Incorporated August 5, 1889 416 N. Franklin Street Fort Bragg, CA 95437 Phone: (707) 961-2823 Fax: (707) 961-2802

January 28, 2015

Anna Shaw, Executive Director Mendocino Coast Hospitality Center P O Box 2168 Fort Bragg, CA 95437

#### Dear Anna:

Enclosed is an executed original of the Second Amendment to the Subrecipient Agreement between the City of Fort Bragg and Mendocino Coast Hospitality Center.

Please contact Housing and Economic Development Coordinator Jennifer Owen or me at (707) 961-2823 if you have any questions.

Sincerely,

Cindy Vanubunes Cynthia M. VanWormer, MMC

City Clerk

**Enclosures** 

cc: #297-13/A

Housing & Economic Development Coordinator (with Amendment via e-mail)

# SECOND AMENDMENT AGREEMENT WITH MENDOCINO COAST HOSPITALITY CENTER FOR CDBG PUBLIC SERVICE PROGRAM ACTIVITIES, CDBG #12-CDBG-8388

THIS SECOND AMENDMENT is made and entered into this 26<sup>th</sup> day of January, 2015, by and between the CITY OF FORT BRAGG, hereinafter referred to as "CITY", and MENDOCINO COAST HOSPITALITY CENTER, hereinafter referred to as "SUBRECIPIENT".

WHEREAS, the City's 2012 Community Development Block Grant (CDBG) #12-CDBG-8388 provides \$462,500 to operate the Homeless Mental Health Intervention Program (HMHIP) for approximately thirty months, until September 30, 2015; and

WHEREAS, the Program is operated by Mendocino Coast Hospitality Center (MCHC) and Mendocino Coast Clinics per Subrecipient Agreements with each entity; and

WHEREAS, Client services are instigated by MCHC, and the number of clients eligible for the program has significantly exceeded projections. In addition, client needs have been different than anticipated in the original program budget, with less need for expensive direct medical services and increased need for case management, ancillary medical services and counseling; and

**WHEREAS**, the operators agree that remaining budget of \$144,789 should be moved from Mendocino Coast Clinics to MCHC.

NOW, THEREFORE, for the aforementioned reasons and other valuable consideration, the receipt and sufficiency of which is acknowledged, City and Subrecipient hereby agree that the Subrecipient Agreement for CDBG Public Service Program Activities between the CITY and SUBRECIPIENT dated March 26, 2012, as amended by the First Amendment to same dated January 29, 2013, is hereby amended as follows:

## SECTION I – SCOPE OF SERVICES; SUBSECTION A – PROGRAM DELIVERY:

The Scope of Services has been amended to add Outreach Events and a Substance Abuse Counselor, as shown on Exhibit A – Amendment 2 attached and made a part of this Agreement.

### SECTION I – SCOPE OF SERVICES; SUBSECTION D – STAFFING:

The Scope of Services has been amended to increase the Outreach Case Manager by 1.0 FTE to a total of up to 2.0 FTE position and add a Substance Abuse Counselor at a level up to 1.0 FTE Position, as shown in Exhibit A – Amendment 2 attached and made a part of this Agreement.

### SECTION II – BUDGET:

The budget allocated to Subrecipient for the Fort Bragg Homeless Mental Health Intervention Program is increased by \$144,789 and limited to \$285,370, as shown on Exhibit A – Amendment 2 attached.

4. Except as expressly amended herein, the Subrecipient Agreement, between the CITY and SUBRECIPIENT dated March 26, 2012, as amended by the First Amendment to same dated January 29, 2013, is hereby reaffirmed.

IN WITNESS WHEREOF, the parties have executed this Amendment the day and year first above written.

CITY OF FORT BRAGG:

By: \_\_\_\_\_ Linda/Ruffing

City Manager

SUPRECIPIENT:

Anna Shaw, Executive Director Mendocino Coast Hospitality Center

ATTEST:

Cynthia M. VanWormer, MMC, City Clerk

APPROVED AS TO FORM:

see attached

Samantha W. Zutler, City Attorney

4. Except as expressly amended herein, the Subrecipient Agreement, between the CITY and SUBRECIPIENT dated March 26, 2012, as amended by the First Amendment to same dated January 29, 2013, is hereby reaffirmed.

IN WITNESS WHEREOF, the parties have executed this Amendment the day and year first above written.

SUPRECIPIENT:				
Anna Shaw, Executive Director Mendocino Coast Hospitality Center				

#### **EXHIBIT A - AMENDMENT 2**

## Homeless Mental Health Intervention Program (HMHIP) Scope of Work and Budget As of January 1, 2015

	As of January	1, 2010	-		_			
			Original Budget (30 months)		Amend 2 Change		Amend 2 Budget Eff. 1/1/2015	
	Description	Unit/Quantity						
Mendocino Coast Hospitali	ty Contar Tacke							
Training: screening tool	Supplies, misc. for "training of		-					
	trainers"	LS	\$	250	\$	-	S	250
Outreach Case Manager	Direct client engagement, management, contact, liaison	Original budget 1 FTE; Amend. 1: up to 2 FTE	\$	96,720	\$	54,163	\$	150,883
NEW: Outreach events	Homeless Summit(s)	LS			\$	28,229	\$	28,229
NEW: Substance Abuse	Case management team; conducts							
Counselor	assessments; treatment plan							0.4.000
	development; treatment groups	NTE 1.0 FTE	\$	-	\$	24,000	\$	24,000
Direct support	Incentives, supplies to increase &		_	04.000		40.700	d	00.700
	insure contact	Monthly	\$	21,000	\$	18,700	<u>\$</u>	39,700
Vehicle expense (IRS rate)	Client transport & outreach	Per mile	\$	7,215	\$	(5,344)	\$	1,871
Supplies/phone/misc.	Other direct program costs	LS	\$	2,500	\$	1,500	\$	4,000
Case management/	Program supervision & case							
supervision/support	management participation	Hours/'.1 FTE	\$	12,896	\$	23,541	\$	36,437
						111 700	^	000.000
Sub-total MCHC	;		\$	140,581	\$	144,789	\$	285,370
	Total for Grant Ter		otal for	Ch	ange Orig	REVISED		
			ant Term		d to 1/1/15	Bu	dget Eff	
		Unit/Quantity	(30	months)		Bud	1	/1/2015
MCC Tasks:	7				Lacurousetts	-		
		T	1					
Patient Advocate	Client linkers to entitlement programs							
	Client linkage to entitlement programs,	Hourly Originally .8 FTE	ď	94.000	d.	(GE 900)	\$	17,200
	benefits, and patient services	now .4 FTE	\$	84,000	\$	(66,800)	Φ	17,200
Mental Health Counseling	Case management team; conducts							
	assessments; treatment plan							
	development; treatment groups; 1:1							
	services	Hourly/.5 FTE	\$	105,300	\$	(57,300)	\$	48,000
Substance Abuse Counselor	Case management team; conducts							
	assessments; treatment plan						1	
	development; treatment groups; 1:1	Hourly: originally .5					i	
	services	FTE, now .4 FTE	\$	105,300	\$	(80,300)	\$	25,000
Psychiatric consultation	Oversight and clinical supervision of						-	·
a sychiatric consultation	mental health counselor; case	and the same of th						
	management resource & referral; and	Originally 2 hours/						
		month, now 8 hours/		5,460	4	(460)	\$	5,000
	patient care services	month	\$	5,460	\$_	(400)	Ψ	3,000
Primary care consultation	Case management referral and	Amend 2 deletes 1		0.700		(0.700)	ı.	
	resource; patient care services	hour/month	\$	2,730	\$_	(2,730)	\$	ia :
Psych testing		Per Amend 2: 2 Panels	4	5,750	0	15,850	\$	21,600
		per month	\$					2,000
Supplies/phone/misc.		Annual	4	2,500	\$	(500)	\$	2,000
NEW: Direct support	Incentives, supplies to increase &		١.			4.050		4 050
	insure contact	LS	\$	-	\$	1,350	\$	1,350
NEW: Additional client services	Breathing, nutritional, and TBD client							
	services	8 hours per month	\$	-	\$	5,600	\$	5,600
NEW: Program coordinator/Case	Dedicated program coordinator/							
Manager	medical & BH liaison	1.0 FTE	\$	,	\$	33,280	\$	33,280
			14		-4	00,200	Ψ_	00,200
Program supervision	Personnel & other allocated program	Up to .25 FTE +		10.070	1	7.004		10 100
	administrative costs	allocated costs	\$	10,879	\$_	7,221	\$	18,100
0.1.4.4.1800			ø	224 040	¢	1444 790)	¢	177 120
Sub-total MCC	,		\$	321,919	\$_	(144,789)	Þ	177,130
Total			\$	462,500	\$		S	462,500
I T VAL					-		June 10 10 10 10 10 10 10 10 10 10 10 10 10	