



AMENDMENT NO. 710
TO
CONTRACT NO. MA-042-20010886
FOR
EARLY CHILDHOOD AND YOUTH MENTAL HEALTH CONSULTATION SERVICES

This Amendment No. 710 to Contract No. MA-042-20010886 for Early Childhood and Youth Mental Health Consultation Services is made and entered into on July 1, 2022~~2023~~ ("Effective Date") between Charitable Ventures of Orange County ("Contractor"), with a place of business at 1505 E. 17th St., Ste. 101, 118, 219, and 221, Santa Ana, CA 92705, and the County of Orange, a political subdivision of the State of California ("County"), through its Health Care Agency, with a place of business at 405 W. 5th St., Ste. 600, Santa Ana, CA 92701. Contractor and County may sometimes be referred to individually as "Party" or collectively as "Parties".

RECITALS

WHEREAS, the Parties executed Contract No. MA-042-20010886 ("Contract") for Early Childhood Mental Health Consultation Services, effective March 15, 2020 through June 30, 2022, in an amount not to exceed \$1,999,999, renewable for two additional one-year periods; and

WHEREAS, the Parties executed Amendment No. 1 to amend Exhibit A of the Contract to modify the facility address that includes space to support the services for the period of May 11, 2020 through June 30, 2022; and

WHEREAS, the Parties executed Amendment No. 2 to amend Exhibit A of the Contract to modify the Budget paragraph for the period of March 15, 2020 through June 30, 2022; and

WHEREAS, the Parties executed Amendment No. 3 to increase the Period Three Maximum Obligation by \$140,302 from \$859,698 to \$1,000,000, for a revised cumulative Contract total amount not to exceed \$2,140,301, to cover the costs to expand services to a larger age group population, to revise Exhibit A of the Contract to reflect the expansion in services and increase in costs of the Contract, and to amend Paragraph XI. of the Contract; and

WHEREAS, the Parties executed Amendment No. 4 to increase the Period Three Maximum Obligation by \$1,000,000 from \$1,000,000 to \$2,000,000, for a revised cumulative Contract total amount not to exceed \$3,140,301, to cover the costs for early psychosis spectrum consultation services as a result of COVID-19 and to expand the services for a larger age group population, to amend Exhibit A to reflect the expansion in services and increase in costs of the Contract, and to change the name of the Contract from "Early Childhood Mental Health Consultation Services" to "Early Childhood and Youth Mental Health Consultation Services" to reflect the expansion in services; and

WHEREAS, the Parties executed Amendment No. 5 to amend Exhibit A of the Contract to modify the Budget paragraph for the period of January 10, 2021 through June 30, 2022; and

WHEREAS, the Parties executed Amendment No. 6 to amend Exhibit A of the Contract to modify the Budget and Services paragraphs for ~~early psychosis spectrum consultation~~ Early Psychosis Spectrum Consultation services for the period of March 28, 2021 through June 30,

2022; and

WHEREAS, the Parties ~~now desire to enter into this~~ executed Amendment No. 7 to amend Paragraph VI. and Exhibit A of the Contract and to renew the Contract for one year, effective July 1, 2022 through June 30, 2023, in an amount not to exceed \$2,000,000, for a revised cumulative contract total amount not to exceed \$5,140,301; and

WHEREAS, the Parties executed Amendment No. 8 to amend Exhibit A of the Contract to modify the Budget and Staffing paragraphs for the period of October 21, 2022 through June 30, 2023; and

WHEREAS, the Parties executed Amendment No. 9 to amend Exhibit A of the Contract to add service business hours and to modify the Budget and Staffing paragraphs for the period of December 16, 2022 through June 30, 2023; and

WHEREAS, the Parties now desire to enter into this Amendment No. 10 to renew the Contract for one year for County to continue receiving and Contractor to continue providing the services set forth in the Contract and to amend Exhibit A of the Contract.

NOW THEREFORE, Contractor and County agree to amend the Contract as follows:

1. The Contract is renewed for a term of one (1) year, effective July 1, ~~2022~~2023 through June 30, ~~2023~~2024, in an amount not to exceed \$2,~~000~~300,000 for this renewal term, for a revised cumulative Contract total amount not to exceed \$~~5,140~~7,440,301; on the amended terms and conditions.
2. Referenced Contract Provisions, Term provision and Maximum Obligation provision, of the Contract are deleted in their entirety and replaced with the following:

“Term: March 15, 2020 through June 30, ~~2023~~2024

Period One means the period from March 15, 2020 through June 30, 2020

Period Two means the period from July 1, 2020 through June 30, 2021

Period Three means the period from July 1, 2021 through June 30, 2022

Period Four means the period from July 1, 2022 through June 30, 2023

Period Five means the period from July 1, 2023 through June 30, 2024

Maximum Obligation:

Period One Maximum Obligation:	\$ 280,603
Period Two Maximum Obligation:	859,698
Period Three Maximum Obligation:	2,000,000
Period Four Maximum Obligation:-	2,000,000
<u>Period Five Maximum Obligation:</u>	<u>2,300,000</u>
TOTAL MAXIMUM OBLIGATION:	\$ 5,140 <u>\$</u>

7,440,301"

3. ~~Paragraph VI. Cost Report, subparagraph A. (but not including subparagraphs A.1, A.2 and A.3) of the Contract is deleted in its entirety and replaced with the following:~~

~~"A. CONTRACTOR shall submit separate Cost Reports for each Period or for a portion thereof, to COUNTY no later than sixty (60) calendar days following the period for which they are prepared or termination of this Agreement. CONTRACTOR shall prepare the individual and/or consolidated Cost Report in accordance with all applicable federal, state and COUNTY requirements, GAAP and the Special Provisions Paragraph of this Agreement. CONTRACTOR shall allocate direct and indirect costs to and between programs, cost centers, services, and funding sources in accordance with such requirements and consistent with prudent business practice, which costs and allocations shall be supported by source documentation maintained by CONTRACTOR, and available at any time to ADMINISTRATOR upon reasonable notice. In the event CONTRACTOR has multiple agreements for mental health services that are administered by HCA, consolidation of the individual Cost Reports into a single consolidated Cost Report may be required, as stipulated by ADMINISTRATOR. CONTRACTOR shall submit a consolidated Cost Report to COUNTY no later than five (5) business days following approval by ADMINISTRATOR of all individual Cost Reports to be incorporated into a consolidated Cost Report."~~

- 4.3. Exhibit A, Paragraph II. Budget, subparagraph A. of the Contract is deleted in its entirety and replaced with the following:

"A. COUNTY shall pay CONTRACTOR in accordance with the Payments Paragraph in this Exhibit A to the Agreement and the following budgets, which are set forth for informational purposes only and may be adjusted by mutual agreement, in writing, by ADMINISTRATOR and CONTRACTOR.

1. Early Childhood Services (ECS)

	<u>PERIOD</u>
	<u>FOUR</u>
	<u>FIVE</u>
ADMINISTRATIVE COST	
Indirect Costs	\$ <u>128,000</u>
SUBTOTAL ADMINISTRATIVE COST	\$ 128,000
PROGRAM COST	
Salaries	\$609,540 <u>637,529</u>
Benefits	117,154 <u>111,692</u>
Services and Supplies	143,806 <u>122,779</u>
Subcontractor	— <u>1,500</u>

SUBTOTAL PROGRAM COST	\$872,000
TOTAL GROSS COST	\$1,000,000
REVENUE	
MHSAs	<u>\$1,000,000</u>
TOTAL REVENUE	\$1,000,000
MAXIMUM OBLIGATION	\$1,000,000

2. Consultation Services Early Psychosis Spectrum (CSEPS)

	<u>PERIOD</u>
	<u>FOUR</u> <u>FIVE</u>
ADMINISTRATIVE COST	
Indirect Costs	\$ 120,000 155,700
SUBTOTAL ADMINISTRATIVE COST	\$ 120,000 155,700
PROGRAM COST	
Salaries	\$ 287,663 694,884
Benefits	61,000 138,977
Services and Supplies	240,482 <u>310,439</u>
Subcontractor	— <u>290,855</u>
SUBTOTAL PROGRAM COST	\$ 880,000 <u>1,144,300</u>
TOTAL GROSS COST	\$1, <u>300</u> , 000 , 000
REVENUE	
MHSAs	\$1, 000 <u>300</u> , 000
TOTAL REVENUE	\$1, 000 <u>300</u> , 000
MAXIMUM OBLIGATION	\$1, 000 <u>300</u> , 000

5.4. Exhibit A, Paragraph III. Payments, subparagraph A. (but not including subparagraphs A.1, A.2 and A.3) of the Contract is deleted in its entirety and replaced with the following:

“A. COUNTY shall pay CONTRACTOR monthly, in arrears, (1) the provisional amount of \$83,333 per month for ECS for Period ~~Four~~Five and (2) the provisional amount of ~~\$83,108~~,333 per month for CSEPS for Period ~~Four~~Five, as specified in the Referenced Contract Provisions of the Agreement. All payments are interim payments only, and subject to final settlement in accordance with the Cost Report Paragraph of the Agreement for which CONTRACTOR shall be reimbursed for the actual cost of providing the services hereunder; provided, however, the total of such payments does not exceed COUNTY’s Maximum Obligation as specified in the Referenced Contract Provisions of the Agreement and, provided further, CONTRACTOR’s costs are reimbursable pursuant to COUNTY, state, and/or federal regulations. ADMINISTRATOR may, at its discretion, pay supplemental invoices for any month for which the provisional amount specified above has not been fully paid.”

6.5. Exhibit A, Paragraph V. Services, subparagraph ~~A.4~~C. of the Contract is deleted in its entirety and replaced with the following:

~~“1. CONTRACTOR shall maintain facility/(ies) for the provision of Early Childhood and Youth Mental Health Consultation Services described herein at the following location(s), or any other location approved, in advance, in writing, by ADMINISTRATOR. The facility shall include space to support the services identified within the Agreement.~~

~~Charitable Ventures of Orange County County Property (CESPS)~~

“C. Units of Service

1. CONTRACTOR shall achieve, track, and report at a minimum, the following units of service for ECS:

1505 E. 17th St., Ste. 101, 118, 219, and 224	4000 W. Metropolitan Dr. <u>Period Five</u>
Santa Ana, CA 92705 <u>Childcare sites</u>	Orange, CA 92868 <u>115</u>
<u>ECE provider staff</u>	<u>500</u>
<u>Number of parents</u>	<u>5,000</u>

7.6. Exhibit A, Paragraph VI. Staffing for ECS, subparagraph A. of the Contract is deleted in its entirety and replaced with the following:

“A. CONTRACTOR shall, at a minimum, provide the following staffing pattern expressed in Full-Time Equivalents (FTEs) continuously throughout the term of the Agreement. One (1) FTE shall be equal to an average of forty (40) hours work per week.

DIRECT PROGRAM	<u>FTEs</u>
Program Manager	0.00
Training and Content Specialist	0.00
Director	0.80
Senior Early Childhood Mental Health Consultant	1.00
Early Childhood Mental Health Consultant	5.00
Subcontractor	<u>0.0400</u>
DIRECT PROGRAM SUBTOTAL FTE's	6.84 <u>80</u> "

~~8. Exhibit A, Paragraph VII. Consultation Services for Early Psychosis Spectrum, subparagraphs A.2, A.3 and A.4 (but not including subparagraphs A.4.a through A.4.e) of the Contract are deleted in their entirety and replaced with the following:~~

~~"2. CONTRACTOR shall provide Consultation Services for Early Psychosis Spectrum concerns to OC CREW staff and HCA mental health providers working with youth identified as having early psychosis. Consultation services will also be available to other healthcare providers in Orange County who may work with or encounter youth at risk of developing psychosis symptoms, pending availability of consultation services time slots. Consultation services will also be tailored for and provided to family members, caregivers and other important people in the life of the young person who is referred for assessment for EPS experiences.~~

~~3. CONTRACTOR shall utilize a practice-based mental health consultation model that utilizes a systematic evidence-based and trauma-informed approach to building the skills and expertise of the healthcare providers and family members. These practices can include, but are not limited to, the Modular Approach to Care for Individuals at CHR (Thompson et al., 2015). To ensure alignment with statewide initiatives and identified best practices on early psychosis care, CONTRACTOR shall draw from the findings, recommendations and best practices identified through the Early Psychosis Learning Health Care Network (EP LHCN) Innovation Project as it develops the consultation model.~~

~~4. Consultation services will include multi-tiered support and be available for between three (3) to six (6) months or based on the healthcare provider and/or family needs. Consultation must incorporate relevant and appropriate elements from the EP~~

LHCN Innovation Project and may include up to six (6) components:"

~~"f. Communities of Practice (CoP): To continually share experiences and build a trusted network of support within the provider community, CONTRACTOR shall facilitate collaborative learning groups for OC CREW staff that extend and reinforce the learnings and recommendations from the EP LHCN Innovation Project and other relevant best practices related to the Early Psychosis Spectrum. CoP's shall be held in-person and/or via video conference (depending on the preference of the Participants) on a monthly basis, to establish needs and gaps as determined by the Participants."~~

~~9. Exhibit A, Paragraph VII. Consultation Services for Early Psychosis Spectrum, subparagraphs A.8, A.9 and A.10 of the Contract are deleted in their entirety and replaced with the following:~~

~~"8. CONTRACTOR shall promote the program by providing training on the Early Psychosis Spectrum to OC CREW staff and other community healthcare providers and organizations. CONTRACTOR shall provide training to OC CREW staff that reinforces the recommendations and, when relevant, best practices identified through the EP LHCN Innovation Project.~~

~~9. CONTRACTOR shall actively collaborate with OC CREW staff and other organizations that provide focused services related to first episode psychosis to ensure that the needs of the youth who cross a threshold for psychosis are addressed using best practices in EPS care, including those recommended through the EP LHCN Innovation Project.~~

~~10. CONTRACTOR shall establish a Protocol for Screening for Early Psychosis Spectrum concerns among youth to assist with the identification and referral of youth appropriate for OC CREW services. CONTRACTOR will focus on youth who have tested positive for COVID-19 in OC. CONTRACTOR shall draw from, where applicable, the measures and tools identified in the EP LHCN Innovation project. Initial screening questions will be embedded in a survey housed in COUNTY QUALTRICS platform and be stratified by age with questionnaires targeting age ranges based on developmental appropriateness."~~

~~10. Exhibit A, Paragraph VII. Consultation Services for Early Psychosis Spectrum, subparagraph A.17 is added to the Contract as follows:~~

~~"17. CONTRACTOR shall provide consultation services to OC CREW and other HCA~~

mental health clinicians training them in the administration, scoring and interpretation of measures included in the Psychosocial Early Psychosis Spectrum Assessment.”

11.7. ~~Exhibit A, Paragraph VII.~~ Consultation Services for Early Psychosis Spectrum, subparagraph B.1. of the Contract is deleted in its entirety and replaced with the following:

“1. CONTRACTOR shall achieve, track, and report, at a minimum, the following units of service. ~~For metrics b-j, numbers are for CSEPS. Metric a is the~~ estimated based on number of youth ~~and caregivers~~ who complete the initial screener ~~in metric a. Thus, if the,~~ a short self-report tool developed to identify youth at higher risk for psychosis. ~~Metric b is the estimated~~ number of youth ~~who are given a secondary screener, which is a shortened version of the Structured Interview for Psychosis Risk Syndromes (SIPS) instrument, that is given by a trained assessor. Metric c is an estimated number of youth who scored high on the secondary screener (metric b) and who are given the full SIPS assessment and comprehensive report by the trained assessor. If the number of youth and caregivers initially screened per metric in metrics a and b differs from the current projections estimated number,~~ the resulting numbers in ~~metrics b-j are also subject to metric c may~~ change.”

Units of Service	Current Estimated #s Estimated Outputs	
a. Estimated youth and families provided with initial screener as a result of HCA and provider outreach <u>Primary Screener Completed by Youth and Caregivers</u>	10,000 Estimated <u>300</u>	
	Anticipated Outputs	Current Estimated #s
b. Youth or caregivers who complete second step in screening <u>Secondary Screener Completed by Clinician</u>	3% of youth responding to initial screener (a)	300 <u>75</u>
c. Youth with general mental health concerns identified <u>c-1. SIPS Assessment Completed by Clinician</u>	25% of youth screened in (b)	75 <u>45</u>
d. Referrals to community behavioral health services <u>c-2. Assessment Reports w/ Care Plan Recommendations</u>	100% of youth identified with general mental health concerns (c)	75 <u>45</u>
e. Youth with positive psychosis risk screens identified <u>c-3. Youth identified as meeting criteria for an Early Psychosis Spectrum disorder</u>	18% of all screened youth (b)	55 <u>18</u>

f. Psychosis risk assessments completed with youth d. Youth Referrals to community behavioral health services	82% of total positive risk screens (e)	45 75
g. Assessment Reports w/ Care Plan Recommendations e. Consultations provided to healthcare providers	96% of risk assessments initiated (f)	43 45
h. Youth identified as meeting criteria for an Early Psychosis Spectrum disorder f. Outreach and training sessions with healthcare providers	40% of youth with initiated assessments (f)	18 25
i. Referrals for youth who have an Early Psychosis Spectrum disorder	100% of youth identified as meeting criteria for an Early Psychosis Spectrum disorder (h)	18
j. Confirmed healthcare linkages	100% of youth who have an Early Psychosis Spectrum disorder and are referred (i)	18
k. Consultations provided to healthcare providers	45	
l. Consultation provided to families and/or clients with Early Psychosis Spectrum conditions	37	
m. Outreach and training sessions with OC CREW and HCA clinicians	14	
n. Outreach and training sessions provided to community healthcare providers	7	

~~Exhibit A, Paragraph VII. Consultation Services for Early Psychosis Spectrum~~

~~12.8. Exhibit A, Paragraph VIII. Staffing for CSEPS~~, subparagraph ~~C.1A.~~ of the Contract is deleted in its entirety and replaced with the following:

~~“1. CONTRACTOR shall track and implement ADMINISTRATOR approved output and outcome measures. The primary deliverable will be the number of screenings implemented, assessments conducted, consultations offered, and the results of these consultations. The following outcome measures will be reported upon:~~

- ~~— a. — Number of initial and secondary screens implemented~~
- ~~— b. — Number of youth who screen positive for Early Psychosis Spectrum concerns~~
- ~~— c. — Number of comprehensive evaluations conducted~~
- ~~— d. — Number of youth who meet diagnostic criteria for an Early Psychosis~~

~~Spectrum disorder~~

- ~~e. Number of reports written~~
- ~~f. Number of consultations provided to healthcare providers~~
- ~~g. Number of consultations provided to families and/or clients~~
- ~~h. Number of hours providing consultations~~
- ~~i. Number of referrals made~~
- ~~j. Number of linkages confirmed~~
- ~~k. Number of outreach and training sessions OC CREW and HCA clinicians~~
- ~~l. Number of outreach and training sessions provided to community healthcare providers~~

~~The duration of consultations may vary widely so reporting on consultations will provide the number of hours spent in addition to the number of consultations offered.”~~

~~“~~

- ~~13. Exhibit A, Paragraph VIII. Staffing for Consultation Services for Early Psychosis Spectrum, subparagraph A. of the Contract is deleted in its entirety and replaced with the following:~~

~~“A. A. CONTRACTOR shall, at a minimum, provide the following staffing pattern expressed in Full-Time Equivalent (FTEs) continuously throughout the term of the Agreement. One (1) FTE shall be equal to an average of forty (40) hours work per week. Clinical staff should possess relevant EPS subject matter expertise appropriate for their position.~~

PROGRAM	FTEs	<u>FTEs</u>
— Program Director	1.00	
— Lead Assessment Specialist	0.00	
— Assessment Specialist	0.95	
— Outreach & Referral Specialist	1.00	
— Consultation Specialist	1.00	
— Peer/Family Specialist	0.00	
— Administrative Support	0.25	
— Clinical Trainee	0.00	
— Training & Content Specialist	0.00	
— Clinical Specialist	1.00	
— Screening and Resource Specialist	1.00	
— Administrative Support	1.00	

—Project Specialist	1.00
—Subcontractors	<u>2.94</u>
TOTAL FTEs	41.14"

<u>PROGRAM</u>	
<u>Program Director</u>	<u>1.00</u>
<u>Lead Assessment Specialist</u>	<u>0.00</u>
<u>Assessment Specialist</u>	<u>0.00</u>
<u>Outreach & Referral Specialist</u>	<u>0.00</u>
<u>Consultation Specialist</u>	<u>0.00</u>
<u>Peer/Family Specialist</u>	<u>0.00</u>
<u>Administrative Support</u>	<u>1.00</u>
<u>Administrative Program Specialist</u>	<u>1.00</u>
<u>Clinical Trainee</u>	<u>0.00</u>
<u>Training & Content Specialist</u>	<u>0.00</u>
<u>Clinical Specialist</u>	<u>0.00</u>
<u>Screening and Resource Specialist</u>	<u>0.00</u>
<u>Project Specialist</u>	<u>0.00</u>
<u>Clinical Manager</u>	<u>1.00</u>
<u>Screening & Assessment Specialist</u>	<u>0.00</u>
<u>Resource Specialist</u>	<u>1.00</u>
<u>Operations Manager</u>	<u>1.00</u>
<u>Mental Health Clinician</u>	<u>2.00</u>
<u>Subcontractors</u>	<u>0.00</u>
<u>TOTAL FTEs</u>	<u>8.00"</u>

This Amendment No. 710 modifies the Contract, including all previous amendments, only as expressly set forth herein. Wherever there is a conflict in the terms or conditions between this Amendment No. 710 and the Contract, including all previous amendments, the terms and conditions of this Amendment No. 710 shall prevail. In all other respects, the terms and conditions of the Contract, including all previous amendments, not specifically changed by this Amendment No. 710 remain in full force and effect.

SIGNATURE PAGE FOLLOWS

SIGNATURE PAGE

IN WITNESS WHEREOF, the Parties have executed this Amendment No. 710. If Contractor is a corporation, Contractor shall provide two signatures as follows: 1) the first signature must be that of either the Chairman of the Board, the President, or any Vice President; 2) the second signature must be that of either the Secretary, an Assistant Secretary, the Chief Financial Officer, or any Assistant Treasurer. In the alternative, a single corporate signature is acceptable when accompanied by a corporate resolution or bylaws demonstrating the legal authority of the signature to bind the company.

Contractor: CHARITABLE VENTURES OF ORANGE COUNTY

_____	_____
Print Name	Title
_____	_____
Signature	Date

County of Orange, a political subdivision of the State of California

Purchasing Agent/Designee Authorized Signature:

_____	_____
Print Name	Title
_____	_____
Signature	Date

APPROVED AS TO FORM
Office of the County Counsel
Orange County, California

_____	Deputy County Counsel
Print Name	Title
_____	_____
Signature	Date