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FIRST AMENDMENT TO AGREEMENT
BETWEEN
COUNTY OF ORANGE
AND
THE RAISE FOUNDATION
AND
CHILDREN’S BUREAU OF SOUTHERN CALIFORNIA
AND
HUMAN OPTIONS, INC.
AND
MISSION HOSPITAL REGIONAL MEDICAL CENTER
FOR THE PROVISION OF
SERVICES PROMOTING SAFE AND STABLE FAMILIES,
DIFFERENTIAL RESPONSE, AND FAMILY STABILIZATION

THIS FIRST AMENDMENT, entered into this 1st day of January, 2018, which date is particularized for reference purposes only, is to that certain AGREEMENT Number FKV1315 between the parties hereto, dated June 2, 2015, hereinafter referred to as the “Agreement” and is by and between the COUNTY OF ORANGE, hereinafter referred to as “COUNTY,” and The Raise Foundation, a California non-profit corporation; Children’s Bureau of Southern California, a California non-profit corporation; Human Options, Inc., a California non-profit corporation; and Mission Hospital Regional Medical Center, a California non-profit corporation; hereinafter collectively referred to as “SOUTH ORANGE COUNTY FAMILY RESOURCE CENTER” or “CONTRACTOR.” The Raise Foundation, Children’s Bureau of Southern California, Human Options, Inc., and Mission Hospital Regional Medical Center, may each also be referred to as “Contractor Partner Agencies.” This Amendment shall be administered by the County of Orange Social Services Agency, hereinafter referred to as “ADMINISTRATOR.”

1. Subparagraph 20.1 of the Agreement is hereby amended to read as follows:

“20.1. Maximum Contractual Obligation:

The maximum obligation of COUNTY under this Agreement shall not exceed the amount of ~~\$2,380,465~~ \$2,489,686: The amount of \$476,093 for July 1, 2015 through June 30, 2016; the amount of \$476,093 for July 1, 2016 through June 30, 2017; the amount of ~~\$476,093~~ \$512,500 for July 1, 2017 through June 30, 2018; the amount of ~~\$476,093~~ \$512,500 for July 1, 2018 through June 30, 2019; and the amount of ~~\$476,093~~ \$512,500 for July 1, 2019 through June 30, 2020 or actual allowable costs, whichever is less.

2. Subparagraph 13.11 of Exhibit A of the Agreement is hereby amended to read as follows:

13.11 The annual budget for services provided pursuant to Exhibit

A of this Agreement is set forth as follows:

LINE ITEMS	FTE (1)	Maximum Hourly Rate (2)	Budget
<u>SALARIES</u>			
<u>The Raise Foundation (RF) (6)</u>			
Accountant/Bookkeeper (Admin.)	0.10	\$30.00	\$ 6,240
Administrative Assistant (Admin.)	0.075	15.00	2,340
Childcare Worker (Service 6.2)	0.125	13.25	3,120
Community Engagement Volunteer Coordinator (Subparagraph 6.1.4) (8)	0.50	20.82	19,240
FRC Coordinator (Service 5.16) (8)	1.00	24.53	51,022
Operations Manager (Admin.)	0.05	26.00	2,704
Supervisor (Admin.)	0.05	45.00	<u>3,749</u>
SUBTOTAL RF SALARIES:			\$ 88,415
RF Benefits (19%) (3 and 5)			<u>16,750</u>
SUBTOTAL RF SALARIES AND BENEFITS:			<u>\$105,165</u>
<u>Children's Bureau of Southern California (CB) (6)</u>			
Family Support Specialist (Service 5.3 and 5.17)	1.00	\$18.44	\$ 38,353
Program Manager (Admin.)	0.041	41.70	<u>3,556</u>
SUBTOTAL CB SALARIES:			\$ 41,909
CB Benefits (28%) (3 and 5)			<u>10,556</u>
SUBTOTAL CB SALARIES AND BENEFITS:			\$ 52,465
<u>Human Options (HO) (6)</u>			

1	Clinical Supervisor/Program Supervisor (Admin.)	0.05	\$41.35	\$ 4,250
2	Counselor (Service 5.2)	0.50	25.00	26,000
3	OST Leader (Service 5.7)	0.10	15.00	<u>3,120</u>
	SUBTOTAL HO SALARIES:			\$ 33,370
4	HO Benefits (15.6%) ^(3 and 5)			<u>5,206</u>
5	SUBTOTAL HO SALARIES AND BENEFITS:			\$ 38,576
6	<u>Mission Hospital Regional Medical Center (MH) ⁽⁶⁾</u>			
7	Information and Referral Specialist (Service 5.6)	1.00	\$22.00	\$ <u>31,824</u>
8	SUBTOTAL MH SALARIES:			\$ 31,824
9	MH Benefits (38%) ^(3 and 4)			<u>12,093</u>
10	SUBTOTAL MH SALARIES AND BENEFITS:			\$ 43,917
11	SUBTOTAL ALL FRC SALARIES AND BENEFITS:			\$240,123
11	<u>PARTICIPANT RELATED SERVICES AND EXPENSES</u>			
12	RF Direct Service Expense			\$ 10
13	RF CEAC (Subparagraph 6.1.4)			1,200
14	RF Emergency Assistance (Service 5.16 and Subparagraph 6.3)			500
15	RF TLFR Activities (Service 5.10)			1,000
16	CB Emergency Assistance (Service 5.17 and Subparagraph 6.3)			705
17	CB Direct Service Expense			100
18	HO Direct Service Expense			226
19	HO Parent Education (Service 5.8)			7,500
20	HO Personal Empowerment Program (Service 5.9)			<u>6,000</u>
21	SUBTOTAL PARTICIPANT RELATED SERVICES AND EXPENSES:			\$ 17,241
22	<u>ADMINISTRATIVE SERVICES AND SUPPLIES ⁽⁶⁾</u>			
23	RF Program Expense			\$ 1,000
24	RF Operating Expense			14,874
25	CB Program Expense			300
26	CB Operating Expense			1,400
27	HO Operating Expense			600
28	MH Operating Expense			<u>15,875</u>
29	SUBTOTAL ADMINISTRATIVE SERVICES AND SUPPLIES:			\$ 34,049
30	<u>INDIRECT COSTS ⁽⁶⁾</u>			
31	RF Indirect Cost			\$ 1,000
32	CB Indirect Cost			1,979
33	HO Indirect Cost			<u>5,608</u>
34	SUBTOTAL INDIRECT COSTS:			\$ 8,587

1	SUBTOTAL ALL FRC SALARIES, BENEFITS, PARTICIPANT RELATED			
2	SERVICES AND EXPENSES, ADMINISTRATIVE SERVICES AND SUPPLIES,			\$300,000
3	AND INDIRECT COSTS:			
4	<u>DIFFERENTIAL RESPONSE (DR) PROGRAM ⁽⁶⁾</u>			
5	<u>CB DR SALARIES</u>			
6	CB DR Family Support Specialist (Service			
7	5.12 and 5.18)	1.00	\$21.94	\$ 31,600
8	CB DR In-Home Family Specialist (Service			
9	5.13)	1.00	21.94	41,600
10	CB DR Program Manager (Admin.)	0.041	44.70	<u>3,556</u>
11	SUBTOTAL CB DR SALARIES:			\$ 76,756
12	CB DR Benefits (28%) ^(3 and 5)			<u>21,491</u>
13	SUBTOTAL CB DR SALARIES AND BENEFITS:			\$ 98,247
14	<u>MH DR SALARIES</u>			
15	MH DR CMT Clinical Supervisor (Service			
16	5.11) ⁽⁸⁾	0.15	\$60.00	<u>5,720</u>
17	SUBTOTAL MH DR SALARIES AND BENEFITS:			\$ 5,720
18	SUBTOTAL ALL DR SALARIES AND BENEFITS:			\$103,967
19	<u>DR PARTICIPANT RELATED SERVICES AND EXPENSES</u>			
20	CB DR Direct Service Expense			\$ 8,300
21	CB DR Emergency Assistance (Service 5.18 and Subparagraph 6.3)			<u>3,000</u>
22	SUBTOTAL DR PARTICIPANT RELATED SERVICES AND EXPENSES:			\$ 11,300
23	<u>DR ADMINISTRATIVE SERVICES AND SUPPLIES ⁽⁶⁾</u>			
24	CB DR Program Expense			\$ 500
25	CB DR Operating Expense			<u>5,939</u>
26	SUBTOTAL DR ADMINISTRATIVE SERVICES			
27	AND SUPPLIES:			\$ 6,439
28	<u>DR INDIRECT COSTS ⁽⁶⁾</u>			
29	CB DR Indirect Cost			\$ <u>3,294</u>
30	SUBTOTAL DR INDIRECT COSTS:			\$ 3,294
31	SUBTOTAL ALL DR SALARIES, BENEFITS, PARTICIPANT RELATED			
32	SERVICES AND EXPENSES, ADMINISTRATIVE SERVICES AND SUPPLIES,			\$125,000
33	AND INDIRECT COSTS:			
34	SUBTOTAL FRC AND DR PROGRAMS:			\$425,000
35	<u>FAMILY STABILIZATION (FS) PROGRAM ⁽⁶⁾</u>			
36	<u>CB FS SALARIES</u>			
37	CB FS Family Support Specialist (Service	0.50		\$ 20,904
38	5.14, 5.19 and 5.20)	<u>1.00</u>	\$22.94	<u>41,600</u>
39				<u>4,648</u>
40	CB FS Program Manager (Admin.)	0.05	44.70	<u>5,000</u>
41				\$ 25,552
42	SUBTOTAL CB FS SALARIES:			<u>46,600</u>
43				<u>7,154</u>
44	CB FS Benefits (28%) (3 and 5)			<u>13,048</u>

1		\$ 32,706
2	SUBTOTAL CB FS SALARIES AND BENEFITS:	59,648
3	<u>FS PARTICIPANT RELATED SERVICES AND EXPENSES</u>	
4		\$ 1,000
5	CB FS Direct Services Expense	1,500
6	CB FS Emergency Assistance Funds (Service 5.19 and Subparagraph 6.3)	2,000
7		1,500
8	CB FS Housing Emergency Assistance Funds (Service 5.20 and Subparagraph 6.4)	9,117
9		19,950
10		\$ 12,117
11	SUBTOTAL FS PARTICIPANT RELATED SERVICES AND EXPENSES:	22,550
12	<u>FS ADMINISTRATIVE SERVICES AND SUPPLIES ⁽⁶⁾</u>	
13		\$ 200
14	CB FS Program Expense	100
15		1,750
16	CB FS Operating Expense	3,202
17		\$ 1,950
18	SUBTOTAL FS ADMINISTRATIVE SERVICES AND SUPPLIES:	3,302
19	<u>FS INDIRECT COSTS ⁽⁶⁾</u>	
20		\$ 4,320
21	CB FS Indirect Cost	2,000
22		\$ 4,320
23	SUBTOTAL FS INDIRECT COSTS:	2,000
24	SUBTOTAL ALL FS SALARIES, BENEFITS, PARTICIPANT RELATED SERVICES AND EXPENSES, ADMINISTRATIVE SERVICES AND SUPPLIES, AND INDIRECT COSTS:	\$ 51,093
25		\$ 87,500
26		\$476,093
27	SUBTOTAL ALL FRC, DR, AND FS PROGRAMS:	\$512,500
28		\$476,093
29	MAXIMUM COUNTY OBLIGATION:	\$512,500

30 3. Subparagraph 5.14.2 of Exhibit A of the Agreement is hereby amended to read
31 as follows:

32 5.14.2 CB shall provide FS Family Support Services for a
33 minimum of ~~twenty five (25)~~ forty (40) unduplicated FAMILIES annually. FS
34 Family Support Services shall focus on a family centered approach to address
35 crisis issues causing barriers to WTW participation activities; serve as a
36 support to families while in crisis; and provide assistance to PARTICIPANTS in
37 accessing community resources.

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1 4. All other terms and conditions of the Agreement shall remain the same and
2 in full force and effect.

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1 WHEREFORE, the parties hereto have executed this First Amendment to
2 Agreement dated June 2, 2015, in the County of Orange, California.

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4 By: _____
5 ELDON BABER
6 EXECUTIVE DIRECTOR
7 THE RAISE FOUNDATION

By: _____
CHAIRWOMAN OF THE
BOARD OF SUPERVISORS
COUNTY OF ORANGE, CALIFORNIA

8
9 Dated: _____

Dated: _____

10 By: _____
11 ~~KENNETH D. MCFARLAND~~ EILEEN HAUBL
12 CHIEF EXECUTIVE FINANCIAL OFFICER
13 MISSION HOSPITAL REGIONAL MEDICAL CENTER

By: _____
14 ~~LYN BRAMMER~~ VALERIE BRAUKS
15 DIRECTOR OF COMMUNITY SERVICES
16 CHILDREN'S BUREAU OF
17 SOUTHERN CALIFORNIA

18 Dated: _____

Dated: _____

19 SIGNED AND CERTIFIED THAT A COPY OF
20 THIS AGREEMENT HAS BEEN DELIVERED TO
21 THE CHAIR OF THE BOARD PER G.C.

By: _____
22 MARICELA RIOS-FAUST
23 CHIEF OPERATIONS EXECUTIVE
24 OFFICER
25 HUMAN OPTIONS, INC.

26 Sec. 25103, Reso 79-1535
27 Attest:

Dated: _____

28 By: _____
ROBIN STIELER
Clerk of the Board of Supervisors
County of Orange, California

Dated: _____

APPROVED AS TO FORM
COUNTY COUNSEL
COUNTY OF ORANGE, CALIFORNIA

By: _____
DEPUTY

Dated: _____