AMENDMENT #1 TO CONTRACT WITH SIERRA NEVADA MEMORIAL HOSPITAL FOUNDATION (RES 17-305)

THIS AMENDMENT is executed this 1st day of February, 2018 by and between SIERRA NEVADA MEMORIAL HOSPITAL FOUNDATION and COUNTY OF NEVADA. Said Amendment will amend the prior agreement between the parties entitled PERSONAL SERVICES CONTRACT executed on June 20th, 2017 by Resolution No. 17-305.

WHEREAS, the parties desire to amend their agreement to add the job classification of Social Worker, in addition to Nurse, to perform Falls Prevention Services; and

NOW, THEREFORE, the parties hereto agree as follows:

- 1. This amendment shall be effective as of February 1, 2018.
- 2. That Exhibit "A", "Schedule of Services", shall be revised to the amended Exhibit "A" as attached hereto and incorporated herein.
- 3. That Exhbiit "B", "Schedule of Charges and Payments", shall be revised to the amended Exhibit "B" as attached hereto and incorporated herein.
- 4. That in all other respects the prior agreement of the parties shall remain in full force and effect except as amended herein.

COUNTY OF NEVADA: By: Honorable Edward C. Scofield Chair of the Board of Supervisors	CONTRACTOR: By: Kimberly Parker Executive Director P.O. Box 1810 Grass Valley, California 95945
ATTEST:	
By:	

Julie Patterson Hunter

Clerk of the Board of Supervisors

EXHIBIT "A" SCHEDULE OF SERVICES SIERRA NEVADA MEMORIAL HOSPITAL FOUNDATION

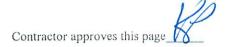
Sierra Nevada Memorial Hospital Foundation (herein referred to as "Contractor") shall provide to the County of Nevada Department of Social Services (herein referred to as "County") through its Falls Prevention Coalition of Nevada County and its Alzheimer's Outreach Program Early Detection Depression Screening and Fall Prevention Services to Nevada County seniors on how to reduce the risk factors correlated with falls and depression as a component of the County's Prevention and Early Intervention (PEI) Program.

It is mutually understood and agreed to between the parties as follows:

Sierra Nevada Memorial Hospital Foundation's Falls Prevention Coalition of Nevada County shall:

- Contract a .4 FTE (Full Time Equivalent) Nurse or Social Worker (hereinafter referred to as Nurse/ Social Worker Contractor) to:
 - o Conduct home visits to disabled and older, home bound adults in Western and Eastern Nevada County.
 - o Assess the consumer's mental health & alcohol & other drug (AOD) usage using a mental health/AOD screening tool.
 - o Provide for depression/AOD screening at the beginning of the Outreach and again within two months or 4 visits of the initial service.
 - Connect the consumer with a primary care physician, mental health provider, community based service organization, and Adult Protective Services as appropriate.
 - o Conduct follow up services to ensure that needed services are received.
 - o In conjunction with Older and Disabled Adult Outreach:
 - Meet as necessary with core provider group to assess on-going needs and strategies.
 - Maintain policies and procedures on the Social Outreach Program, where roles and partnerships are clearly stated with the "Friendly Visitor Program" and the Senior Outreach Nurses.
 - Provide training for the senior Friendly Visitor staff and volunteers as needed.
 - Participate quarterly in the Mental Health Services Act (MHSA) Prevention and Early Intervention Subcommittee meetings.
 - Submit all required performance reports to the Department of Social Services. The forms to be used are the *Individual Services Tracking Sheet*, Referral Form, Discharge Form, Outreach Activity Sheet, Demographic Form and the Mid-year and Annual Report.
 - Other outcomes to be tracked are:
 - 1. Of the new individuals seen in a quarter how many hadn't seen their primary physician in the past year?

- 2. Of the new individuals seen in a quarter how many scored at a moderate-severe risk using the pre-screening tool?
- 3. Of the follow-up visits completed how many scored lower using the post screening tool?
- 4. Of the X # of people served who scored moderate-severe on the prescreening tool, 50% will score lower on the post screening tool.
- 5. Of the X # of people served who haven't seen their primary provider in the past year, 50% will have made and kept an appointment.
- 6. Of the X # people served, 50% will report an increase in social activity or increased positive mood at time of follow up.
- Contract a Consultant for coordination of Falls Prevention Coalition of Nevada County (hereinafter referred to as Falls Prevention Coalition Consultant) to:
 - Organize and coordinate "Falls Prevention Week 2017" to educate seniors, people
 with disabilities and caregivers about the risks associated with falls, including
 isolation and depression, and how those risks can be mitigated.
 - Organize and facilitate monthly Falls Coalition Meetings and coordinate and supervise subcommittees.
 - o Present or coordinate the presentation of falls information and education to community groups.
 - o Serve as primary contact along with other SNMH Foundation staff for the purpose of donations, media and general advertising of the Falls Coalition mission.
 - Submit all required performance reports to the Department of Social Services.
 This includes a monthly accounting of time spent executing contracted activities and receipts for expenses related to the Falls Prevention Event.
- Contract with the Alzheimer's Outreach Program henceforth known as AOP to:
 - Alzheimer Outreach Coordinator will refer to the Social Outreach Program contacts exhibiting signs of memory impairment co-existing with depression or who have stated concerns about depression.
 - Social Outreach Nurse/ Social Worker will refer appropriate clients over the age of 60, who need the assistance of AOP and have a stated dementia diagnosis, to the Alzheimer's Outreach Coordinator.
 - Alzheimer Outreach Coordinator and Social Outreach Nurse/ Social Worker will coordinate home visits as appropriate to clients and their support systems.
 - AOP Coordinator or Yes I Can Coordinator will conduct at least three outreach presentations within the community related to education and resources for dementia, depression and falls.
 - Social Outreach Nurse/ Social Worker will refer appropriate clients to AOP's bimonthly support group.
 - A narrative report will be sent to the County monthly that tracks referrals received, referrals sent to the Social Outreach Nurse/ Social Worker, and the number of joint/collaborative visits and outcomes.



- Contracted Nurse/ Social Worker, Falls Prevention Consultant and Alzheimer's Outreach Coordinator shall:
 - o Meet with each other, Behavioral Health and the Department of Social Services as needed to discuss program strategies and effectiveness of interventions as needed.
 - Maintain and publicize a referral system that allows anyone in the community to refer disabled or older adults through an established phone line at Nevada County Adult Services.
 - o Partner with the Friendly Visitor Program, Elder Care Provider Coalition agencies, Nevada County Adult Services, Public Health and trained volunteers.
 - Maintain data base and keep statistics on outreach.

Sierra Nevada Memorial Hospital Foundation shall:

- Reimburse Nurse/ Social Worker Contractor, Falls Prevention Consultant, Alzheimer's Outreach Program Coordinator and Yes I Can Coordinator separately on a monthly basis as invoiced. Invoices shall be submitted within 10 days of the end of each month from July 2017 through June 30, 2018. Documentation of tasks performed and monthly invoice should be directed to the Executive Director.
- Payment will be made for services provided within 30 days of receipt of approved invoices. The total amount of invoices for Nurse/ Social Worker Contractor shall not exceed \$29,395, not including reimbursement for mileage. The total amount of invoices for Falls Prevention Consultant shall not exceed \$12,252. The total amount of invoices for the Alzheimer's Outreach Coordinator shall not exceed \$30,000.
- o Reimburse Nurse/ Social Worker Contractor at the current IRS rate for mileage as invoiced on a monthly basis up to a maximum of \$1,733.
- O Pay all invoices for Falls Prevention and Depression Screening activities as budgeted and submitted by Falls Prevention Coalition Coordinator up to a maximum of \$2,620. (Note: this is based upon actual expenses from previous Fall Prevention Week Event expenses and expenses of RSVP for paper, supplies, phone, and postage).
- o Invoice Department of Social Services monthly for reimbursement of expenses as reported in the approved budget.
- o Provide monthly back up documentation for invoiced amounts.

Joint Responsibilities:

- All parties will cooperate with one another in resolving any disputes and meet as needed for any problem solving committees.
- All parties shall comply with all State and Federal laws and regulations concerning safeguarding confidentiality of records and/or information.

 As applicable, all parties agree to comply with the requirements of 42 U.S.C. § 1171 et seq., Health Insurance Portability and Accountability Act of 1996 (HIPAA)/ HITECH, and its subsequent amendments, related to Protected Health Information (PHI), in performing any task or activity related to this agreement.

EXHIBIT "B" SCHEDULE OF CHARGES AND PAYMENTS SIERRA NEVADA MEMORIAL HOSPITAL FOUNDATION

The County shall pay to the Contractor for satisfactory performance of services as described in Exhibit "A", a maximum not to exceed \$82,004 for the contract term.

CONTINGENCY

Contract maximum is contingent and dependent upon the County's annual receipt of anticipated State/Federal Funds for contract services.

Reimbursement for services shall be based on the following:

Operating Budget

<u>Sierra Nevada Memorial Hospital Foundation/Falls Prevention Coalition of Nevada</u> County / Alzheimer's Outreach Program

Expenses

Contracted Nurse or Social Worker (.4 FTE) Contracted .4 FTE Nurse/ Social Worker Alzheimer's Outreach Coordinator Mileage Mileage Reimbursement for Nurse or Social Worker At current IRS rate at time incurred Direct Operating Expenses Fall Prevention Week Events Vendor fees, promotion, rentals RSVP Expenses for Falls Prevention Week activities Administrative Fee Costs associated with Sierra Nevada Memorial Foundation as the fiscal agent Total Expenses \$29,395 \$29,395 \$30,000	Personnel Falls Prevention Coordinator 12 months @ \$1,021/ month	\$12,252
Alzheimer's Outreach Coordinator Mileage Mileage Reimbursement for Nurse or Social Worker At current IRS rate at time incurred Direct Operating Expenses Fall Prevention Week Events Vendor fees, promotion, rentals RSVP Expenses for Falls Prevention Week activities \$1,000 Administrative Fee \$5,004 Costs associated with Sierra Nevada Memorial Foundation as the fiscal agent		\$29,395
Mileage Reimbursement for Nurse or Social Worker At current IRS rate at time incurred Direct Operating Expenses Fall Prevention Week Events Vendor fees, promotion, rentals RSVP Expenses for Falls Prevention Week activities \$1,000 Administrative Fee \$5,004 Costs associated with Sierra Nevada Memorial Foundation as the fiscal agent	Contracted .4 FTE Nurse/ Social Worker	
Mileage Reimbursement for Nurse or Social Worker At current IRS rate at time incurred Direct Operating Expenses Fall Prevention Week Events Vendor fees, promotion, rentals RSVP Expenses for Falls Prevention Week activities Administrative Fee Costs associated with Sierra Nevada Memorial Foundation as the fiscal agent \$1,733	Alzheimer's Outreach Coordinator	\$30,000
At current IRS rate at time incurred Direct Operating Expenses Fall Prevention Week Events \$2,620 Vendor fees, promotion, rentals RSVP Expenses for Falls Prevention Week activities \$1,000 Administrative Fee \$5,004 Costs associated with Sierra Nevada Memorial Foundation as the fiscal agent	Mileage	
Direct Operating Expenses Fall Prevention Week Events \$2,620 Vendor fees, promotion, rentals RSVP Expenses for Falls Prevention Week activities \$1,000 Administrative Fee \$5,004 Costs associated with Sierra Nevada Memorial Foundation as the fiscal agent	Mileage Reimbursement for Nurse or Social Worker	\$1,733
Fall Prevention Week Events Vendor fees, promotion, rentals RSVP Expenses for Falls Prevention Week activities \$1,000 Administrative Fee Costs associated with Sierra Nevada Memorial Foundation as the fiscal agent \$2,620	At current IRS rate at time incurred	
Fall Prevention Week Events Vendor fees, promotion, rentals RSVP Expenses for Falls Prevention Week activities \$1,000 Administrative Fee Costs associated with Sierra Nevada Memorial Foundation as the fiscal agent \$2,620	Direct Operating Expenses	
RSVP Expenses for Falls Prevention Week activities \$1,000 Administrative Fee \$5,004 Costs associated with Sierra Nevada Memorial Foundation as the fiscal agent		\$2,620
Administrative Fee \$5,004 Costs associated with Sierra Nevada Memorial Foundation as the fiscal agent	Vendor fees, promotion, rentals	
Costs associated with Sierra Nevada Memorial Foundation as the fiscal agent	RSVP Expenses for Falls Prevention Week activities	\$1,000
fiscal agent	Administrative Fee	\$5,004
Total Expenses \$82,004		
	Total Expenses	\$82,004

Contractor approves this page__/

Should the categories budgeted above change by more than ten percent (10%); a budget modification shall be submitted for approval. The Department of Social Services at its sole discretion shall determine if the change in the operating budget will continue to meet the outcomes of the Agreement.

Any computer equipment provided by County to Contractor for use for services pursuant to this Agreement shall remain the property of the County.

The Contractor shall bill a monthly rate for administrative fees, not to exceed \$417 per month up to a maximum of \$5,004 for the contract term.

The County will pay to the Contractor for expenses incurred and documented for the quarter being invoiced in accordance with the activities detailed in Exhibit "A".

Contractor shall submit monthly invoices to:

HHSA Administration Attn: DSS Fiscal 950 Maidu Avenue Nevada City, California 95959

Billing and Payment Exception:

By the tenth of June, Contractor shall provide an invoice for services rendered for the month of May. By the tenth of July, Contractor shall provide an invoice for services rendered for the month of June.