# FIRST AMENDMENT TO AGREEMENT BETWEEN THE COUNTY OF SAN MATEO AND SHELTER NETWORK

THIS FIRST AMENDMENT is entered into this	day of	, 20,
by and between the COUNTY OF SAN MATEO,	, hereinafter called "Co	ounty," and SHELTER
NETWORK, hereinafter called "Contractor";		•

### WITNESSETH:

WHEREAS, on February 10, 2009, the parties hereto under Agreement 61000-09-C215 entered into an agreement, (the "Original Agreement"), for the furnishing of shelter to qualifying offenders by Shelter Network to County as set forth in that Agreement; and

**WHEREAS**, it is now necessary and the mutual desire and intent of the parties hereto to amend the Original Agreement to increase funding effective January 1, 2009, in the amount of \$72,500, for a new maximum obligation of \$125,000, and to extend the term to January 1, 2009 through June 30, 2010.

**NOW, THEREFORE**, the Original Agreement is hereby amended to read as follows:

1. Section 3.A. Payments is hereby amended and restated in its entirety to read as follows:

### 3. Payments

### A. Maximum Amount

In full consideration of Contractor's performance of the services described in the Attachments herein, the amount that County shall pay for services rendered under this Agreement shall not exceed ONE HUNDRED TWENTY FIVE THOUSAND DOLLARS (\$125,000), for the contract term.

- 2. Exhibit A Description of Services is hereby deleted in its entirety and replaced with Exhibit A1, attached hereto.
- 3. Exhibit B Rates of Payment and Payments, is hereby incorporated and made a part of the Original Agreement and subject to all provisions therein.

### NOW, THEREFORE, IT IS HEREBY AGREED BY THE PARTIES THAT:

- 1. The Original Agreement between the parties dated February 10, 2009, is amended as set forth herein.
- 2. This First Amendment is hereby incorporated and made a part of the Original Agreement and subject to all provisions therein.
- 3. All provisions of the Original Agreement, as amended, unless expressly deleted, modified, or otherwise superseded in this First Amendment shall continue to be binding on all parties hereto.

This First Amendment, including any exhibits and attachments hereto, constitutes the entire understanding of the parties hereto with respect to the amendment to the parties' Original Agreement dated February 10, 2009, and correctly states the rights, duties, and obligations of each party as of this document's date. Any understandings, promises, negotiations, or representations between the parties concerning the amendment to the Original Agreement that are not expressly stated in this document are not binding. All subsequent modifications to this First Amendment shall not be effective unless set forth in a writing executed by both parties.

**IN WITNESS WHEREOF,** the parties hereto, by their duly authorized representatives, have affixed their hands to this First Amendment.

	COUNTY OF SAN MATEO
	By: Mark Church, President, Board of Supervisors, San Mateo County
	Date:
ATTEST:	
By: Clerk of Said Board	
	SHELTER NETWORK
	Michelle Jackson, Executive Director
	Signature
	Date:

### EXHIBIT A1 – DESCRIPTION OF SERVICES SHELTER NETWORK

In providing its services and operations, Contractor will maintain compliance with requirements of the AOD Policy and Procedure Manual including additions and revisions, incorporated by reference herein.

#### I. Services

Contract or will provide the following alcohol and drug treatment and recovery services:

### A. SACPA/OTP Funded Services

Contractor will provide alcohol and drug treatment and recovery services as follows:

- 1. Fee for Service Shelter beds will be made available for homeless SACPA/ OTP clients who are concurrently active in substance abuse treatment. Clients who are not enrolled in a treatment program for services are ineligible for a shelter bed.
- Shelter Network will coordinate and communicate with the client and treatment provider to assure coordinated case planning, care, and treatment discharge planning prior to completion of treatment. Immediate discharges for health and safety issues are excluded.
- 3. Shelter Network shall notify AOD of unplanned discharges immediately.
- 4. Services will include all standard shelter case management services. Shelter Network will coordinate case planning and linkages with treatment provider.
- 5. Clients receiving narcotic replacement therapy (NRT) will be assisted in daily dosing through the provision of transportation.

### B. AOD Housing Subsidy Services For Homeless Clients Contractor will provide alcohol and drug treatment and recovery services as follows:

- 1. Assess clients need and suitability for AOD housing subsidy and case management services.
- 2. Determine client/tenant history, self care abilities, financial management skills, and socialization skills.
- 3. Develop, with client input, a financial case plan for the use of housing subsidy finds and eventual self-sufficiency. The plan must be signed by the client, recorded on AOD Housing Subsidy Utilization Plan form, and shall be transmitted to AOD.
- 4. Meet with each client on a monthly basis to review progress towards goals; assure compliance with their housing maintenance plan, and facilitate needed case management assistance. Coordinate all necessary referrals and verify follow through by client.

5. Work closely with AOD to monitor progress and be an active participant in continued program development.

Permanently disabled clients with addiction issues must be referred to Shelter Plus Care prior to considering utilization of this funding source.

### C. Housing Subsidy for AOD Authorized Clients

- 1. Homeless clients referred by treatment providers will be case managed by their treatment provider.
- 2. Referring treatment provider will submit subsidy requests to AOD for approval.
- 3. Upon authorization, Contractor will provide fiscal support by issuing approved rent subsidy check directly to the landlord.

# EXHIBIT B Payment and Monitoring Procedures SHELTER NETWORK

#### I. PAYMENTS AND RATES OF PAYMENTS

In full consideration of the services provided by Contractor, the total amount for community-based partnership services contained in Exhibit A1 is ONE HUNDRED TWENTY- FIVE THOUSAND DOLLARS (\$125,000) for the contract term.

All payments under this Agreement must directly support services specified in this Agreement. From the aggregate funds, the County shall pay Contractor at the following rates:

### A. SACPA/OTP Funded Services

\$50.00 per day bed rate for a total amount not to exceed \$30,000 during the term of this Agreement.

### B. Housing Subsidy Funds

Assist homeless clients with alcohol and drug issues to obtain housing. Reimbursable expenses shall not exceed \$75,000 during the term of this Agreement. Administrative overhead for assistance to obtain housing is limited to a maximum of 3% of the overall amount (or, \$2,250).

### C. Case Management Funds

Case management will be provided by Shelter Network and is reimbursable at a maximum of \$35 per hour, including mileage, and any other costs.

### D. Contractor's Billing

Contractor will submit itemized bills and invoices statements by the tenth (10th) day of the month following the month during which services were provided. Bills and invoices will be submitted to the Alcohol and Drug Services office for approval and processing for payment. Billing for SACPA/OTP clients shall include:

- 1. Name and date of birth of client receiving SACPA/OTP funded services.
- 2. Treatment provider name.
- 3. Date(s) that services were provided.
- 4. Total amount billed per month.

### E. Housing Subsidy

Billing for Housing Subsidy clients shall include:

 Name and date of birth of consumer receiving subsidy, subsidy agreement/monthly record and requested amount. Identify the client payment, the subsidy payment and the total amount expected to be paid out over the subsidized period.

- 2. Monthly/Quarterly reporting of clients served, cost per client and whether clients are housed or un-housed.
- 3. Total amount requested for subsidy.
- 4. Quarterly amount requested for Administrative costs.
- 5. Total amount billed per month.

Contractor's annual budget, and line item narrative justification covering all contracted services under this Agreement is subject to review and approval by the San Mateo County Alcohol and Other Drug Services program liaison for each fiscal year.

## Attachment J

## County of San Mateo Contractor's Declaration Form

Contractor Name:	Shelter Network	Phone:	(650)685-5880	
Contact Person:	Michele Jackson, Executive Director	Fax:		
Address	1450 Chapin Avenue, 2nd Floor			
	Burlingame, CA 94010			
II FOLIAL RENE	FITS (check one or more boxes)			
	ontracts in excess of \$5,000 must treat spou	uses and	domestic partners equally as to	
employee benefits	· · ·		and the second second	
☐ Contractor of the contra	complies with the County's Equal Benefits O	rdinance	by:	
□ offering	g equal benefits to employees with spouses	and emp	ployees with domestic partners.	
☐ offering	g a cash equivalent payment to eligible emp	oloyees ir	lieu of equal benefits.	
☐ Contractor	does not comply with the County's Equal Be	nefits Ord	dinance.	
☐ Contractor i	s exempt from this requirement because:			
	actor has no employees, does not provide be	enefits to	employees' spouses, or the	
contra	ct is for \$5,000 or less.			
	actor is a party to a collective bargaining agr			
on	(date), and intends to offer equal benefits v	vnen said	agreement expires.	
III. NON-DISCRIN	IINATION (check appropriate box)			
Finding(s) o	of discrimination have been issued against C			
	Employment Opportunity Commission, Fair Employment and Housing Commission, or other			
	e entity. Please see attached sheet of pape	r explaini	ng the outcome(s) or remedy for	
the discrimi	nation.	·		
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correct, and that I am authorized to bind this entity contractually.

\_ Signature

Name