



RESOLUTION No. 19-501

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF NEVADA

RESOLUTION AUTHORIZING EXECUTION OF AMENDMENT NO. 1 TO THE PERSONAL SERVICES CONTRACT WITH SIERRA NEVADA MEMORIAL HOSPITAL FOUNDATION TO INCREASE THE MAXIMUM CONTRACT PRICE FROM \$189,704 TO \$190,004 (AN INCREASE OF \$300) AND AMEND EXHIBIT "B" TO REFLECT THE CHANGE IN THE TOTAL MAXIMUM AMOUNT FOR THE CONTRACT TERM OF JULY 1, 2018 THROUGH JUNE 30, 2020 FOR THE PROVISION OF EARLY DETECTION DEPRESSION SCREENING AND FALLS PREVENTION SERVICES FOR NEVADA COUNTY SENIORS AS A COMPONENT OF THE COUNTY'S PREVENTION AND EARLY INTERVENTION (PEI) PROGRAM (RES. 18-339)

WHEREAS, per Resolution 18-339, the Board of Supervisors approved a renewal contract with Sierra Nevada Memorial Hospital Foundation to provide services to Nevada County seniors through its Falls Prevention Coalition of Nevada and its Alzheimer's Outreach Program, Early Detection Depression Screening and Falls Prevention Services; and

WHEREAS, Nevada County has one of the highest percentages of seniors in California and the contracted services provided will greatly benefit this segment of the County's population by helping seniors to maintain their functional independence; and

WHEREAS, the parties desire to amend their agreement to: 1) amend the Maximum Contract Price from \$189,704 to \$190,004 (an increase of \$300) due to increased mileage costs; and 2) amend Exhibit "B" Schedule of Charges and Payments, to reflect the increase in the maximum contract price.

NOW, THEREFORE, BE IT HEREBY RESOLVED by the Board of Supervisors of the County of Nevada, State of California, that Amendment No. 1 to the Personal Services Contract by and between the County and Sierra Nevada Memorial Hospital Foundation for the term of July 1, 2018 through June 30, 2020 in the maximum amount of \$190,004 for the provision of services pertaining to Early Detection Depression Screening and Falls Prevention for Nevada County seniors as a component of the County's Prevention and Early Intervention (PEI) Program, be and hereby is approved in substantially the form attached hereto, and that the Chair of the Board of Supervisors be and is hereby authorized to execute the Amendment on behalf of the County of Nevada.

Funds to be disbursed from account: 1589-50103-494-1101/521520.

PASSED AND ADOPTED by the Board of Supervisors of the County of Nevada at a regular meeting of said Board, held on the 10th day of September, 2019, by the following vote of said Board:

Ayes: Supervisors Heidi Hall, Edward Scofield, Dan Miller, Susan K. Hoek and Richard Anderson.

Noes: None.

Absent: None.

Abstain: None.

ATTEST:

JULIE PATTERSON HUNTER
Clerk of the Board of Supervisors

By: _____



Richard Anderson, Chair

9/10/2019 cc: DSS*
AC* (Hold)

10/16/2019 cc: DSS*
AC* (Release)
SNMHF

**AMENDMENT #1 TO CONTRACT WITH
SIERRA NEVADA MEMORIAL HOSPITAL FOUNDATION (RES 18-339)**


THIS AMENDMENT is executed this 10th day of September, 2019 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 July 10th, 2018 by Resolution No. 18-339.

WHEREAS, the parties desire to amend their agreement to increase the maximum contract price from \$189,704 to \$190,004 (an increase of \$300) due to increased mileage costs and amend Exhibit "B" to reflect the change in the total maximum amount.

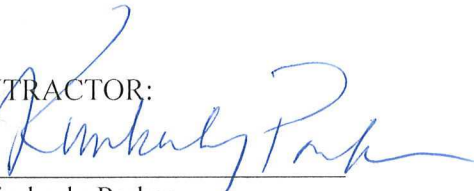
NOW, THEREFORE, the parties hereto agree as follows:

1. This amendment shall be effective as of June 1, 2019.
2. That Section (§2), Maximum Contract Price, shall be changed to the following: \$190,004
3. That Exhibit "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 Richard Anderson
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 "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 \$190,004 for the entire contract term. Of this total, the maximum amount shall not exceed \$94,852 for fiscal year 2018/19 and \$95,152 for fiscal year 2019/20.

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

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

Expenses	FY 18/19	FY 19/20
Personnel		
Falls Prevention Coordinator	\$25,000	\$25,000
24 months @ \$2,083.33/ month		
Contracted Nurse/ Social Worker (.4 FTE)	\$29,395	\$29,395
Alzheimer's Outreach Coordinator	\$30,000	\$30,000
Mileage		
Mileage Reimbursement for Nurse/ Social Worker	\$1,733	\$2,033
At current IRS rate at time incurred		
Direct Operating Expenses		
Fall Prevention Week Events	\$2,620	\$2,620
Vendor fees, promotion, rentals		
SNMHF Expenses for Falls Prevention activities	\$1,000	\$1,000
Office Supplies	\$100	\$100
Administrative Fee	\$5,004	\$5,004
Costs associated with Sierra Nevada Memorial Hospital Foundation as the fiscal agent		
Total Expenses	\$94,852	\$95,152

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 \$10,008 for the contract term.

The County will pay to the Contractor for expenses incurred and documented for the month 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.

