:

Budgeted: No Fiscal Analysis:

Funding Sources	<u>Cur</u>	rent FY Cost:	Annualized On-going Cost:	 <u>tal One-Time</u> Project Cost
General Fund				
State	\$	1,640,000.00		
Federal Fees	\$	1,640,000.00		
Other:				
Total	\$	3,280,000.00	\$ -	\$ -

Narrative: The above referenced contracts are funded by State and Federal Funds. A budget revision is necessary to increase appropriations for Alcohol Drug Program Community Based Organizations' services as a result of the Drug Medi-Cal (DMC) Intensive Outpatient Treatment (IOT) Request for Proposal. ADMHS is requesting an increase in Services and Supplies due to \$250,000 additional Drug Medi-Cal services provided by CBOs. These cost increases are funded by \$250,000 in Drug Medi-Cal revenue. There is no impact to the General Fund with the budget revision.

Key Contract Risks:

As with any contract funded by State and Federal sources, there is a risk of future audit disallowances and repayments. The dollars ADMHS collects from the Centers for Medicare and Medicaid Services (CMS) via the State provided to Medi-Cal beneficiaries are subject to a complex and lengthy cost settlement process. ADMHS is required to submit an annual cost report which reports all costs associated with providing mental health services for a given Fiscal Year (actual cost). The actual cost is one component that the State reviews when it performs its "cost settlement" process. In this process, the State settles to the lower of actual cost or Published Charges, which are the fees charged to the general public (as adopted by the contractor's Board of Directors). The cost settlement process results in a preliminary settlement, which typically takes place two years after the close of Fiscal Year; however, the settlement, which typically takes place two years after the close of a Fiscal Year; however, the settlement process is not complete until the State completes the final audit. State audits for Medi-Cal funds for specialty mental health services typically occur five years after the end of the fiscal year being audited. To address these risks and to minimize settlement amounts with contract providers, ADMHS calculates rates for Medi-Cal services provided by organizational providers on a quarterly basis. Regular reports to contractors on unclaimed and denied units allow providers to correct errors and maximize Medi-Cal penetration rates. Even with these measures, there is the risk that the State will disallow units of service or determine costs to be non-allowable, resulting in repayment. ADMHS contracts include language requiring contractors to repay any amounts disallowed in audit findings, minimizing financial risks to County.

IOT Services BL FY 15-16

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Special Instructions:

Please scan one (1) copy of each executed amendment and one (1) minute order to: admhscontractsstaff@co.santa-barbara.ca.us

Attachments:

Attachment A: Good Samaritan Shelter Inc., First Amendment FY 15-16 (Original FY 15-16 Good Samaritan Shelter Agreement available at: <u>https://santabarbara.legistar.com/LegislationDetail.aspx?ID=2322281&GUID=9E708B7E-260F-42D1-81FF-8B0578988DBD&Options=&Search=</u>
Attachment B: Mental Health Systems, First Amendment FY 15-16 (Original FY 15-16 Mental Health Systems Agreement available at: <u>https://santabarbara.legistar.com/LegislationDetail.aspx?ID=2359738&GUID=14B30727-1D7D-46A9-A284-11CBFCECB551&Options=&Search=</u>)
Attachment C: Sanctuary Psychiatric Centers, First Amendment FY 15-16 (Original Sanctuary Psychiatric Centers FY 15-16 Agreement available at: <u>https://santabarbara.legistar.com/LegislationDetail.aspx?ID=2322310&GUID=665D01AB-ACEC-47C8-8FE9-67B4E3A6FEA7&Options=&Search=</u>
Attachment D: Budget Revision Request 0004196

Authored by:

Q.Lopez/D.Morales

TO AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR

This is an amendment (hereafter referred to as the "First Amended Contract") to the Agreement for Services of Independent Contractor, referenced as number <u>BC 16-009</u>, by and between the **County of Santa Barbara** (County) and **Good Samaritan Shelter, Inc.** (Contractor), agrees to provide and County agrees to accept the services specified herein.

Whereas, this First Amended Contract incorporates the terms and conditions set forth in the contract approved by the County Board of Supervisors in June 2015, except as modified by this First Amended Contract;

Whereas, County anticipates that Contractor will provide, at the request of County, a greater number of services than contemplated by the original Agreement, and will incur expenses beyond the value of this Agreement. This amendment adds Alcohol and Drug funds in the amount of **\$50,000** to the prior Agreement maximum of **\$1,829,729** for a new Agreement maximum of **\$1,879,729** so as to compensate Contractor for the additional services to be rendered under this Agreement through June 30, 2016.

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

I. Delete Exhibit A-2 – Statement of Work, Adult Outpatient Drug Free Programs and Replace with the following:

EXHIBIT A-2 STATEMENT OF WORK

Adult Outpatient Drug Free Programs

- PROGRAM SUMMARY. Contractor's Adult Outpatient Drug Free Programs provide outpatient alcohol and other drug (AOD) treatment (hereafter, "the Programs") to assist adult clients to obtain and maintain sobriety. Treatment services will include best practice individual and group counseling and drug testing. The Programs shall be certified to provide Outpatient Alcohol and/or Other Drug (AOD) Services. The Program shall be licensed by the State as a Non-residential Outpatient Program and certified by the State of California Department of Health Care Service (DHCS) for Drug Medi-Cal Intensive Outpatient Treatment Services. The Programs will be located at:
 - A. Recovery Point: 245 Inger Drive, Suite 103B, Santa Maria, California.
 - B. Casa de Familia: 403-B W. Morrison St., Santa Maria, California (upon satisfactory completion of all licensing and certification requirements).
 - C. Lompoc Recovery Center: IOT 104 S. C St, Suite A, Lompoc, California (upon satisfactory completion of all licensing and certification requirements).

2. PROGRAM GOALS.

A. Introduce clients to an ongoing process of recovery designed to achieve total abstinence from abuse of AOD.

- B. Promote client self-sufficiency and empower substance abusers to become productive and responsible members of the community.
- C. Reduce recidivism and increase community safety.
- D. For SATC clients, reduce costs associated with criminal case processing and rearrest.
- 3. SERVICES. Contractor shall provide:
 - A. **Outpatient Drug Free (ODF)** is treatment/recovery or rehabilitation services provided where the client does not reside in a treatment facility. Clients receive drug abuse or alcoholism treatment services with or without medication, including counseling and/or supportive services. This is also known as nonresidential services [Federal Definition].
 - i. **ODF Group** [Service Code 33] Group counseling means face-to-face contacts in which one or more counselors treat two (2) or more clients, up to a total of twelve (12) clients, at the same time, focusing on the needs of the individuals served, in a 30, 60, or 90 minute session.
 - ii. Contractor shall ensure that each client receives a minimum of two group counseling sessions (minimum 90 minutes per group session) per thirty (30) day period depending on the client's needs and treatment plan or be subject to discharge, as specified in 22 CCR Section 51341.1(d). Group counseling sessions shall focus on short-term personal, family, job/school, and other problems and their relationship to substance abuse or a return to substance abuse. Services shall be provided as scheduled. At least one of the clients in the group session must be DMC eligible to claim DMC reimbursement for the group session.
 - iii. ODF Individual [Service Code 34] Individual counseling is face-to-face contact between a client and a therapist or counselor in a 50 minute session. Individual counseling is limited to intake, evaluation, assessment and diagnosis, treatment and discharge planning, collateral services, and crisis intervention, subject to the limitations described in Title 22 CCR Section 51341.1.
 - B. Intensive Outpatient Treatment (IOT) non-perinatal [Service Code 30] IOT services include outpatient counseling and rehabilitation services provided at least three (3) hours per day (180 minutes), three (3) days per week to clients with substance use diagnosis and have severe co-occurring mental health disorders. All IOT clients will be assessed using the Addiction Severity Index (ASI), and shall receive services including:
 - An assessment of each individual's physical condition shall be made within thirty (30) days of admission and documented in the individual's record in one of the following ways;
 - ii. A physical examination by a physician, registered nurse practitioner or physician's assistant according to procedures prescribed by state law to include:

- a. Formulation of, approval of, or involvement in each DMC individual's plan of care within thirty (30) calendar days from the date of initial service; and
- b. Evidence of physician's direction must be documented by the physician's signed and dated approval of treatment plan or signed and dated notation indicating concurrence with the plan of treatment in the individual's clinical record. This must occur:
 - 1. Within fifteen (15) days of the date the plan was developed;
 - 2. Whenever there is a significant change in the treatment plan (i.e., change in mode or modality) of service, problem identification, or focus of treatment); and
 - 3. At least once within every ninety (90) days (prior to the start of a new ninety [90] day period) whichever comes first.
- iii. Extensive group and individual counseling and other appropriate activities and services, to include:
 - a. Nine (9) hours per week of scheduled, formalized services shall be available for each program participant. With a minimum of 7 hours per week to be provided in group or individual counseling and the remaining balance of services can include additional formalized services for example: a work program, treatment techniques, urine surveillance, creative recreational activities, and ancillary services; and
 - All Department of Health Care Services (DHCS) provided to the individual must occur within the regularly scheduled array of activities. As such, only one (1) unit of service may be claimed per day. Exceptions may include emergency and crisis visits and must be documented as such in the individual's record.
 - iv. Services and the service duration will be delivered based on medical necessity and determination of the appropriate level of care will be based on American Society of Addiction Medicine's (ASAM) Criteria founds at: http://www.asam.org/publications/the-asam-criteria;
 - v. All evaluations will be facilitated by Contractor staff experienced in using Motivational Interviewing (MI);
 - vi. Contractor's licensed Counselor shall lead each client through a biopsychosocial interview and an assessment based upon criteria from the Addiction Severity Index (ASI) and ASAM to aid in the development of a treatment plan;
 - vii. If a client is eligible for services, Contractor shall process admittance and engage client in treatment beginning the following day, within 14 business days of intake;

- viii. All treatment curriculum utilized by Contractor shall be evidence-based (as defined by SAMHSA's National Registry of Evidence-based Programs and Practices (NREPP)), successfully replicated with similar populations, open access to incorporate new clients at any time, and with materials also available in Spanish; and
- ix. All groups will be facilitated by a Counselor.
- C. Contractor shall provide ODF, IOT or SATC clients linkage (on-site or by referral) to appropriate specialty and ancillary services, such as mental health services, Medi-Cal enrollment, vocational and educational resources, HIV/AIDS and HCV testing and treatment, primary care services where applicable and appropriate in order to provide an integrated, coordinated and comprehensive treatment experience.
- D. Contractor shall provide drug testing for ODF/IOT/SATC clients as described in the ADMHS Drug Testing Policy and Procedures, and SATC requirements, available at <u>http://cosb.countyofsb.org/admhs/</u>, as applicable:
 - i. Administer random drug screenings per established County practices;
 - ii. Establish procedures which protect against the falsification and/or contamination of any urine samples; and
 - iii. Document urinalysis results in the program participant's file.

E. For Substance Abuse Treatment Court (SATC):

- i. Contractor shall provide SATC Treatment Services to Court-referred adults, for whom substance use disorder services are medically necessary consistent with Title 22 CCR Section 51303 and 51341.1, per SATC guidelines;
- ii. Contractor shall participate in a quarterly graduate activity in collaboration with the Court and other treatment contractors;
- iii. Contractor shall attend Court Staffing meetings in the region of Santa Barbara County served by Contractor; and
- iv. Contractor shall attend SATC Core Team and Policy Council meetings and work with ADMHS to develop recommendations, guidelines, and procedures for adult treatment services.
- 4. CLIENTS. Contractor shall provide services as described in Section 3 (Services) to:
 - A. ODF A minimum of 220 clients aged 18 and over, referred by sources described in Section 5.A (Referrals). Contractor shall admit clients with co-occurring disorders where appropriate; and
 - B. IOT A minimum of ten (10) clients who meet the following American Society of Addiction Medicine (ASAM) Criteria:

- i. IOT Treatment services are limited to clients whose treatment needs cannot be met in less intensive outpatient treatment services as evidenced by the following indicators:
 - a. History of one or more unsuccessful treatment episodes in Outpatient Drug Free (ODF) treatment;
 - b. A diagnosable co-occurring disorder, included in the treatment plan, that requires a more intensive level of service than ODF; and
 - c. Severe substance use disorder as defined by the DSM-5.

5. REFERRALS.

- A. ODF/SATC:
 - i. Contractor shall receive client referrals from Parole, Probation, schools, Courts, CalWORKs staff, other County agencies, other outpatient contractors, and self-referrals to include:
 - a. Contractor shall receive client referrals via phone, written referral, or walk in; and
 - b. Referrals (other than self-referrals) shall be accompanied by written documentation.
 - ii. Contractor shall contact the referral source within 7 days of being informed by the client of his or her being referred for treatment that the client has been scheduled for an intake appointment, pending Contractor's determination that substance use disorder services are medically necessary, consistent with Title 22 CCR Sections 51303 and 51341.1.
- B. IOT:
 - Referrals will be accepted from, but not limited to, County Outpatient Drug Free (ODF) providers, detox centers, the justice system and mental health providers; and
 - ii. Contractor shall contact the referral source within 5 business days of being informed of referral for treatment that the client has been scheduled for an intake appointment, pending Contractor's determination that substance use disorder services are medically necessary, consistent with Title 22 CCR Sections 51303 and 51341.1.

6. ADMISSION PROCESS.

- A. Contractor shall interview client to determine client's appropriateness for the Program.
- B. Admission criteria will be determined by the referral source and/or client's eligibility for payor source.

- C. Contractor shall admit clients referred by sources described in Section 5.A or 5.B (Referrals) unless the client meets one or more conditions specified in Section 7 (Exclusion Criteria), or if space is not available in the Program.
- D. Admission Packet. At Contractor's intake meeting with client, Contractor shall complete an admission packet with the following information:
 - i. Consent to Treatment form, Program rules and guidelines, signed by client;
 - ii. Release of information form, signed by client;
- iii. Financial assessment and contract for fees;
- iv. Personal and demographic information of client, as described in State of California Alcohol and/or Other Drug Program Certification Standards, including:
 - a. Social, economic and family background;
 - b. Education;
 - c. Vocational achievements;
 - d. Criminal history, legal status;
 - e. Medical history;
 - f. Drug history;
 - g. Previous treatment; and
- v. Emergency contact information for client.
- E. Contractor shall notify referral source if client is not accepted into the Program, based on Section 7 (Exclusion Criteria), within one business day of receiving the initial referral.
- F. Should space not be available in the Program, Contractor shall place client on a waiting list, and refer client to interim services.
- 7. EXCLUSION CRITERIA: On a case-by-case basis, the following may be cause for client exclusion from the program:
 - A. Client threat of or actual violence toward staff or other clients;
 - B. Rude or disruptive behavior that cannot be redirected; or
 - C. Client does not meet medical necessity criteria, consistent with Title 22 CCR Section 51303 and 51341.1.

8. DOCUMENTATION REQUIREMENTS.

- A. Contractor shall enter all California Outcomes Measurement System (CalOMS) treatment data and all other client data required by County into the County's MIS system no later than seven (7) days after client entry into Program. Contractor shall complete an annual update of the CalOMS treatment data on the anniversary of client's admission to the Program (for clients in the same treatment service for one year or more), and when the client is discharged from the treatment service.
- B. No later than thirty (30) days after each client's entry into Program, Contractor shall complete the following:
 - i. Addiction Severity Index (ASI). Contractor shall administer and score ASI. Results of the ASI shall be utilized for treatment and discharge planning. For SATC clients, Contractor shall report the results of the ASI and recommendations to the court; and
 - ii. Treatment Plan. The Treatment Plan must include a statement of the problems to be addressed, the goals to be achieved for each problem, the action steps to be taken, and the target dates that these goals are to be achieved. The Plan shall describe the services to be provided (type and frequency of counseling), the diagnosis (DSM IV, DSM 5, or ICD 10 as determined by State and Federal regulations) and the assignment of a primary counselor. The Plan shall be consistent with the results of the client's ASI. Treatment planning must conform to Title 22 CCR Section 51341.1(h)(2). Contractor shall periodically review and update the Treatment Plan every ninety (90) days, or more frequently as determined medically necessary.

9. DISCHARGES.

- A. Contractor shall develop a Discharge Plan for clients prior to discharge, in coordination with the referral source and client, as detailed in the State of California Alcohol and/or Other Drug Program Certification Standards. The Discharge Plan shall include:
 - i. Recommendations for post-discharge, including a comprehensive discharge plan in accordance with 22 CCR Section 51341.1(h)(6) that shall include, but not be limited to, the following: a description of each of the beneficiary's relapse triggers, a plan to assist the beneficiary to avoid relapse when confronted with each trigger, and a support plan;
 - ii. Linkages to other services, where appropriate;
- iii. Reason for discharge; and
- iv. Clinical discharge summary.
- B. Contractor shall give client one copy of the Discharge Plan, and place one copy in the client's file.

- C. Contractor shall document discharge information in CalOMS via the County MIS system no later than thirty (30) days following discharge.
- D. Any client that does not receive any service within a 30 day period shall be discharged, as of the date of last services, per CalOMS guidelines. The date of discharge shall be the last face-to-face contact.
- 10. **STAFFING.** Staff will be bilingual and capable of providing treatment services and assessments in Spanish and English.
 - A. IOT: Contractor shall meet the following minimum staffing requirements for IOT services:
 - Mental Health Practitioner one (1) FTE Master's Level Mental Health professional, responsible for conducting assessments and provide substance abuse and psychotherapeutic counseling; and
 - ii. Co-occurring capable Counselor one (1) FTE responsible for providing substance abuse counseling, case management and lead treatment groups.

II. Delete Section II, <u>Maximum Contract Amount</u>, of <u>Exhibit B ADP</u>, and replace with the following:

II. MAXIMUM CONTRACT AMOUNT.

The Maximum Contract Amount of this Agreement shall not exceed **\$1,879,729**, inclusive of **\$1,507,729** in Alcohol and Drug Program funding, and shall consist of County, State, and/or Federal funds as shown in Exhibit B-1-ADP. Notwithstanding any other provision of this Agreement, in no event shall County pay Contractor more than this Maximum Contract Amount for Contractor's performance hereunder without a properly executed amendment.

III. Delete Section II, <u>Maximum Contract Amount</u>, of <u>Exhibit B MH</u>, and replace with the following:

II. MAXIMUM CONTRACT AMOUNT.

The Maximum Contract Amount shall not exceed **\$1,879,729** inclusive of **\$372,000** in Mental Health funding, and shall consist of County, State, and/or Federal funds as shown in Exhibit B-1-MH. Notwithstanding any other provision of this Agreement, in no event shall County pay Contractor more than this Maximum Contract Amount for Contractor's performance hereunder without a properly executed amendment.

IV. Delete <u>Exhibit B-1 ADP</u>, Schedule of <u>Rates and Contract Maximum</u> and replace with the following:

EXHIBIT B-1 ADP SCHEDULE OF RATES AND CONTRACT MAXIMUM Fiscal Year: 2015-16 Good Samaritan Shelter, Inc. **Contractor Name:** AoD DMC Drug Medi-Cost County Cal /Non Service Report Maximum Service Allowable Drug Medi-Function Cal Unit of Service Code Code Rate Service Type Mode Service Description Intensive Outpatient Treatment (IOT) nonperinatal (Group - 180 minutes) 30 \$58.30 **Day Services** 10 Session 30 Intensive Outpatient Treatment (IOT) - Perinatal Session 30 30 \$81.22 Drug Medi-**ODF Individual Counseling** 80 34 \$66.93 Cal Billable Session Services 33 \$27.14 **ODF Group Counseling** Session 85 Outpatient 15 ODF Individual Counseling - Perinatal 80 34 \$105.32 Session Session ODF Group Counseling - Perinatal 85 33 \$63.33 Actual Cost CaWORKs **N/A** Interim Treatment Services CalWORKs Hours NΛ 35 N∕A 50 Actual Cost Bed Day Free-Standing Residential Detoxification Non -Transitional Living Center (Perinatal/Parolee Bed Day N/Α 56 Actual Cost N/A Residential Drug Medi-Only) Cal Billable Alcohol/Drug Free Housing (Perinatal/Parolee Actual Cost Services Bed Day **N/A** 57 Only) Perinatal Outreach Hours ΝA 22 Actual Cost Ancillary Actual Cost N/A Case Management (excluding SACPA clients) Hours N/A 68 Services Actual Cost Transportation (Perinatal/Parolee Only) Hours NA 71

FIRST AMENDMENT 2015-2016

Good Samaritan Sheter FY 15-16	De	eəldential fox (Santa Marta)		esidential Detox compoc)		overy Point mite Meria)		ROSC		ject PREME anta Meria)	PN	uming Point I Outpatient (Lempicc)	Livit	unsitional g Centere rda Maria)	Livi	ansilional ng Certers Lompoo)	(licohol and Drug Free Housing ianta Manu)	Tr Dr (Lor	Family estiment ug Court mpoc and ta Marte)	R	ampoc lecovery Center	TR	CASA DE FAMILIA EATWENT CENTER	Tre Se	/ETS salment ervices (a Moria)		OTAL
GROSS COST:	5	267,720	5	216,055	5	468,006	\$	14,700	\$	345,988	\$	396,495	5	249,604	15	263,253	\$	585,681	\$	49,000	\$	108,757	5	88,848	5	16.495		\$3,048,792
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PATIENT FEES	5	30,000	\$	25,000	11	15.000			1	41	\$		\$	25,000	\$	20,000	\$	2 R.	1		\$	3,000	\$	3,000	_			\$121,000
CONTRIBUTIONS	1		5	30,755		25,968	-		5	8,088	\$	4,615	\$	29,244	5	28,253	5	35,866	1		\$	65,767	15	45,848				\$280,604
OTHER (UST): Other Government	\$	64,000	\$	13,000	5	259,228			\$	97,000	\$	47,000	\$	90,000	5	105,000	\$	422,231			\$	15,000	3	15,000	_			\$1,187,455
TOTAL CONTRACTOR REVENJES	15	94,000	\$	71,755	s	300,199			\$	105,088	5	51,816	5	144,244	\$	153,253	5	521,097	\$		s	83,767	5	63,848	5			\$1,589,063
MAXIMUM CONTRACT AMOUNT:	11	158,720	\$	144,300	\$	1\$7,810	1	\$4,700	1	241,500	1	344,650	\$	105,540	\$	110,000	\$	44,554	1	49,000	\$	26,000	\$	28,000	1	16,435	1	1,467,719
								SOURCE	50	F FUNDING P	FOR	MAXIMUM CO	ONT	ACT AND	UNT										_		_	
Drug Medi-Col					15	116,700			\$	235,900	\$	301,100			1		1		0.00	102	5	75,000	5	25,000		1155-0	\$	754,700
Realignment/SAPT - Discretionary	15	158,080	\$	107,303	\$	51,110	8	14,700			\$	4,000							-	- 144	ųź.	1			_		\$	335,190
Realignment/SAPT - Perinatal	-		\$	20,000	-		1		5	5,000	\$	39,580	\$	59,320	\$	100,000									Ξ.		\$	223,900
SAVesSA Federal Grant - CAM			3	15,000			-				-				1				\$	49,000							\$	64,000
SAVAISA Federal Grant - VETS	\$	10,640	-				-				-		\$	14,240			\$	18,564	1	1616123				_	\$	16,495	\$	59,939
CalWORKS	1		\$	2,000	-		-				-	7 7	\$	32,000	\$	10,000	\$	26,000	1			-					\$	70,000
Other County Funds	1							in and		11.0				- Autor				1977 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 -	_		_		L		_		\$	
TOTAL (SOURCES OF FUNDING)	15	168,720	5	144,300	5	167,810	5	14,700	5	241,900	5	344,680	5	105,560	5	110.000	15	44,584		49.000	\$	75,000	15	26,000	\$	18,495	\$	1.607,729

CONTRACTOR SIGNATURE:

STAFF ANALYST SIGNATURE: FISCAL SERVICES SIGNATURE:

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*The 15% Administrative Fee is deducted from the Drug Medi-Cal Gross Claim Maximum, Maximum (Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Maximum (Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Maximum, Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Maximum, Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Maximum, Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Maximum, Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Maximum, Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Net) Contract Amount Is Less Administrative Fee of 15% (Drug Medi-Cal Gross Claim Maximum, Net) Contract Amount Is Less Administrative Fee of 15%

** Funding sources are estimated at the time of contract execution and may be reallocated at ADMHS' discretion based on available funding sources.

Good Sam FY 15-16 BC AM 1

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			- meter	SCHEE	DUL	E OF F		AND CO	NTRAC	T MAX	IMUM	1999 - 1997 Same Tenn		5.5 5 50 - 8		
Contracto	r Name:		niens)	Good S	am	aritan S	Shelter,	Inc.	****	-		Fiscal Y	'ear(2	2015-16	()	iene) Maria
Drug Medi- Cal /Non Drug Medi- Cal	Service T	уре	Mode	Service	Des	cription				Unit of §	Service	DMC Servio Functi Code	ce on	AoD Cost Report Service Code	Cou Maxir Allow Ra	num able
	-	. [•		(IOT) non	-							
	Day Serv	ices	10	perinatal	÷					Session		30		30	\$58.	
Drug Medi-		-						(IOT) - Pe	erinatai	Session		30		30	\$81.	
Cal Billable Services				ODF Indi	_		-			Session		80	-	34	\$66.	_
001 11003	Outpatie	ent	15	ODF Gro	-		ig seling - Pe	ringtal		Session		85	+	33	\$27.	
				-	_		ng - Perin			Session Session		80 85	-	34 33	\$105 \$63.	
	CalWOR	Ks	NA	Interim T	-		-			Hours		N/A		 35	Actual	
				Free-Sta	ndin	g Reside	ential Deto	xification		Bed Day		N/A		50	Actual	Cost
Non - Drug Medi-	Residen	tial	N∕A	Transitio Only)	nal L	iving Ce	nter (Peri	inatal/Paro	blee	Bed Day		N∕A		56	Actual	Cost
Cal Billable Services				Alcohol/[Only)	Drug	Free Ho	using (Pe	erinatal/Pa	arolee	Bed Day		N/A		57	Actual	Cos
Í	A			Perinatal	Out	reach				Hours		N∕A		22	Actual	Cost
	Ancilla Service	· .	N∕A	Case Ma	nag	ement (e	xcluding S	SACPA c	ients)	Hours		N/A		68	Actual	Cost
	Jervice			Transpor	tatio	n (Perina	atal/Parok	ee Only)		Hours		N/A		71	Actual	Cos
Good Samarilan S	beler FY 15-16	Residenti Delox (Sar Maria)		lental lox Recovery loco) (Santa N		ROSC	Project PREME (Santa Maria)	Turning Point PN Outpabent	Trensitional Living Centers (Santa Meria)	Transitional Living Centers (Lompoc)	Alcohol and Drug Free Housing	Family Treatment Drug Court (Lompoc and Santa Maria)	Lompoo Recover Center		VETS Treatment Services	TOT
ROSS COST: ESS REVENUES COLI		\$ 252	720 \$ 2 depicted in 0	16,655 \$ 46	8,006	\$ 14,700		\$ 395,495	\$ 248,804		\$ 565,661	\$ 49,000	\$ 108,7			\$3
ATENT FEES		\$ 30,	000 <u>s</u>	25,000 \$ 1 33,755 \$ 2	5,000 5,968	_			\$ 25,000 \$ 29,244	\$ 28,253	S . S 38,860		\$ 3,0 \$ 66,7	67 5 45,848		
OTHER (LIST): OTHER (LIST): OTHER (REVENUES	\$ 94	000 S 000 S	13,000 \$ 25 71,755 \$ 30	9,228 0,198		\$ 97,000 \$ 105,088	\$ 47,000 \$ 51,815	\$ 90,000 \$ 144,244	\$ 105,000 \$ 163,253	\$ 482.231 \$ 521,007	1 .	\$ 15,0 \$ 83,7	00 \$ 15,000 67 \$ 63,848	5 -	\$1 \$1
AXIMUM CONTRACT	ANOUNT:	\$ 158,	720 5		7,810			FOR MAXMUNIC			1 44,584	\$ 49,000	\$ 25,0	00 \$ 25,000		1 1/
Irog Medi-Cal Realignment/SAPT • Dis Realignment/SAPT • Per		\$ 158.0			,700	\$ 14,700	\$ 236,900 \$ 5,000	\$ 301.100 \$ 4,000 \$ 39,580	e 60.200	\$ 100,000	-		\$ 75,00	0 \$ 25,000		\$ \$ \$
AMHSA Federal Grant - AMHSA Federal Grant -	CAM	\$ 10.6	\$ 1	5.000	_		3 0,00	0 00,000	\$ 14.240	1110000	S 18,564	\$ 49,000			\$ 16,495	\$
CalWORKS Diher County Funds				2,000					\$ 32,000		\$ 25,000			-	- to it.	5
OTAL (SOURCES OF	FUNDING)	\$ 168	720 \$	44,300 \$ 10	7,510	\$ 14,700	\$ 241,900	\$ 344,680	\$ 405,560	\$ 110,000	\$ 44,564	\$ 49.000	\$ 75.0	00 \$ 25,000	\$ 16,495	S 1,

FISCAL SERVICES SIGNATURE:

*The 15% Administrative Fee is deducted from the Drug Medi-Cal Gross Claim Maximum. Maximum (Net) Contract Amount is Less Administrative Fee of 15% (Drug Medi-Cal Only).

** Funding sources are estimated at the time of contract execution and may be reallocated at ADMHS' discretion based on available funding sources.

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V. Delete Exhibit B-2, Contractor Budget, and replace with the following:

				Entity Budget By Program	By Program										
AGENCY NAME	GOOD SAMARITAN SHEI TER	α				1	T				THE REPORT OF				
YEAR	10.65	and the second		the start of		Ĩ	1					1	l		
COULANNA 1	0	E	-	s	9	7	80	a,	ę	5	ŭ		2	5	9
REVENUE SOURCES:	TOTAL AGENCY/ OKGANIZATION BUDGET	COUNTY ADMINS PROGRAMIS TOTALS	ADP CREIS SPECALIST	LOMPOC UTX	TURNING PONT	LOWPOCTLC	RECOVERY POINT	SANTA MARIA DIX	Emergency Shelter Senta Maria	PROJECT PREMIE	SIFTIC	HOMELESS CLINCIAN	CASA DE FAMILIA TREATMENT CENTER	LOMPOC RECOVERY CENTER	FAMLY FREATMENT DRUG COURT
Special Events		では、同時の													
Legacies/Bequests															
Associated Organizations		The state of the second													
Membership Dues		の時間であった。													
Reserves/Private Donations/others	\$ 580,257	\$ 311.205	\$ 5,490	\$ 33,755	\$ 4,815	\$ 28,253	\$ 25,968		\$ 38,966	\$ 8,068	\$ 29,244	\$ 25,111	\$ 45,848	\$ 65,767	
10 ADMHS Funding	\$ 1,879,729	\$ 1,878,728	\$ 131,000	\$ 144,300	\$ 344,680	\$ 110,000	\$ 199,005	\$ 168,720	\$ 85,564	\$ 241,900	\$ 105,560	\$ 200,000	\$ 25,000	\$ 75,000	\$ 49,000
11 Other Government Funding	\$ 674,859	674,859 \$							\$ 287,031						
72 CWS	\$ 300,000	\$ 250,000		\$ 4,000	\$ 22,000	\$ 55,000	\$ 72,000	\$ 5,000		\$ 22,000	\$ 40,000		\$ 15,000	\$ 15,000	
13 HUMAN SERVICES/HCD	\$ 354,691	\$													
# FRESH START GRANT	\$ 200,000	\$ 200.000			\$ 25,000	\$ 50,000				\$ 75,000	\$ 50,000				
16 PROBATION	\$ 279,628	\$ 229,428		\$ 9,000			\$ 187,228	\$ 9,000	\$ 24,200						
17 VETERANS Administration	\$ 546,000	546,000 \$ 180,000				1.2000		\$ 50,000	\$ 130,000						
Total Other Revenue (Sum of lines 1 through 17)	s watched	\$ 320/200 \$	136,490	950'181 - \$	\$ 396,496	3. 243,255	102,163- 2	\$ 222.720	100'005 \$	\$ 346,868	NORMOZ S	8 225.111	5 B5.848	192'991	18,000
1.B Client and Third Party Revenues:															
19 Medicare		のための理													
20 Client Fees	\$ 315,000	121,000		\$ 25,000		\$ 20,000	\$ 15,000	\$ 30,000			\$ 25,000	1 ¹ 2	\$ 3,000	\$ 3,000	
21 Insurance		计 元的基													
22 [SSI		での													
23 Other (specify)		Property of													
Total Client and Third Party Revenues (Sum of lines 19 through 23)	315,000	121,000	に影響	000'92	は読む	20,000	15,000	30,000	いなない	A STATE	26,000	のないという	3000	3,000	- SELAN
GROSS PROGRAM REVENUE BUDGET	£ 130.164	006-0674 E	136,460	216,005	396,495	NZ NZ	102,004	262.720	500,001	340,068	249 804	111922	Contraction of the pice	1400 1400	0000

Good Sam FY 15-16 BC AM 1

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III. DIRECT COSTS	ORGANIZATION BUDGET	PROCRAMS PROCRAMS TOTALS	ADP CRISIS SPECIALIST	LOMPOC DTX	TURNING POINT		LOMPOC TLC	RECOVERY PONT	NT SANTA MARIA DTX		Emergency Shetter. Santa Maria	PROJECT PREMIE	EMIE	SN-TLC	HOMELESS CLANCIAN PROGRAM	CASA DE FAMILIA TREATMENT CENTER		LOMPOC RECOVERY CENTER	FAMILY IREATMENT DRUG COURT
III.A. Salaries and Benefits Object Level														1				1	
26 Salaries (Complete Staffing Schedule)	2,403,882	\$ 1,798,353	\$ 94,950	\$ 119,099	44	211,108	\$ 98,038	8 \$ 312,470	5	140,968 \$	244,515	5	170,103 \$	53,485	\$ 156,599	\$	43,407 \$	80,527	\$ 34,087
27 Employee Benefits	300,485	\$ 224,919	\$ 11,869	\$ 14,887	5	26,389	\$ 12,255	5 \$ 39,059		17,621 \$	30,564	\$ 21	21,263 \$	11,686	\$ 19,575		5,426 \$	10,066	\$ 4,261
28 Consultants		で言語でも											-				-		
28 Payroll Taxes	300,485	\$ 224,919	\$ 11,869	\$ 14,887	•	26,389	\$ 12,255	5 \$ 39,059	5	17,621 \$	30,564	\$ 21	263 \$	11,686	\$ 19,575	5	5,426 \$	10,066	\$ 4,261
Salaries and Benefits Subtotal	\$ 3,004,853	\$ 2,249,192	118,667	148,814		363,885	122,547	990 \$	500 \$ 176	176,207 \$	305,644	\$ 212	212,6220 \$	116,856	\$ 185,749		\$ 95219	100,656	1. 2,608
III: B Services and Supplies Object Level																		1	
31 Professional Fees	14,000	1,500			•	2,000			\$	1,000 \$	500	\$	2,000 \$	2,000		\$ 2	2,000 \$	2,000	
22 Supplies	277,002	\$ 157,000		\$ 8,000	5	27,000 \$	8,000	0 \$ 28,000	5	12,500 \$	18,500	\$ 27	27,000 \$	14,000		5	\$ 000'2	2,000	
33 Tetephone		1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.								-			-						
34 Postage & Shipping						-				-									
36 Occupancy (Facility Lease/Ren/Costs)	382,015	S. 171,200		\$ 6,000	5	12,000	\$ 42,000	0	5 \$	\$	45,000	60 97	\$ 000'6	33,000	0.0		5	14,400	
36 Rentai/Maintenance Equipment		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1								-			_						
37 Printing/Publications		- State State								-									
36 Transportation	110,720	\$ 77,500		\$ 8,000	*	6,500	\$ 13,000	0	00 ⁻	\$ 000	20,000	00 54	8,000,8	13,000					
36 Conferences, Meetings, Etc	21,500	\$ 21,500		\$ 2,000	•	2,500 \$	\$ 2,500	0 \$ 2,500	~	2,500 \$	2,500	5	2,500 \$	2,500		4	1,000 \$	1,000	
40 Insurance	91,000	\$ 57,000		\$ 3,000	•	5,000 \$	5,000	0 \$ 5,000	3 5	\$ 000	12,000	\$	9,000,8	5,000		ي م ا	5,000 \$	5,000	
41 Utilities	184,800	\$ 97,000		\$ 5,000	s	10,500 \$	\$ 10,500	0 \$ 5,000	80 80	\$ 000	Z7,000		10,500 \$	10,500		ي ج	5,000 \$	5,000	
Contracted Services	40,400	40,400			s	10,100 \$	\$ 10,100	0		-		\$	10,100 \$	10,100					
A Rapid Retrousing Payments	194,213	\$ 40,000								5	40,000								
44 Repairs and Maintenance	139,327	\$ 84,822		\$ 7,000	*	5,290	\$ 15,269	9 \$ 3,000	\$ 7	,259 \$	20,735	\$	10,000 \$	10,265		\$ 3	3,000 \$	3,000	
6 Services and Supplies Subtotal	\$ 1,455,007	\$ 758,108		\$ 39,000		B0,850 %	106,309	9 s \$3,500		\$ 57575	186,235	8 8	88,100 \$	100,365	の話	8 S	23,000 \$	27,400	1.44
46 III.C. Client Expense Object Level Total		\$												į.					
47 SUBTOTAL DIRECT COSTS	\$ 4,456,860	\$ 3,007,500	118,687	4 187,874		346,776	\$ \ 228,916	6 3 434,066	\$	\$ 259/922	618,161	\$ 301,729	\$ 671	122/112	\$ 195.749	30 - S	T/259 \$	138,058	\$ 42,609
IV. INDIRECT COSTS																			
Administrative Indirect Costs (Reimbursement Immied to 15%)	670,304	\$ 451,085	\$ 17,803	\$ 28,181	~	51,717	\$ 34,337	7 \$ 65,113		34,268 \$	73,782	-	45,259 \$	32,583	\$ 29,362	5	11,589 \$	20,709	\$ 6,391
CROSS DIRECT AND INDIRECT COSTS	ないに、いたのでなっていたとうためたちのとうと	このないたいでいたの	「「ない」での言語	大学をないたい	に加	語の言語を	Alteroid Me	なたわい	いいろいろとないいた	ALC: NO.	Saltan harris	San Antipation Pro-	わけるのないである	ではないのかいろうと	Charles and a	A DEPARTMENT	A STATE OF A	Sector Sector	The state of the state of the

Good Sam FY 15-16 BC AM 1

Amendment Page 11 of 12

SIGNATURE PAGE

Amendment to Agreement for Services of Independent Contractor between the County of Santa Barbara and Good Samaritan Shelter, Inc..

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

COUNTY OF SANTA BARBARA

Bv: JANET

BOARD OF SUPERVISORS

Date: CONTRACTOR: GOOD SAMARITAN SHELTER, INC.

ATTEST: MONA MIYASATO, COUNTY EXECUTIVE OFFICER CLERK OF THE BOARD

Bv

Deputy

Date: 12-9-15

APPROVED AS TO FORM: MICHAEL C. GHIZZONI COUNTY COUNSEL

Bv Deput unty Cour sel

RECOMMENDED FOR APPROVAL:

ALICE A. GLEGHORN, PHD DIRECTOR, ALCOHOL, DRUG, AND MENTAL **HEALTH SERVICES**

By

Díréctor

Date:

APPROVED AS TO ACCOUNTING FORM: ROBERT W. GEIS, CPA AUDITOR-CONTROLLER.

Bν Deputy

By:

APPROVED AS TO INSURANCE FORM: RAY AROMATORIO RISK MANAGER

Marianne to By:

Manager

Amendment Page 12 of 12

SIGNATURE PAGE

Amendment to Agreement for Services of Independent Contractor between the County of Santa Barbara and Good Samaritan Shelter, Inc..

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

COUNTY OF SANTA BARBARA

By:

JANET WOLF, CHAIR BOARD OF SUPERVISORS

Date: _____ CONTRACTOR: GOOD SAMARITAN SHELTER, INC.

By: Deputy

MONA MIYASATO, COUNTY EXECUTIVE OFFICER

Date:

CLERK OF THE BOARD

ATTEST:

By

APPROVED AS TO FORM: MICHAEL C. GHIZZONI COUNTY COUNSEL

Deputy County Counsel

 \sim Date: 11/23/2015

APPROVED AS TO ACCOUNTING FORM: ROBERT W. GEIS, CPA AUDITOR-CONTROLLER

By____ Deputy

RECOMMENDED FOR APPROVAL:

ALICE A. GLEGHORN, PHD DIRECTOR, ALCOHOL, DRUG, AND MENTAL HEALTH SERVICES APPROVED AS TO INSURANCE FORM: RAY AROMATORIO RISK MANAGER

By_____ Director By: _____ Manager