

FIRST AMENDMENT 2018 - 2021

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 **BC 19-152**, by and between the **County of Santa Barbara** (County) and **Good Samaritan Shelter** (Contractor), wherein Contractor agrees to provide and County agrees to accept the 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, this First Amended Contract updates contract language, replacing Transitional Living Centers with a new statement of work for Recovery Residences Program for the provision of Alcohol and Drug Substance Abuse Treatment and Prevention board and care services as well as funding additional Residential Treatment service sites from December 1, 2018 and June 30, 2021;

Whereas, this First Amended Contract increases the contract by \$4,513,361 over the three-year term of the agreement, with an overall total maximum amount for the contract not to exceed \$12,327,643 for FY 18-21; and

Whereas, this First Amended Contract incorporates the terms and conditions set forth in the original Agreement approved by the County Board of Supervisors in November 2018, except as modified in this First Amended Contract.

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

I. In Exhibit A-3 Statement of Work: ADP, Residential Treatment Services, delete Section 1. Program Summary and replace with the following:

I. PROGRAM SUMMARY.

The Contractor shall provide residential alcohol and other drug (AOD) treatment (hereafter, “the Program”) to assist both non-perinatal and perinatal adult (age 18 and older) clients with a substance use disorder diagnosis to obtain and maintain sobriety. Treatment services will include best practice individual and group counseling, and drug testing. The Program shall be licensed by the Department of Health Care Services (DHCS) for residential treatment and Drug Medi-Cal (DMC) certified to provide Residential Treatment Services with an ASAM designation of Level 3.1 and Withdrawal Management 3.2. The Program will be located at:

- A. 113 S. M Street, Lompoc, California (Another Road Detox) – Non-perinatal Adults**
- B. 401 “B” West Morrison, Santa Maria, California (Recovery Point Acute Care) – Non-perinatal and perinatal Adults through January 31, 2019 and Perinatal Adults only beginning February 1, 2019.**
- C. Recovery Way is a 16 bed facility located at - 608 West Ocean Avenue, Lompoc, California – Perinatal Adults beginning February 1, 2019.**

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D. TC House is a 20 bed facility located at - 412 E. Tunnel Street, Santa Maria, California – Perinatal Adults beginning February 1, 2019.

II. In Exhibit A-3 Statement of Work: ADP, Residential Treatment Services, Section 3. Services, L. Additional Contractor – Specific Services, add the following:

2. Contractor shall provide transitional Residence Recovery services on a short term basis (no more than 30 days), with prior ADP staff approval, only to clients enrolled in the Recovery Residences program prior to February 1, 2019, who do not meet medical necessity.

III. Delete Exhibit A-5 Statement of Work: ADP Transitional Living Centers in its entirety and replace with the following:

**EXHIBIT A-5
STATEMENT OF WORK: ADP
RECOVERY RESIDENCES PROGRAM**

1. **PROGRAM SUMMARY:** Contractor provides supervised Recovery Residences services (hereafter “the Program) to adult clients with alcohol and other drug problems. The Recovery Residences provides housing services to perinatal and parenting clients only and will be utilized in combination with Outpatient Services (OS) and Intensive Outpatient Services (IOS) services, not provided by the Program, to help clients maintain sobriety by providing a safe, sober living environment. Recovery Residences are not treatment programs and shall not provide treatment services of any kind to its residents. However, mutual/self-help group meetings may be offered on site. The Program will be offered at the following sites:
 - A. Recovery Way is a 16 bed facility located at - 608 West Ocean Avenue, Lompoc, California; and
 - B. TC House is a 20 bed facility located at - 412 E. Tunnel Street, Santa Maria, California.
2. **PROGRAM GOALS.**
 - A. Introduce participants to an ongoing process of recovery;
 - B. Promote self-sufficiency and empower substance abusers to become productive and responsible members of the community;
 - C. Reduce recidivism and increase community safety;
 - D. Assist persons in transition from Alcohol or other Drug (AOD) detoxification or other ADP-funded treatment services into recovery residential housing.
3. **SERVICES.** Contractor shall provide the following services from December 1, 2018 through January 31, 2019:
 - A. Provide Recovery Residences which are designed to help clients maintain an alcohol and drug free lifestyle and transition back into the community. Contractor shall supervise Recovery Residences activities and maintain an alcohol and drug-free environment.
 - B. Provide Residential Recovery housing in support of clients receiving outpatient drug free treatment from County contracted treatment providers.

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- C. Require clients to attend recovery and treatment services with an ADP-funded treatment program.
 - D. Provide case management to clients while in residence.
 - E. Provide drug testing as described in the Behavioral Wellness Drug Testing Policy and Procedures available at: <http://countyofsb.org/behavioral-wellness>.
4. **BEDS.** Contractor shall provide services as described in Section 3 to 30 clients annually, referred by sources specified in Section 6.A (Referrals).
- A. Contractor shall provide seven Recovery Residences beds for Behavioral Wellness clients at Recovery Way and Hope House in Lompoc; and
 - B. Contractor shall provide ten (10) Recovery Residences beds at TC House in Santa Maria.
5. **LENGTH OF STAY.** Contractor shall provide a maximum of six (6) months of residential services. Any length of stay over this maximum length of stay will be considered on an individual case-by-case basis, must be clinically indicated and pre-approved by Behavioral Wellness in writing.
6. **REFERRALS.**
- A. Contractor shall receive referrals from Parole, Probation, Courts, CalWORKs staff, other County agencies, other outpatient contractors, and self-referrals.
 - i. Contractor shall receive referrals via phone, written referral, or walk in.
 - ii. Referrals (other than self-referrals) shall be accompanied by written documentation.
 - B. If mandated by the court, client will contact Contractor within twenty-four (24) hours of referral (except weekends or holidays). Contractor shall contact the referral source within seventy-two (72) hours with a verification of enrollment.
7. **ADMISSION PROCESS.**
- A. Contractor shall interview client to determine client's appropriateness for the Program.
 - B. Admission criteria will be determined by referral source and/or eligibility for funding stream.
 - C. Contractor shall admit clients referred by sources described in Section 6.A unless the client meets one or more conditions specified in Section 9 (Exclusion Criteria), or if space is not available in the Program.
 - D. During Contractor's intake meeting with client, Contractor shall complete an admission packet with the following information:
 - i. Program rules and guidelines, signed by client;
 - ii. Release of information form, signed by client;
 - iii. Financial assessment and contract for fees; and
 - iv. Emergency contact information for client.
 - E. Contractor shall notify referral source if client is not accepted into the Recovery Residences, based on Section 9 (Exclusion Criteria), within one business day of receiving the initial referral.
 - F. Contractor shall complete and send a Verification of Enrollment form to the referral source upon acceptance of client into Program, no later than 72 hours after admission.

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- G.** Should space not be available in the Program, Contractor shall place client on a waiting list, and refer client to interim services.
8. **DOCUMENTATION REQUIREMENTS.** Contractor shall maintain documentation and collect data to include but not limited to demographics, beds occupancy and client progress as required by funding sources.
9. **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.
10. **DISCHARGE.** Clients shall be discharged during normal business hours to a pre-arranged location, based on the recommendations of the program providing outpatient treatment services to client.

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IV. Delete Attachment E, Program Goals, Outcome and Measures in its entirety and replace with the following:

EXHIBIT A

ATTACHMENT E

PROGRAM GOALS, OUTCOMES AND MEASURES

Adult/TAY/Perinatal Outpatient Services and Intensive Outpatient Services

Program Goals		Outcomes	Measure s Outpatie nt L1	Measures Intensive Outpatient L2.1
Successful SUD treatment and recovery	1	Adults <u>initiated</u> treatment	80%	80%
	2	Adults immediately <u>dropped out of</u> treatment	<6%	<6%
	3	Adults <u>engaged</u> in treatment	75%	60%
	4	Adults <u>retained</u> in treatment	45%	30%
	5	Adults successfully <u>completed</u> treatment	50%	35%

Behavioral Wellness expects treatment providers to offer clients who have completed treatment Recovery Services (aftercare), when medically necessary. The goal is that 75% of Recovery Services clients will successfully complete their Recovery Services treatment plan.

Recovery Residences Program

Program Goal		Outcome	Measure
Reduce detoxification readmission rates.	1	Clients will complete 30 days in Recovery Residences	75% =>30 days in RR
	2	Clients will be enrolled in detoxification and/or ODF treatment services	100% in Detox or Tx
	3	Clients will be engaged in one or more of the following: vocational, literacy or educational services, activities of daily living, on-site 12 Step attendance or another ancillary treatment activity	100% meaningfully engaged

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Residential Treatment – Non-perinatal

Program Goals		Outcomes	Measures
Successful SUD treatment and recovery	1	Clients <u>initiated</u> treatment	80%
	2	Clients immediately <u>dropped out</u> of treatment	<2%
	3	Clients <u>engaged</u> in treatment	60%
	4	Clients primary drug <u>abstinence</u> at discharge	80%
	5	Clients <u>transferred</u> to treatment/lower level of care within 14 days	15%

Behavioral Wellness expects treatment providers to offer clients who have completed treatment Recovery Services (aftercare), when medically necessary. The goal is that 75% of Recovery Services clients will successfully complete their Recovery Services treatment plan.

Residential Treatment – Perinatal

Program Goals		Outcomes	Measures
Successful SUD treatment and recovery	1	Clients <u>abstinence</u> at discharge/drug free births	100%
	2	Clients successfully <u>completed</u> treatment	70%

Behavioral Wellness expects treatment providers to offer clients who have completed treatment Recovery Services (aftercare), when medically necessary. The goal is that 75% of Recovery Services clients will successfully complete their Recovery Services treatment plan.

Withdrawal Management

Program Goals		Outcomes	Measures
Successful SUD treatment and recovery	1	Clients immediately <u>dropped out</u> of treatment	<4%
	2	Clients successfully <u>completed</u> * treatment	50%
	3	Clients primary drug <u>abstinence</u> at discharge	100%
	4	Clients <u>transferred</u> to treatment/lower level of care within 14 days of discharge	30%
	5	Clients <u>re-admission</u> within 14 days	95%
	6	Clients <u>re-admission</u> within 30 days	75%

*Detoxification does not constitute complete treatment. A successful detoxification service is measured in part by the engagement of the client in further treatment. Providers are expected to make every effort to refer and connect clients to another level of treatment once they have completed detoxification. For clients who have gone through detoxification, as planned by the provider, and who are being referred for additional treatment services, providers must use discharge code 3 – Left Before Completion with Satisfactory Progress – Referred. Neither discharge code 1 nor discharge code 2 can be used for detoxification discharges.

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Behavioral Wellness expects treatment providers to offer clients who have completed treatment Recovery Services (aftercare), when medically necessary. The goal is that 75% of Recovery Services clients will successfully complete their Recovery Services treatment plan.

- V. In Exhibit B Financial Provisions – ADP, delete Section II. Maximum Contract Amount and replace with the following:**

II. MAXIMUM CONTRACT AMOUNT.

The Maximum Contract Amount of this Agreement shall not exceed **\$12,327,643 inclusive of \$2,582,003 for FY 18-19, \$4,872,820 for FY 19-20 and \$4,872,820 for FY 20-21** 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.

- VI. Delete Exhibit B-1- ADP in its entirety and replace with the following:**

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Exhibit B-1
Schedule of Rates and Contract Maximum

CONTRACTOR NAME:			Good Samaritan								FISCAL YEAR:		2018-19		
Drug Medi-Cal /Non Drug Medi-Cal			Service Type	Mode	Service Description				Unit of Service		DMC Service Function Code	AoD Cost Report Service Code	Projected Units of Service	Projected Number of Clients	
Drug Medi-Cal Billable Services			Outpatient		15	ODS Outpatient Treatment				15 Minute Unit		91	91	20,418	547
					15	ODS Case Management				15 Minute Unit		93	93	8,585	174
					15	ODS Physician Consultation				15 Minute Unit		94	94	458	9
					15	ODS Recovery Services				15 Minute Unit		95	95	6,383	130
					10	ODS Intensive Outpatient Treatment (IOT)				15 Minute Unit		105	105	4,531	97
			Residential		5	Level 3.2 Withdrawal Management				Bed Day		109	109	1,150	88
					5	Level 3.1 Residential Treatment				Bed Day		112	112	7,227	88
Drug Medi-Cal /Non Drug Medi-Cal			Service Type	Mode	Service Description				Unit of Service		DMC Service Function Code	AoD Cost Report Service Code	County Maximum Allowable		
Drug Medi-Cal Billable Services			Outpatient		15	ODS Group Counseling				15 Minute Unit		91	91	\$33.81	
					15	ODS Individual Counseling				15 Minute Unit		92	92	\$33.81	
					15	ODS Case Management				15 Minute Unit		93	93	\$33.81	
					15	ODS Physician Consultation				15 Minute Unit		94	94	\$141.59	
					15	ODS Recovery Services Individual				15 Minute Unit		95	95	\$33.81	
					15	ODS Recovery Services Group				15 Minute Unit		96	96	\$33.81	
					15	ODS Recovery Services Case Management				15 Minute Unit		97	97	\$33.81	
					15	ODS Recovery Services Monitoring				15 Minute Unit		98	98	\$33.81	
					10	ODS Intensive Outpatient Treatment (IOT)				15 Minute Unit		105	105	\$31.02	
			Residential		5	Level 3.2 Withdrawal Management - Treatment Only				Bed Day		109	109	\$184.84	
5	Level 3.1 Residential Treatment - Treatment Only				Bed Day		112	112	\$122.97						
Non - Drug Medi-Cal Billable Services					Residential		N/A	Level 3.2 Withdrawal Management - Board and Care				Bed Day		N/A	109
			N/A	Level 3.1 Residential Treatment - Board and Care				Bed Day		N/A	112	Actual Cost ²			
			N/A	Transitional Living Center (Perinatal/Parolee Only)				Bed Day		N/A	56	Actual Cost ¹			
			N/A	Alcohol/Drug Free Housing (Perinatal/Parolee Only)				Bed Day		N/A	57	Actual Cost ¹			

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VII. Delete Exhibit B-2- ADP in its entirety and replace with the following:

Santa Barbara County Department of Behavioral Wellness Contract Budget Packet																
Entity Budget By Program																
AGENCY NAME:		Good Samaritan Shelter														
COUNTY FISCAL YEAR:		18/19 starting December 1, 2018														
Gray Shaded cells contain formulas, do not overwrite																
LINE #	COLUMN#	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
	I. REVENUE SOURCES:		TOTAL AGENCY/ ORGANIZATION BUDGET	COUNTY BEHAVIORAL WELLNESS PROGRAMS TOTALS	Recovery Point (Santa Maria)	Project Premie(Santa Maria)	Turning Point PN Outpatient (Lompoc)	Casa De Familia Treatment Center (Santa Maria)	Lompoc Recovery Center (Lompoc)	Santa Maria - WMRES Treatment at Recovery Point	Lompoc - WMRES Treatment at Another Road Detox	Santa Maria - WMRES Treatment - Transitional Center House (TCH)	Lompoc -WMRES Treatment Recovery Way Home (LTCH)	Santa Maria Recovery Residence - Transitional Center House (TCH)	Lompoc Recovery Residence -Recovery Way Home (LTCH)	Alcohol Drug Free Housing - Emergency Shelter
1	Contributions	\$ 98,700	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			\$ -	\$ -	
2	Foundations/Trusts	\$ 253,593	\$ 1,710	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -				\$ -	\$ 1,710	
3	Miscellaneous Revenue	\$ 10,500	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			\$ -	\$ -	
4	SB Co Behavioral Wellness Funding	\$ 2,582,003	\$ 2,582,003	\$ 286,541	\$ 264,546	\$ 284,671	\$ 126,334	\$ 160,525	\$ 325,234	\$ 278,504	\$ 369,111	\$ 388,537	\$ 21,000	\$ 22,000	\$ 55,000	
5	Other Government Funding	\$ 1,332,407	\$ 183,205	\$ 37,092	\$ 14,837	\$ 14,837	\$ 1,484	\$ 5,935	\$ 60,432	\$ 24,431				\$ 12,079	\$ 12,079	
6	Other (specify)		\$ -													
7	Other (specify)		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			\$ -	\$ -	
8	Other (specify)		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			\$ -	\$ -	
9	Other (specify)		\$ -													
10	Total Other Revenue	\$ 4,277,204	\$ 2,766,918	\$ 323,633	\$ 279,383	\$ 299,508	\$ 127,818	\$ 166,460	\$ 385,666	\$ 302,935	\$ 369,111	\$ 388,537	\$ 33,079	\$ 35,789	\$ 55,000	
I.B. Client and Third Party Revenues:																
11	Client Fees	\$ 80,000	\$ 65,353	\$ 12,000	\$ 6,000			\$ 12,000	\$ 12,000	\$ 18,000				\$ 2,496	\$ 2,857	
12	SSI		-													
13	Other (specify)		-													
14	Total Client and Third Party Revenues (Sum of lines 19 through 23)	\$ 80,000	\$ 65,353	\$ 12,000	\$ 6,000	\$ -	\$ -	\$ 12,000	\$ 12,000	\$ 18,000	\$ -	\$ -	\$ 2,496	\$ 2,857	\$ -	
15	GROSS PROGRAM REVENUE BUDGET	\$ 4,357,204	\$ 2,832,271	\$ 335,633	\$ 285,383	\$ 299,508	\$ 127,818	\$ 178,460	\$ 397,666	\$ 320,935	\$ 369,111	\$ 388,537	\$ 35,575	\$ 38,646	\$ 55,000	

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III. DIRECT COSTS	TOTAL AGENCY/ ORGANIZATION BUDGET	COUNTY BEHAVIORAL WELLNESS PROGRAMS TOTALS	Recovery Point (Santa Maria)	Project Premie(Santa Maria)	Turning Point PN Outpatient (Lompoc)	Casa De Familia Treatment Center (Santa Maria)	Lompoc Recovery Center (Lompoc)	Santa Maria - WM/RES Treatment at Recovery Point	Lompoc - WM/RES Treatment at Another Road Detox	Santa Maria - WM/RES Treatment - Transitional Center House (TCH)	Lompoc -WM/RES Treatment Recovery Way Home (LTCH)	Santa Maria Recovery Residence - Transitional Center House (TCH)	Lompoc Recovery Residence - Recovery Way Home (LTCH)	Alcohol Drug Free Housing - Emergency Shelter
III.A. Salaries and Benefits Object Level														
16 Salaries (Complete Staffing Schedule)	1,465,531	\$ 1,349,015	\$ 159,145	\$ 132,617	\$ 134,801	\$ 61,031	\$ 82,385	\$ 197,754	\$ 172,456	\$ 181,393	\$ 181,393	\$ 13,174	\$ 14,145	\$ 18,720
17 Employee Benefits	\$ 263,796	\$ 239,453	\$ 28,646	\$ 23,871	\$ 24,264	\$ 10,986	\$ 14,829	\$ 35,596	\$ 31,042	\$ 32,651	\$ 32,651	\$ 2,371	\$ 2,546	
18 Consultants	123,000	\$ 123,000	\$ 30,000	\$ 21,000	\$ 21,000	\$ 10,800	\$ 10,200	\$ 15,000	\$ 15,000	\$ -	\$ -	\$ -	\$ -	
19 Payroll Taxes	\$ 146,553	\$ 133,030	\$ 15,914	\$ 13,262	\$ 13,480	\$ 6,103	\$ 8,239	\$ 19,775	\$ 17,246	\$ 18,139	\$ 18,139	\$ 1,317	\$ 1,414	
20 Salaries and Benefits Subtotal	\$ 1,998,879	\$ 1,844,498	\$ 233,705	\$ 190,750	\$ 193,546	\$ 88,919	\$ 115,653	\$ 268,125	\$ 235,744	\$ 232,183	\$ 232,183	\$ 16,863	\$ 18,105	\$ 18,720
III.B Services and Supplies Object Level														
21 Auto Expenses/Travel	40,422	\$ 15,605	\$ 1,000	\$ 2,500	\$ 2,500	\$ 500	\$ 1,000	\$ 2,500	\$ 1,700	\$ 1,667	\$ 1,667	\$ 286	\$ 286	
22 Contracted Services	94,095	\$ 30,238	\$ 1,700	\$ 500	\$ 500	\$ 250	\$ 250	\$ 12,000	\$ 7,500	\$ 2,485	\$ 4,482	\$ 286	\$ 286	
23 Computer Expenses	9,311	\$ 7,571	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000	\$ -	\$ -	\$ 286	\$ 286	
24 Occupancy	296,620	\$ 117,621	\$ 2,700	\$ 15,000	\$ 22,000	\$ 1,500		\$ 7,800	\$ 1,500	\$ 17,106	\$ 25,623	\$ 1,429	\$ 2,857	\$ 20,106
25 Drug Testing	97,559	\$ 85,901	\$ 22,099	\$ 10,000	\$ 10,000	\$ 5,000	\$ 7,500	\$ 10,000	\$ 5,000	\$ 6,008	\$ 6,937	\$ 1,429	\$ 1,429	\$ 500
26 Education & Training	19,675	\$ 14,242	\$ 1,800	\$ 2,500	\$ 2,500	\$ 1,400	\$ 1,050	\$ 1,000	\$ 1,000	\$ 1,206	\$ 1,215	\$ 286	\$ 286	
27 Gov't Fees & Charges	39,697	\$ 27,429	\$ 3,000	\$ 4,500	\$ 4,000	\$ 3,000	\$ 3,000	\$ 5,000	\$ 3,500	\$ -	\$ -	\$ 714	\$ 714	
28 Insurance	58,883	\$ 31,791	\$ 1,500	\$ 2,000	\$ 3,000	\$ 1,000	\$ 1,500	\$ 2,500	\$ 1,500	\$ 8,404	\$ 7,887	\$ 1,000	\$ 1,000	\$ 500
29 Laundry	2,286	\$ 2,286	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,000	\$ 1,000	\$ -	\$ -	\$ 143	\$ 143	
30 Legal & Accounting	2,650	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
31 Meetings and Seminars	3,947	\$ 3,786	\$ 500	\$ 500	\$ 500	\$ 500	\$ 500	\$ 500	\$ 500	\$ -	\$ -	\$ 143	\$ 143	
32 Office Expense/Supplies	28,302	\$ 17,321	\$ 3,500	\$ 3,000	\$ 3,000	\$ 1,500	\$ 1,750	\$ 2,000	\$ 1,500	\$ -	\$ -	\$ 286	\$ 286	\$ 500
33 Postage	140	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
34 Program Supplies Food	31,572	\$ 12,205	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,000	\$ 3,000	\$ 919	\$ 1,143	\$ 571	\$ 571	\$ 1,000
35 Program Supplies	153,955	\$ 86,895	\$ 4,951	\$ 4,409	\$ 4,586	\$ 1,749	\$ 1,479	\$ 7,979	\$ 4,880	\$ 24,470	\$ 28,106	\$ 2,143	\$ 2,143	
36 Rental of Buildings	40,224	\$ 12,000	\$ -	\$ -	\$ -	\$ -	\$ 12,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
37 Rental of Equipment	8,166	\$ 6,630	\$ 750	\$ 750	\$ 750	\$ 500	\$ 500	\$ 1,202	\$ 750	\$ 500	\$ 500	\$ 214	\$ 214	
38 Repairs & Maintenance	82,693	\$ 30,167	\$ 3,500	\$ 3,500	\$ 4,000	\$ 500	\$ 250	\$ 2,691	\$ 2,500	\$ 3,500	\$ 4,369	\$ 1,429	\$ 1,429	\$ 2,500
39 Telephone/Internet	55,692	\$ 30,204	\$ 4,800	\$ 3,000	\$ 3,000	\$ 1,000	\$ 3,500	\$ 5,000	\$ 2,000	\$ 2,988	\$ 2,988	\$ 714	\$ 714	\$ 500
40 Travel Expense	10,853	\$ 5,578	\$ 2,100	\$ -	\$ -	\$ 1,728	\$ 1,750	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
41 Util - Electricity	61,594	\$ 23,345	\$ 2,000	\$ 1,500	\$ 2,000	\$ 500	\$ 750	\$ 3,500	\$ 1,500	\$ 4,167	\$ 5,000	\$ 714	\$ 714	\$ 1,000
42 Util - Heat (Gas)	29,658	\$ 16,116	\$ 500	\$ 750	\$ 1,060	\$ 350	\$ 750	\$ 2,000	\$ 1,000	\$ 3,834	\$ 4,230	\$ 571	\$ 571	\$ 500
43 Util - Trash Disposal	1,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
44 Util - Water/Sewer	61,340	\$ 18,357	\$ 750	\$ 2,000	\$ 2,500	\$ 250	\$ 1,000	\$ 5,000	\$ 2,000	\$ -	\$ -	\$ 1,429	\$ 1,429	\$ 2,000
45 License and Permits	500	\$ 23,060	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11,530	\$ 11,530	\$ -	\$ -	
46 Rapid Rehousing and other payments	88,646	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
49 Services and Supplies Subtotal	\$ 1,319,482	\$ 618,346	\$ 58,150	\$ 57,409	\$ 66,896	\$ 22,227	\$ 39,529	\$ 77,672	\$ 43,330	\$ 88,783	\$ 105,674	\$ 14,071	\$ 15,500	\$ 29,106
50 III.C. Client Expense Object Level Total (Not		\$ -												
51														
52														
53														
54 SUBTOTAL DIRECT COSTS	\$ 3,318,361	\$ 2,462,844	\$ 291,855	\$ 248,159	\$ 260,442	\$ 111,146	\$ 155,182	\$ 345,797	\$ 279,074	\$ 320,966	\$ 337,858	\$ 30,935	\$ 33,605	\$ 47,826
55 IV. INDIRECT COSTS														
56 Administrative Indirect Costs (Reimbursement limited to 15%)	497,754	\$ 369,427	\$ 43,778	\$ 37,224	\$ 39,066	\$ 16,672	\$ 23,277	\$ 51,869	\$ 41,861	\$ 48,145	\$ 50,679	\$ 4,640	\$ 5,041	\$ 7,174
57 GROSS DIRECT AND INDIRECT COSTS (Sum of lines 47+48)	\$ 3,816,115	\$ 2,832,271	\$ 335,633	\$ 285,383	\$ 299,508	\$ 127,818	\$ 178,460	\$ 397,666	\$ 320,935	\$ 369,111	\$ 388,537	\$ 35,575	\$ 38,646	\$ 55,000

Contributions are intended to cover any cost in excess of contract maximum or cost not reimbursable under this contract.

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

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First 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 First Amendment to be effective December 1, 2018.

COUNTY OF SANTA BARBARA:

By: _____

STEVE LAVAGNINO, CHAIR
BOARD OF SUPERVISORS

Date: _____

ATTEST:

MONA MIYASATO
COUNTY EXECUTIVE OFFICER
CLERK OF THE BOARD

CONTRACTOR:

GOOD SAMARITAN SHELTER. INC.

By: _____

Deputy Clerk

Date: _____

By: _____

Authorized Representative

Name: _____

Title: _____

Date: _____

APPROVED AS TO FORM:

MICHAEL C. GHIZZONI
COUNTY COUNSEL

APPROVED AS TO ACCOUNTING FORM:

BETSY M. SCHAFER, CPA
AUDITOR-CONTROLLER

By: _____

Deputy County Counsel

By: _____

Deputy

RECOMMENDED FOR APPROVAL:

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

APPROVED AS TO INSURANCE FORM:

RAY AROMATORIO
RISK MANAGEMENT

By: _____

Director

By: _____

Risk Management