AMENDMENT #1 TO THE CONTRACT WITH COMMON GOALS, INC. (RESO 15-382)

THIS AMENDMENT is dated this 1st day of February 2016 by and between COMMON GOALS, INC. hereinafter referred to as "CONTRACTOR" and COUNTY OF NEVADA, hereinafter referred to as "COUNTY". Said Amendment will amend the prior agreement between the parties entitled Personal Services Contract as approved per Resolution No. 15-382.

WHEREAS, the CONTRACTOR provides drug testing and alcohol/drug treatment services for Child Protective Services for the contract term of July 1, 2015 through June 30, 2017; and

WHEREAS, the parties desire to amend their Agreement to 1) amend Exhibit "A" to reflect additional Transitional Housing Services provided, 2) increase the maximum contract price from \$130,000 to \$170,000 (an increase of \$40,000) due to additional services provided, and 3) amend Exhibit "B" to reflect this increase in maximum obligation.

NOW, THEREFORE, the parties hereto agree as follows:

COUNTY OF NEVADA

- 1. That Amendment #1 shall be effective as of February 1, 2016.
- 2. That Section (§2) Maximum Contract Price, shall be changed to the following: \$170,000.
- 3. That Exhibit "A", Schedule of Services, shall be revised to the amended Exhibit "A" as attached hereto and incorporated herein.
- 4. That Exhibit "B", Schedule of Charges and Payments, shall be revised to the amended Exhibit "B" as attached hereto and incorporated herein.
- 5. That in all other respects the prior agreement of the parties shall remain in full force and effect except as amended herein.

CONTRACTOR:

By: ______ By: _____ By: _____ Joseph J. Pestersen Chair, Board of Supervisors 256 Buena Vista Street, Suite 100 Grass Valley, California 95945 ATTEST: By: _____ Julie Patterson-Hunter Clerk of the Board of Supervisors

Exhibit "A" Schedule of Services Common Goals, Inc.

The County of Nevada ("County") and Common Goals, Inc. ("Contractor") agree to enter into a specific Contract for the provision of drug testing and alcohol/drug treatment related services for Child Protective Services ("CPS").

Contractor shall be responsible for provision of the following:

Treatment Services:

Substance Abuse Assessment Only (Written) \$ 250.00

(Includes 12-panel dip test & EtG, if required)

Concerned Party Interview Add \$ 30.00

Compiled by face-to-face interview & administration of the following assessment instruments:

SASSI-3 (Substance Abuse Subtle Screening Inventory)

ASI (Addiction Severity Index - Lite)

MAST (Michigan Alcohol Screening Test)

Beck Depression Inventory

DSM-IV-TR (Diagnostic Criteria)

Duration of face-to-face interview & assessment administration Approximately 2 - 2.5 hours

(Written assessment will include recommendations for level & duration of treatment and UA testing schedule)

Adult & Adolescent AOD Groups (1.5 hours) (Educational, Recovery & Processing)

\$ 29.39*

(Primary curriculum - Living in Balance and Matrix Intensive Outpatient

treatment materials)

AOD Individual Sessions (1 hour)

\$ 72.32*

AOD Counseling Staff consists of CAS-II, CAS, RAS and CASi Staffing complies at all times with ADP & Medi-Cal requirements

Therapy (Marriage & Family Therapist) (1 hour sessions)

\$ 75.00

Anger Management (Adult Men, Adult Women, Adolescent)
(Anderson & Anderson, Gaining Control of Ourselves and

| Oakwood Solutions, The Anger Management Program) | |
|--|------------|
| 3 month program | \$ 250.00 |
| 6 month program | \$ 500.00 |
| 12 month program | \$1,000.00 |

Anger Management Program conducted by certified Anger Management Facilitator.

Upon enrollment, each client is given a 105 question anger management Map developed by Oakwood Solutions to determine stress levels, aggression, assertiveness, deference, empathy and personal change orientation.

Program is presented on a rotating basis allowing client to enter at any time.

| Anger Management Assessment (Includes administration of Anger Management Map, 1 hour Interview and written report) | \$ 120.00 |
|---|--------------|
| PC1000 (Deferred Entry of Judgment - Adult) (Behavioral Health & Superior Court approved program) | \$ 500.00 |
| TIP (SIP) (Teen Intervention Program) (6-week educational program for 1st time minor offenders) | \$ 250.00 |
| Smoking Cessation Program (No Ifs & Or Butts - developed by Catholic Healthcare West - same program & same facilitator as Smoking Cessation Program presented at Sierra Nevada Memorial Hospital) | \$ 134.00 |

Batterers Program (52 weeks) \$1,300.00 (PC1203.097 Certified)

Contractor agrees to abide by the provisions of Attachment 1 hereto attached and incorporated herein as required of "contractors" and "subcontractors" under the State Department of Health Care Services (DHCS) Standard Agreement Number 14-90076 by and between DHCS and the County.

^{*}Shall not exceed approved Medi-Cal Rates - Subject to Change, Contractor shall notify the County of any approved changes in Medi-Cal rates and effective date, and County shall pay the adjusted rate.

Additionally, Contractor shall cooperate with the County for the collection of any California Outcomes Measurement System (CalOMS) or data/statistics as related to services rendered under this Agreement and/or is necessary for the completion of county or state report(s).

Clean and Sober Living Houses (ALSO KNOWN AS TRANSITIONAL HOUSING):

There are two Service Sites in Grass Valley. Both are four (4) bedroom houses set up to house eight (8) people with the capacity to hold nine (9) in extreme circumstances. Homes are gender-specific for men.

Program Summary

Transitional Housing is essential for clients for the continued stabilization in an alcohol and drug-free supervised safe environment. Transitional living services are available based on individual screening and availability. Homes are located in secure and serene environments in Grass Valley and have live-in house managers. Monthly bus passes are provided to those on Medi-Cal that don't have other transportation as well as transportation between 8a.m. and 5p.m. provided to places that the clients have to be such as court, work, essential meetings, job search, school, and doctor's appointments. The goal of these services is to allow clients to maintain a safe living environment while continuing their development of independent living skills under the supervision of Contractor's clinical and support staff. Expectations of this program include:

- Clients will maintain enrollment with Contractor
- Clients will remain clean and sober
- Clients will be actively developing the assets for self-sufficiency, including job skills, continued education, receiving medical attention for chronic issues, and attaining permanent and safe housing
- Clients will attend Housing Groups.

Admission and Readmission Criteria

Individuals must be in concurrent outpatient treatment with Contractor to maintain residence.

Housing Groups

There is a designated mandatory meeting one night per week for all residents. There is a Saturday morning meeting to go over conditions at the house and any problems or needs and prior approval must be obtained to be excused. Furthermore, there are two weekly meetings to go over progress the client is making towards transitioning out of Transitional Housing.

| Transitional Housing (monthly cost for Fiscal Year 15/16) Transitional Housing (monthly cost for Fiscal Year 16/17) | - 1 | 600.00 650.00 |
|---|-----|------------------|
| Housing Groups (cost per meeting) | \$ | 27.14 |

Drug Testing:

- Includes all testing supplies
- Toxicologist for all tests performed by San Diego Reference Laboratory (SDRL)
- Performing all required tests
- Reporting all results and no-shows immediately to CPS

- Tracking of all CPS clients referred to Contractor
- All necessary case management services
- Providing monthly itemized reports on services rendered

Drugs to Be Tested for:

12 Panel Dip (Non Medi-Cal Clients)

Methamphetamines, Amphetamines, Benzodiazepines, Cocaine, Opiates, Marijuana (Cannabinoids), Buprenorphine (Suboxone), Oxycodone, PCP, Barbiturates, Ecstacy (MDMA) and Methadone.

All tests include five (5) additional panels of Specific Gravity (SG), Creatinine (Cr), Nitrite (Ni), pH and Bleach (Bl) to detect adulteration.

Submission to Lab (Medi-Cal Clients)

Amphetamines, Methamphetamines, Pentobarbital, Phenobarbital, Secobarbital, Butalbital, Benzodiazepines, Cocaine, Morphine, Codeine, Hydrocodone, Hydromorphone, 6-Acetylmorphine, Oxycodone, Cannabinoids (THC)

Contractor's Drug Testing Methods:

- 1. Contractor's staff performing drug testing shall have been trained in appropriate chain of custody procedures and observation, and such training shall be documented in Contractor's personnel files; and
- 2. Common Goals, Inc. will contract with SDRL for GC/MS confirmation of disputed positive tests.

Results:

Specific results from drug tests will be reports to CPS as soon as possible after determined onsite, or as reported to Contractor from Toxicologist. Once results are determined, it is Contractor's responsibility to convey results to CPS immediately. Information will be provided by telephone, fax, e-mail, or on line as determined in writing by the CPS Program Manager. Common Goals, Inc. will provide a monthly update of all CPS client results and testing for the previous month.

Expert Testimony:

Contractor shall provide expert testimony on drug testing toxicology and methods as needed and arranged by CPS staff.

Random Testing

1. On site testing will be Pro Screen 12 Panel Dip

- 2. CPS clients will be required to call Common Goals, Inc. each day to determine selection for testing for that particular day. Failure of client to call will be determined as a failed test. Client must present to Common Goals, Inc. to submit a urine sample for testing by 5:45pm that day.
- 3. Lab tests to be performed by San Diego Reference Laboratory (SDRL)

Drug Testing Costs

| 12 Panel Dip - Pro Screen | \$18.00 |
|--------------------------------------|---------|
| 15 Panel Dip - Pro Screen | \$18.00 |
| 80 Hour Alcohol (ETG) | \$20.00 |
| Lab + ETG | \$35.00 |
| Dip + ETG | \$35.00 |
| BAC (Breath Alcohol Concentration) | \$15.00 |
| Additional test = SDRL Cost + 30% | |

Exhibit "B" Schedule of Charges and Payments Common Goals, Inc.

The maximum compensation to Contractor for satisfactorily performing services under this Agreement shall not exceed \$170,000 for the entire contract term of July 1, 2015 through June 30, 2017. The Contract amount shall not exceed \$85,000 for Fiscal Year 2015/16; and shall not exceed \$85,000 for Fiscal Year 2016/17. The maximum obligation of this Contract is contingent and dependent upon final approval of the State budget and the County's receipt of anticipated allocations to support these services for each fiscal year of services covered under this Agreement.

Contractor shall be reimbursed for all drug tests performed per the agreed upon costs as follows:

| 12 Panel Dip - Pro Screen | \$18.00 |
|------------------------------------|---------|
| 15 Panel Dip - Pro Screen | \$18.00 |
| 80 Hour Alcohol (ETG) | \$20.00 |
| Lab + ETG | \$35.00 |
| Dip + ETG | \$35.00 |
| BAC (Breath Alcohol Concentration) | \$15.00 |
| Additional test = SDRL Cost + 30% | 415.00 |

Contractor shall submit itemized monthly billing which identifies client, test performance, date of test and cost of test.

Contractor shall be reimbursed for all treatment services per the agreed upon costs as follows:

| Substance Abuse Assessment Only (written) Concerned Party Interview (additional) | \$250.00 \$ 30.00 |
|--|----------------------|
| Adult & Adolescent AOD Groups (1.5 hours) | 29.39* |
| AOD Individual Sessions (1 hour) | 72.32* |
| Therapy (Marriage & Family Therapist) – (1 hour session) | 75.00 |
| Anger Management (Adult Men, Adult Women, Adolescent) | |

| 3 month program | \$ | 250.00 |
|------------------|------|---------|
| 6 month program | \$ | 500.00 |
| 12 month program | \$1. | 00.000, |

Anger Management Assessment

\$ 120.00

(Includes administration of Anger Management Map, 1 hour Interview and written report)

| PC1000 (Deferred Entry of Judgment - Adult) (Behavioral Health & Superior Court approved program) | \$ 500.00 |
|---|------------------------|
| TIP (SIP) (Teen Intervention Program) (6-week educational program for 1st time minor offenders) | \$ 250.00 |
| Smoking Cessation Program (No Ifs & Or Butts - developed by Catholic Healthcare West - same program & same facilitator as Smoking Cessation Program presented at Sierra Nevada Memorial Hospital) | \$ 134.00 |
| Batterers Program (52 weeks) (PC1203.097 Certified) | \$1,300.00 |
| Transitional Housing (monthly cost for Fiscal Year 15/16) Transitional Housing (monthly cost for Fiscal Year 16/17) | \$ 600.00 \$ 650.00 |
| Housing Groups (cost per meeting) | \$ 27.14 |

^{*}Shall not exceed approved Medi-Cal Rates - Subject to Change, Contractor shall notify the County of any approved changes in Medi-Cal rates and effective date, and County shall pay the adjusted rate.

Contractor shall submit itemized monthly billing which identifies client, treatment provided, date of treatment and total cost by the 20th of the month following the month of services.

Contractor shall provide the most recent copy of the Contractor's reviewed or audited financial statements. Said financial statements shall be verified by an independent Certified Public Accountant. These financial statements together with the Certified Public Accountant's verification are due to the County within thirty (30) days of execution of the Contract. If Contractor, however, has another County Contract currently in effect and has previously provided this information to the County, it is not necessary for Contractor to re-submit these statements and verification under this Agreement.

To expedite payment, Contractor shall reference on their invoice the County Resolution Number assigned to their approved Contract.

BILLING AND PAYMENT

Contractor shall submit to County, for services rendered in the prior month, and in accordance with the reimbursement rate, a statement of services rendered to County and costs incurred that includes documentation to support all expenses claimed by the 20th of each month. County shall review the billing and notify the Contractor within fifteen (15) working days if an individual item or group of costs is being questioned. Contractor has the option of delaying the entire claim pending resolution of the cost(s). Payments of approved billing shall be made within thirty (30) days of receipt of a complete, correct and approved billing.

All billing/invoices should be sent to:

Nevada County Department of Social Services Attn: Fiscal Department P. O. Box 1210 Nevada City, CA 95959-1210

BILLING PROCESS EXCEPTION

By the tenth of June each year, Contractor shall provide an invoice for services rendered for the month of May. An invoice of services provided for the month of June shall be provided no later than the tenth of July.