

SECOND AMENDMENT

This Amendment made and entered into this 30 day of April, 2018 by and between PINELLAS COUNTY, a political subdivision of the State of Florida, hereinafter referred to as "County," and Suncoast Center, Inc., St. Petersburg, FL hereinafter referred to as "Contractor,"

WITNESSETH:

WHEREAS, the County and the Contractor entered into an agreement on May 10, 2016, pursuant to Pinellas County Contract No. 156-0045-L(JA) (hereinafter "Agreement") pursuant to which the Contractor agreed to provide Behavioral Health High Utilizer program services for County; and

WHEREAS, Section Twenty-One (21) of the Agreement permits modification by mutual written agreement of the parties; and

WHEREAS, the County and the Contractor now wish to modify the Agreement in order to extend the term pursuant to Section Four (4)(B), at the same terms and conditions; and

WHEREAS, the County and the Contractor now wish to modify any portions of the program as shown in Exhibit A – Statement of Work, as necessary, based upon results of the initial two (2) program years.

NOW THEREFORE, the parties agree that the Agreement is amended as follows:

1. The Agreement is hereby extended beginning May 10, 2018 and continuing to May 9, 2019, unless terminated or canceled as provided therein at an annual budget of \$650,862.00.
2. Under Exhibit A, Statement of Work, Services to be Performed, page 10 of 33, add the following:

W. Year 3 Services:

The Contractor will continue Pilot Team activities and manage the project to achieve documented objectives and outcomes.

a. Deliverable: Conduct individualized service planning with the client and identified service providers, monitor progress and outcomes of clients, and adjust housing and service plans, as necessary. Report on project and client progress.

b. Deliverable: Procure and deliver identified services to clients that are necessary to achieve the client's service plan goals. Report on services engaged by client noting successful connection to services.

- c. Deliverable: Re-engage clients who exit the Pilot or who fail to complete, or deviate from, housing and service plans. Report on client status in program and efforts for re-engagement.
 - d. Deliverable: Coordinate client engagement in the Pinellas County Health Program (PCHP) for all eligible clients participating in the Pilot. Report on number of individuals currently enrolled in PCHP and/or connected by Pilot Team.
 - e. Deliverable: Coordinate with service providers to ensure continuity and avoid duplication of effort. Report on coordination efforts.
 - f. Deliverable: Manage Pilot client data and ensure proper tracking of services, service connections, and client outcomes. Report on data system and ongoing information management across providers.
- X. The PCET project committee will identify and address Two (2) System Issues impeding the reduction in the number of system high utilizers.
- a. Deliverable: Hold monthly system coordination meetings and facilitate cross-system communication and data sharing with local providers and entities. Provide copies of meeting minutes.
 - b. Deliverable: Identify, document and develop potential solutions for two additional System Issues that will promote client access to services and augment the County behavioral health continuum of care.
- Y. The Contractor will implement their strategy that leverages community partnerships, promotes cost-saving measures and is based on principles of long-term project sustainability.
- Deliverable: Implement long-term care strategy for the high utilizer population that is focused on maintaining client stability as well as leveraging existing community resources to provide client services, when possible. This should include, but is not limited to:
- i. Identify activities/services for this population to utilize as they transition to sustainable community resources and treatment services (i.e. counseling groups, housing support, health services, substance abuse services, disability advocates, SOAR, and or vocational programs).

- ii. Leverage partnerships with community agencies to secure housing and wrap-around services for clients.
- iii. Collaborate with community agencies to reduce barriers that may prohibit this population from accessing these services and agencies.
- iv. Identify the current and potential future gaps that may prevent this population from achieving long-term stability.
- v. Document evidence of collaboration with community partners that demonstrates the service needs of the target population have been met. Facilitate agreements, memorandums of understandings, public-private partnerships, and subcontracts with additional providers to meet client needs.
- vi. Document leveraged community partnerships which achieve project cost savings (e.g. 2nd year spending compared to savings from new partnerships.) Include opportunities to maximize additional community resources that could be used to supplement and sustain Pilot activities (i.e. identify connections to rapid rehousing opportunities; food banks; etc.). Provide a document highlighting these cost savings.
 - Any change to Pilot Team structure should be submitted to Pinellas County for written authorization.

3. Under Exhibit A, Statement of Work, Outcomes and Evaluation (Short-term), page 13 of 33, add:

Year 3:

- Clients engaged and enrolled in Pilot program
- Homeless clients housed within one week of entry, by type of housing (transitional, permanent, permanent supportive housing, etc.)
- Clients receiving LOCUS or other approved assessment within one week of entry
- Clients receiving VI-SPDAT from trained provider within one week of identification in the community
- Clients receiving housing plans and service plans within one week of entry
- Clients receiving treatment as indicated in their service plan
- Clients receiving indicated wrap-around services:
 - Financial Assistance
 - Self-Sufficiency Skill training
 - Employment training
 - Budgeting and financial literacy training
- # of system issues documented
- # of community partnerships developed
- Amount of project cost savings achieved as a result of leveraging community partnerships and resources

4. Under Exhibit A, Statement of Work, Outcomes and Evaluations (Intermediate), page 13 of 33, add:

Year 3:

- Reduction in #/% of clients arrested one (1) and three (3) months post pilot entry
- Reduction of # of jail bed days one (1) and three (3) months post pilot entry
- Reduction in # /% of clients with Baker Acts one (1) and three (3) months post pilot entry
- Reduction in total # of Baker Acts 1 and 3 months post pilot entry
- Reduction in # / % of clients hospitalized one (1) and three (3) months post entry
- Reduction in # / % of clients with emergency room visits one (1) and three (3) months post entry
- # and % of clients enrolled in training/skills programs (e.g. Vincent House)

5. Under Exhibit A, Statement of Work, Outcomes and Evaluations (Long-term), page 13 of 33, add:

Year 3:

- Number and percentage of clients who successfully complete treatment as indicated in the service plan
- Increase in # and % of clients in permanent or permanently supported housing longer than six (6) months
- Reduction in # / % of clients arrested six (6) months post entry
- Reduction in # / % of clients with Baker Acts six (6) months post entry
- Reduction in clients admitted to detox at (6) months post entry
- Reduction in # / % of clients hospitalized six (6) months post entry (to be defined)
- Increase in # / % of clients stable in community/self-sufficient (e.g. receiving Supplemental Security Income/Social Security Disability Insurance (SSI/SSDI))
- Increase in # /% of clients employed in paid positions
- Increase in # / % of clients engaged in meaningful, productive activity (e.g., school, day services, volunteer work)

6. Incorporate Exhibit C – Revised Rate Schedule, attached hereto, to serve as the Year 3 Rate Schedule.

7. Except as changed or modified herein, all provisions and conditions of the original Agreement and any amendments thereto shall remain in full force and effect.

Signature Page to follow

Each Party to this Agreement represents and warrants that: (i) it has the full right and authority and have obtained all necessary approvals to enter into this Agreement; (ii) each person executing this Agreement on behalf of the Party is authorized to do so; (iii) this Agreement constitutes a valid and legally binding obligation of the Party, enforceable in accordance with its terms.

IN WITNESS WHEREOF the parties herein have executed this First Amendment as of the day and year first written above.

PINELLAS COUNTY, FLORIDA
by and through its County Administrator
~~XXXXXXXXXXXXXXXXXXXX~~



~~XXXXXX~~ Mark S. Woodard

SUNCOAST CENTER, INC.:



Authorized Signature

Barbara Daire

Printed Authorized Signature


President & CEO

Title Authorized Signature

ATTEST:
~~XXXXXXXX~~

Della Klug

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APPROVED AS TO FORM
By: 

Office of the County Attorney

SECOND AMENDMENT

EXHIBIT C – REVISED RATE SCHEDULE

Behavioral Health High Utilizer Pilot Project

**Personnel
Position**

	FTE	Salary	Amount
Psychiatrist	0.151	\$239,200	\$36,030
Case Manager	2	\$35,620	\$71,240
Boley Case Manager -housing specialist	1	\$35,000	\$35,000
Therapist-Program Manager	.98	\$60,000	\$58,888
Therapist	0.5	\$47,008	\$23,504
RN nurse Case manager	.96	\$45,000	\$43,368
ARNP nurse Case Manager	0.13	\$112,008	\$14,561
Total Personnel			\$282,591
Fringe Benefits			\$68,618
Total Personnel			\$351,209
Total incidental cost			\$175,635
Total Operating			\$64,850
Total direct cost			\$591,693
Administration 10% .			\$59,168
Total			\$650,862.00

Project Budget

Contractor will adhere to this budget guidance. All budget modifications must be approved in writing by the County. Budget modifications up to ten percent (10%) of the Pilot’s overall budget, made across budget categories, but not increasing or decreasing the Pilot’s overall budget total, may be made through written authorization of the Human Services Director in order to ensure effective operations. The County may seek input from the Work Group for significant changes.

To ensure effective operations, program funding may be advanced up to two-twelfths of the Pilot budget, not to exceed \$160,740.34, for program cash flow. Compensation will be made on a cost reimbursement basis, payable upon submittal of an invoice as required herein. Invoices will include accompanying reconciliation of expenditures and Pilot funding balance. Cost reimbursements may be held in part or in whole by COUNTY through its Human Services Department to ensure ongoing reconciliation and close out of program. Final reconciliation and reimbursement of unspent funds are due to the COUNTY within fifteen (15) days of the end of the contract term.

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EXHIBIT C – REVISED RATE SCHEDULE

Invoicing must include actual expenditure detail. Incidental costs shall include expenditures authorized for client treatment, stabilization and/or self-sufficiency, such as housing and utility deposits or costs, furniture, food, or other items as approved by prior written agreement of the parties. County may request additional invoice detail for service and payment verification associated with the Pilot including client detail, services by client, and service providers. Any identifiable information received by County as payor for the program will be restricted and not released. Expanded program budget detail may be requested for contracting purposes.

Non-expendable property will be dedicated for the sole use of the program. In the event of misuse or early program termination, property will revert to Pinellas County.