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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 \$2,489,686: 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 \$512,500 for July 1, 2017 through June 30, 2018; the amount of \$512,500 for July 1, 2018 through June 30, 2019; and the amount of \$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  | <u>FTE</u><br><sup>(1)</sup> | <u>Maximum</u><br><u>Hourly</u><br><u>Rate</u> <sup>(2)</sup> | <u>Budget</u>    |
|---|------------------------------|---|------------------|
| <u>SALARIES</u>   |                              |   |                  |
| <u>The Raise Foundation (RF)</u> <sup>(6)</sup>                                   |                              |   |                  |
| 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<br>(Subparagraph 6.1.4) <sup>(8)</sup> | 0.50                         | 20.82   | 19,240           |
| FRC Coordinator (Service 5.16) <sup>(8)</sup>                                     | 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%) <sup>(3 and 5)</sup>  |                              |   | <u>16,750</u>    |
| SUBTOTAL RF SALARIES AND BENEFITS:  |                              |   | <u>\$105,165</u> |
| <u>Children's Bureau of Southern California</u><br><u>(CB)</u> <sup>(6)</sup>     |                              |   |                  |
| Family Support Specialist (Service 5.3 and<br>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%) <sup>(3 and 5)</sup>  |                              |   | <u>10,556</u>    |
| SUBTOTAL CB SALARIES AND BENEFITS:  |                              |   | \$ 52,465        |
| <u>Human Options (HO)</u> <sup>(6)</sup>  |                              |   |                  |

|    |   |      |         |                  |
|----|---|------|---------|------------------|
| 1  | Clinical Supervisor/Program Supervisor<br>(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%) <sup>(3 and 5)</sup>                                |      |         | <u>5,206</u>     |
| 5  | SUBTOTAL HO SALARIES AND BENEFITS:                                      |      |         | \$ 38,576        |
| 6  | <u>Mission Hospital Regional Medical Center<br/>(MH) <sup>(6)</sup></u> |      |         |                  |
| 7  | Information and Referral Specialist<br>(Service 5.6)                    | 1.00 | \$22.00 | \$ <u>31,824</u> |
| 8  | SUBTOTAL MH SALARIES:   |      |         | \$ 31,824        |
| 9  | MH Benefits (38%) <sup>(3 and 4)</sup>                                  |      |         | <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<br>Subparagraph 6.3)          |      |         | 500              |
| 15 | RF TLFR Activities (Service 5.10)                                       |      |         | 1,000            |
| 16 | CB Emergency Assistance (Service 5.17 and<br>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<br>5.9)                        |      |         | <u>6,000</u>     |
| 21 | SUBTOTAL PARTICIPANT RELATED SERVICES AND EXPENSES:                     |      |         | \$ 17,241        |
| 22 | <u>ADMINISTRATIVE SERVICES AND SUPPLIES <sup>(6)</sup></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 <sup>(6)</sup></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 <sup>(6)</sup></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%) <sup>(3 and 5)</sup>                      |       |         | <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) <sup>(8)</sup>   | 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 <sup>(6)</sup></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 <sup>(6)</sup></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 <sup>(6)</sup></u>        |       |         |                 |
| 36 | <u>CB FS SALARIES</u>  |       |         |                 |
| 37 | CB FS Family Support Specialist (Service                       |       |         |                 |
| 38 | 5.14, 5.19 and 5.20)   | 1.00  | \$22.94 | \$ 41,600       |
| 39 | CB FS Program Manager (Admin.)                                 | 0.05  | 44.70   | <u>5,000</u>    |
| 40 | SUBTOTAL CB FS SALARIES:                                       |       |         | \$ 46,600       |
| 41 | CB FS Benefits (28%) (3 and 5)                                 |       |         | <u>13,048</u>   |
| 42 | SUBTOTAL CB FS SALARIES AND BENEFITS:                          |       |         | \$ 59,648       |

|    |  |                  |
|----|--|------------------|
| 1  | <u>FS PARTICIPANT RELATED SERVICES AND EXPENSES</u>  |                  |
| 2  | CB FS Direct Services Expense  | \$ 1,500         |
| 3  | CB FS Emergency Assistance Funds (Service 5.19 and Subparagraph 6.3)   | 1,500            |
| 4  | CB FS Housing Emergency Assistance Funds (Service 5.20 and Subparagraph 6.4)   | <u>19,950</u>    |
| 5  | SUBTOTAL FS PARTICIPANT RELATED SERVICES AND EXPENSES:   | \$ 22,500        |
| 6  | <u>FS ADMINISTRATIVE SERVICES AND SUPPLIES <sup>(6)</sup></u>  |                  |
| 7  | CB FS Program Expense  | \$ 100           |
| 8  | CB FS Operating Expense  | <u>3,202</u>     |
| 9  | SUBTOTAL FS ADMINISTRATIVE SERVICES AND SUPPLIES:  | \$ 3,302         |
| 10 | <u>FS INDIRECT COSTS <sup>(6)</sup></u>  |                  |
| 11 | CB FS Indirect Cost  | <u>\$ 2,000</u>  |
| 12 | SUBTOTAL FS INDIRECT COSTS:  | \$ 2,000         |
| 13 | SUBTOTAL ALL FS SALARIES, BENEFITS, PARTICIPANT RELATED SERVICES AND EXPENSES, ADMINISTRATIVE SERVICES AND SUPPLIES, AND INDIRECT COSTS: | \$ 87,500        |
| 14 | SUBTOTAL ALL FRC, DR, AND FS PROGRAMS:   | <b>\$512,500</b> |
| 15 | <b>MAXIMUM COUNTY OBLIGATION:</b>  | <b>\$512,500</b> |

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

17 5.14.2 CB shall provide FS Family Support Services for a  
18 minimum of forty (40) unduplicated FAMILIES annually. FS Family Support  
19 Services shall focus on a family centered approach to address crisis issues  
20 causing barriers to WTW participation activities; serve as a support to  
21 families while in crisis; and provide assistance to PARTICIPANTS in accessing  
22 community resources.

23 4. All other terms and conditions of the Agreement shall remain the same and  
24 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.

3  
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 EILEEN HAUBL  
12 CHIEF FINANCIAL OFFICER  
13 MISSION HOSPITAL REGIONAL MEDICAL CENTER

By: \_\_\_\_\_  
VALERIE BRAUKS  
DIRECTOR OF COMMUNITY SERVICES  
CHILDREN'S BUREAU OF  
SOUTHERN CALIFORNIA

14 Dated: \_\_\_\_\_

Dated: \_\_\_\_\_

15 SIGNED AND CERTIFIED THAT A COPY OF  
16 THIS AGREEMENT HAS BEEN DELIVERED TO  
17 THE CHAIR OF THE BOARD PER G.C.  
18 Sec. 25103, Reso 79-1535  
19 Attest:

By: \_\_\_\_\_  
MARICELA RIOS-FAUST  
CHIEF EXECUTIVE OFFICER  
HUMAN OPTIONS, INC.

Dated: \_\_\_\_\_

20 By: \_\_\_\_\_  
21 ROBIN STIELER  
22 Clerk of the Board of Supervisors  
23 County of Orange, California


24 Dated: \_\_\_\_\_

25 APPROVED AS TO FORM  
26 COUNTY COUNSEL  
27 COUNTY OF ORANGE, CALIFORNIA

28 By:   
DEPUTY

Dated: 10/25/17


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


3  
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: 10/25/17

Dated: \_\_\_\_\_


10  
11 By:   
12 EILEEN HAUBL  
13 CHIEF FINANCIAL OFFICER  
14 MISSION HOSPITAL REGIONAL MEDICAL CENTER

By:   
VALERIE BRAUKS  
DIRECTOR OF COMMUNITY SERVICES  
CHILDREN'S BUREAU OF  
SOUTHERN CALIFORNIA

15  
16 Dated: 10/26/17

Dated: 10.25.2017

17 SIGNED AND CERTIFIED THAT A COPY OF  
18 THIS AGREEMENT HAS BEEN DELIVERED TO  
19 THE CHAIR OF THE BOARD PER G.C.  
20 Sec. 25103, Reso 79-1535  
21 Attest:

By:   
MARICELA RIOS-FAUST  
CHIEF EXECUTIVE OFFICER  
HUMAN OPTIONS, INC.

Dated: 10/25/17

22  
23 By: \_\_\_\_\_  
24 ROBIN STIELER  
25 Clerk of the Board of Supervisors  
26 County of Orange, California

27  
28 Dated: \_\_\_\_\_

APPROVED AS TO FORM  
COUNTY COUNSEL  
COUNTY OF ORANGE, CALIFORNIA

By:   
DEPUTY

Dated: 10/25/17