

AMENDMENT I TO AGREEMENT

THIS AMENDMENT, hereinafter referred to as Amendment I, is made and entered into this 17th day of April, 2018, by and between the **COUNTY OF FRESNO**, a Political Subdivision of the State of California, hereinafter referred to as "COUNTY," and each contractor listed in Revised Exhibit A "Contractors List", attached hereto and by this reference incorporated herein,, collectively hereinafter referred to as "CONTRACTORS", and such additional CONTRACTORS as may, from time to time during the term of this Agreement, be added by the COUNTY. .

WHEREAS, the parties entered into that certain Agreement, identified as COUNTY Agreement No. A-17-073, effective March 7, 2017, hereinafter referred to as "COUNTY Agreement", to provide Psychosocial Assessment to Resource Family Approval households; and

WHEREAS, the parties desire to amend the Agreement regarding changes as stated below.

NOW, THEREFORE, in consideration of their mutual promises, covenants and conditions, hereinafter set forth, the sufficiency of which is acknowledged, the parties agree as follows:

1. That existing COUNTY Agreement beginning on Page Two (2), Section One (1), Line Five (5), with the word "The" and ending on Line Six (6) with the word "RESPONSIBILITIES" be deleted in its entirety and the following inserted in its place:

"The COUNTY shall be responsible for services as set forth in the "Summary of Services", as identified in Revised Exhibit B, under the Heading COUNTY RESPONSIBILITY."

2. That existing COUNTY Agreement beginning on Page Two (2), Section Two (2), Line Fifteen (15), with the word "This" and ending on Line Sixteen (16) with the number "2018" be deleted in its entirety and the following inserted in its place:

"This Agreement shall become effective March 7, 2017, and shall terminate on June 30, 2019. This Agreement may be extended for two (2) additional consecutive twelve (12) month periods upon the written approval of both parties no later than thirty (30) days prior to the first day of the next twelve month extension period. The DSS Director, or designee, is authorized to execute such written approval on behalf of COUNTY based on CONTRACTOR's satisfactory performance."

1 3. That existing COUNTY Agreement beginning on Page Three (3), Section Four (4), Line
2 Nineteen (19), with the word “The” and ending on Page Four (4), Line Four (4) with the number
3 (\$1,987,500)” be deleted in its entirety and the following inserted in its place:

4 “The COUNTY agrees to pay the CONTRACTORS and the CONTRACTORS agree to receive
5 compensation as follows: One Thousand Five Hundred Thirty and No/100 Dollars (\$1,530.00)
6 per Psychosocial Assessment of an English speaker and One Thousand Eight Hundred Thirty
7 and No/100 Dollars (\$1,830.00) per Psychosocial Assessment of a non-English speaker.

8 Payment shall be made once a completed Psychosocial Assessment has been submitted to the
9 COUNTY. In no event shall compensation for services performed under this Agreement by all
10 CONTRACTORS collectively from March 7, 2017 through June 30, 2017 be in excess of Five
11 Hundred Ninety-Six Thousand Two Hundred Fifty and No/100 Dollars (\$596,250.00). For each
12 subsequent twelve (12) month period of this Agreement, in no event shall compensation for
13 services performed under this Agreement by all CONTRACTORS collectively be in excess of
14 One Million Three Hundred Ninety-One Thousand Two Hundred Fifty and No/100 Dollars
15 (\$1,391,250.00). In no event shall compensation for services performed under this Agreement
16 by all CONTRACTORS collectively during the term of this Agreement be in excess of Six
17 Million One Hundred Sixty One Thousand Two Hundred Fifty and No/100 Dollars
18 (\$6,161,250).”

19 4. That existing COUNTY Agreement beginning on Page Eleven (11), Section Seventeen
20 (17), Line Eleven (11), with the word “All” and ending on Page Eleven (11), Line Nineteen (19) with
21 the word “misdemeanor” be deleted in its entirety and the following inserted in its place:

22 “All services performed by CONTRACTOR under this Agreement shall be in strict
23 conformance with all applicable Federal, State of California, and/or local laws and regulations
24 relating to confidentiality including, but not limited to: California Welfare and Institutions
25 Code Sections 10850 and 14100.2; the CDSS Manual of Policies and Procedures, Division 19-
26 0000; and the California Department of Health Care Services (DHCS) Medi-Cal Eligibility
27 Procedures Manual, Section 2H. In addition, all services performed by CONTRACTOR under
28 this Agreement shall also be in conformance with the Medi-Cal Data Privacy and Security

1 Agreement between the California DHCS and the County of Fresno (hereinafter referred to as
2 “the Medi-Cal Data Agreement”) that is then in effect, which is by this reference incorporated
3 herein. The current Medi-Cal Data Agreement is available upon request or can be viewed at:
4 <http://www.co.fresno.ca.us/MediCalPrivacy/>. The purpose of this section is to assure that all
5 applications and records concerning program recipients shall be kept confidential and shall not
6 be opened to examination, publicized, disclosed, or used for any purpose not directly connected
7 with the administration of the program. CONTRACTOR shall inform all of its employees,
8 agents, officers, and subcontractors of this provision; and that any person knowingly and
9 intentionally violating this provision is guilty of a misdemeanor.”

10 5. That all references to Exhibit A shall be changed to read “Revised Exhibit A”.

11 6. That all references to Exhibit B shall be changed to read “Revised Exhibit B” attached
12 hereto and incorporated herein by reference.

13 The Agreement, as hereby amended, is ratified and continued. All provisions, terms, covenants,
14 conditions and promises contained in the Agreement and not amended herein shall remain in full force
15 and effect. This Amendment I shall become effective July 1, 2018.

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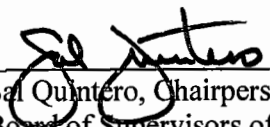
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EXECUTED AND EFFECTIVE as of the date first above set forth.

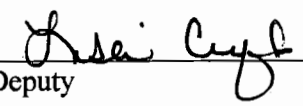
COUNTY OF FRESNO

By: 

Sal Quintero, Chairperson of the
Board of Supervisors of the
County of Fresno

ATTEST:

Bernice E. Seidel
Clerk of the Board of Supervisors
County of Fresno, State of California

By: 

Deputy

FOR ACCOUNTING USE ONLY:

Fund/Subclass: 0001/10000

Organization: 56107001

Account/Program: 7870

**PLEASE SEE ADDITIONAL
SIGNATURE PAGES ATTACHED**

RESOURCE FAMILY APPROVAL ASSESSMENT CONTRACTOR:

IN WITNESS WHEREOF, the parties hereto have executed this Agreement this 17th day
of April, 2018.

NAME OF ORGANIZATION: Aspiranet

By

Print Name

Title

Chairman of the Board, or President,
or any Vice President or Owner, or Director

Date

By

Print Name

Title

Secretary (of Corporation), or any Assistant
Secretary, or Chief Financial Officer, or Chief
or any Chief Accountant, or any Assistant
Treasurer

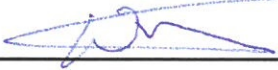
Date

Mailing Address: 1320 E. Shaw Ave, Suite 140, Fresno, CA 93710
Contact: Vernon Brown, Chief Executive Officer
Telephone: (650) 866-4080
Email address: vbrown@aspiranet.org
Service Site Address: 1320 E. Shaw Ave, Suite 140, Fresno, CA 93710

RESOURCE FAMILY APPROVAL ASSESSMENT CONTRACTOR:

IN WITNESS WHEREOF, the parties hereto have executed this Agreement this 17th day
of April, 2018.

NAME OF ORGANIZATION: Family Connections Christian Adoptions

By 

Print Name Wayne Mott

Title Executive Director
Chairman of the Board, or President,
or any Vice President or Owner, or Director

Date 3-16-18

By 

Print Name Linda Koogler

Title Secretary
Secretary (of Corporation), or any Assistant
Secretary, or Chief Financial Officer, or Chief
or any Chief Accountant, or any Assistant
Treasurer

Date 3-16-18

Mailing Address: 1120 Tully Road, Modesto, CA 95350
Contact: Wayne Mott, Executive Officer
Telephone: (209) 524-8844
Email address: waynemott@fcadoptions.org
Service Site Address: 1120 Tully Road, Modesto, CA 95350

1 **RESOURCE FAMILY APPROVAL ASSESSMENT CONTRACTOR:**

2
3 IN WITNESS WHEREOF, the parties hereto have executed this Agreement this 17th day
4 of April, 2018.

5
6 **NAME OF ORGANIZATION:** Golden State Family Services

7
8
9 By Kluu

10
11 Print Name Kristin Withrow

12
13 Title Admistrator
14 Chairman of the Board, or President,
or any Vice President or Owner, or Director

15 Date March 15, 2018

16 By Emccree

17
18 Print Name Erin mCcreeny

19
20 Title CFO
21 Secretary (of Corporation), or any Assistant
22 Secretary, or Chief Financial Officer, or Chief
or any Chief Accountant, or any Assistant
Treasurer

23 Date March 15, 2018

24
25 Mailing Address: PO Box 130, Kingsburg, CA 93631
26 Contact: Kristin Withrow, Adoptions Administrator/Program Director
27 Telephone: (559) 389-0685
28 Email address: kristinn@gsfs.org
Service Site Address: 4253 North Valentine Ave, Fresno, CA 93722.

RESOURCE FAMILY APPROVAL ASSESSMENT CONTRACTOR:

IN WITNESS WHEREOF, the parties hereto have executed this Agreement this 17th day
of April, 2018.

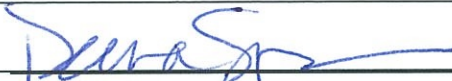
NAME OF ORGANIZATION: Koinonia Family Services

By 

Print Name Sam Golden

Title Executive Director
Chairman of the Board, or President,
or any Vice President or Owner, or Director

Date 3/19/2018

By 

Print Name Deena Spann

Title Accounting Director
Secretary (of Corporation), or any Assistant
Secretary, or Chief Financial Officer, or Chief
or any Chief Accountant, or any Assistant
Treasurer

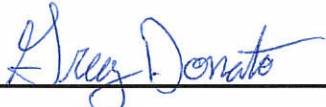
Date 3/19/2018

Mailing Address: PO Box 1403, Loomis, CA 95650
Contact: Sam Golden, Executive Director
Telephone: (916) 652-5802
Email address: contracts@kfh.org
Service Site Address: 1551 East Shaw Ave, Ste. 103, Fresno, CA 93711

1 **RESOURCE FAMILY APPROVAL ASSESSMENT CONTRACTOR:**

2
3 IN WITNESS WHEREOF, the parties hereto have executed this Agreement this 17th day
4 of April, 2018.

5
6 **NAME OF ORGANIZATION:** North Star Family Center

7
8
9 By 

10
11 Print Name Greg Donato

12
13 Title President

14 Chairman of the Board, or President,
or any Vice President or Owner, or Director

15 Date 3.19.18

16 By _____

17
18 Print Name  

19
20 Title SECRETARY SECRETARY

21 Secretary (of Corporation), or any Assistant
22 Secretary, or Chief Financial Officer, or Chief
or any Chief Accountant, or any Assistant
Treasurer

23 Date 03.19.18

24
25 Mailing Address: 6760 N. West Ave., Suite 101, Fresno, CA 93711

26 Contact: Mary Dela Torre, Chief Executive Officer

27 Telephone: (559) 226-2273

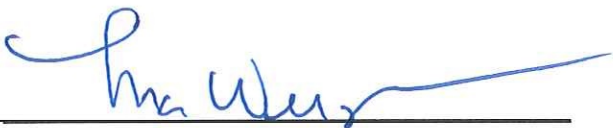
28 Email address: mary@northstarfamilycenter.org

Service Site Address: 6760 N. West Ave., Suite 101, Fresno, CA 93711

1 **RESOURCE FAMILY APPROVAL ASSESSMENT CONTRACTOR:**

2
3 IN WITNESS WHEREOF, the parties hereto have executed this Agreement this 17th day
4 of April, 2018.

5
6 **NAME OF ORGANIZATION:** Promesa Behavioral Health

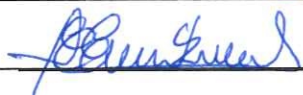
7
8
9 By 

10 Print Name Lisa Weigant

11
12 Title CEO

13 Chairman of the Board, or President,
14 or any Vice President or Owner, or Director

15 Date 3-14-18

16 By 

17
18 Print Name ERLAN ZUNIGA

19
20 Title FINANCE DIRECTOR

21 Secretary (of Corporation), or any Assistant
22 Secretary, or Chief Financial Officer, or Chief
23 or any Chief Accountant, or any Assistant
24 Treasurer

25 Date 3/14/18

26 Mailing Address: 7120 N. Marks Ave., Suite 110, Fresno, CA 93711

27 Contact: Lisa Weigant, Chief Executive Officer

28 Telephone: (559) 439-5437

Email address: lweigant@promesabehavioral.org

Service Site Address: 7120 N. Marks Ave., Suite 110, Fresno, CA 93711

RESOURCE FAMILY APPROVAL ASSESSMENT CONTRACTOR:

IN WITNESS WHEREOF, the parties hereto have executed this Agreement this 17th day
of April, 2018.

NAME OF ORGANIZATION: Valley Teen Ranch

By Andrea Evans

Print Name Andrea Evans

Title CEO

Chairman of the Board, or President,
or any Vice President or Owner, or Director

Date 3/14/18

By Miriam Delfin

Print Name Miriam Delfin

Title Chief Financial Officer

Secretary (of Corporation), or any Assistant
Secretary, or Chief Financial Officer, or Chief
or any Chief Accountant, or any Assistant
Treasurer

Date 3/14/18

Mailing Address: 2610 W Shaw Lane., Suite 105, Fresno, CA 93711

Contact: Andrea Evans, Chief Executive Officer

Telephone: (559) 437-1144

Email address: andrea.evans@valleyteenranch.org

Service Site Address: 2610 W Shaw Lane., Suite 105, Fresno, CA 93711

CONTRACTORS LIST**ASPIRANET**

Mailing Address: 1320 E. Shaw Ave, Ste. 140
Fresno, CA 93710
(559) 222-4969
Contact: Chad Valorosi
Email: cvalorosi@aspiranet.org
Referral Email: cvalorosi@aspiranet.org

NORTH STAR FAMILY CENTER

Mailing Address: 6760 N. West Ave, Ste. 101
Fresno, CA 93711
(559) 226-2273
Contact: Danielle Macagba
Email: dmacagba@northstarfamilycenter.org
Referral Email: dmacagba@northstarfamilycenter.org

FAMILY CONNECTIONS CHRISTIAN ADOPTIONS

Mailing Address: 1120 Tully Rd.
Modesto, CA 95350
(209) 524-8844
Contact: Wayne Mott
Email: waynemott@fcadoptions.org
Referral Email: dianeniswander@fcadoptions.org

PROMESA BEHAVIORAL HEALTH

Mailing Address: 7120 N. Marks Ave, Ste. 110
Fresno, CA 93711
(559) 439-5437
Contact: Lisa Weigant
Email: lweigant@promesabehavioral.org
Referral Email: lweigant@promesabehavioral.org

GOLDEN STATE FAMILY SERVICES

Mailing Address: P.O. Box 130
Kingsburg CA 93631
(559) 389-0685
Contact: Kristin Withrow
Email: kristinn@gsfs.org
Referral Email: kristinn@gsfs.org

VALLEY TEEN RANCH

Mailing Address: 2610 W Shaw Lane, Ste. 105
Fresno, CA 93711
(559)-437-1144
Contact: Alicia Abirached
Email: Alicia.abirached@valleyteenranch.org
Referral Email: Alicia.abirached@valleyteenranch.org

KOINONIA FAMILY SERVICES

Mailing Address: 1551 East Shaw, Ste. 103
Fresno, CA 93711
(559) 230-0920
Contact: Christina J. Schmidt
Email: cschmidt@kfh.org
Referral Email: referrals@kfh.org

SUMMARY OF SERVICES

SERVICE: Psychosocial Assessment for the Resource Family Approval Program
CONTRACT PERIOD: March 7, 2017—June 30, 2019
1st OPTIONAL RENEWAL: July 1, 2019—June 30, 2020
2nd OPTIONAL RENEWAL: July 1, 2020—June 30, 2021

PROGRAM DESCRIPTION:

The County of Fresno, Department of Social Services (DSS) has established this Master Agreement with qualified agencies to administer the Psychosocial Assessment for the Resource Family Approval (RFA) Program. As of January 1, 2017, applicants interested in becoming a Resource Family (foster family, relative caregivers, Non-Related Extended Family Member (NREFM), adoptive family and/or legal guardian) must complete a Psychosocial Assessment as part of the new RFA process.

SUMMARY OF SERVICES:

A Resource Family applicant must comply with the application qualifications and requirements. One part of the Resource Family application qualifications and requirements is participation in a Psychosocial Assessment, which will include a comprehensive inquiry into the applicant's personal history, family history, and family dynamics. The CONTRACTOR shall conduct a Psychosocial Assessment and provide a recommendation to the COUNTY for any RFA applicant referred to CONTRACTOR.

CONTRACTOR RESPONSIBILITIES:

CONTRACTOR shall perform services as follows:

1. The CONTRACTOR shall comply with the RFA Program Written Directives in completing the Psychosocial Assessment, section 6-05. To review the most recent RFA Program Written Directives use the following link: <http://www.childsworld.ca.gov/PG3416.htm>.
2. The CONTRACTOR shall schedule interviews with RFA applicant(s) within three days of receiving the referral.

3. CONTRACTORS referred Monolingual Non-English Psychosocial Assessments shall provide the RFA applicant(s) with services in their primary language.
4. The CONTRACTOR shall use the Structured Analysis Family Evaluation (S.A.F.E.) model, or otherwise agreed upon assessment approved by County, and materials to administer the Psychosocial Assessment at the applicant's Fresno County residence.
5. The CONTRACTOR shall be flexible with the applicant's availability in order to complete the required interviews timely.
6. The CONTRACTOR will coordinate with the COUNTY to have weekly meetings to review the Questionnaire #1 and background check summation.
7. The CONTRACTOR shall participate in monthly meetings, or as often as needed, with COUNTY staff to discuss requirements, data reporting, policies and procedures, overall program operations and any issues or foreseeable issues that may arise.
8. The CONTRACTOR shall complete all requirements for the Psychosocial Assessment and submit a recommendation using the COUNTY standardized forms, S.A.F.E. 1 and S.A.F.E. 2 questionnaires, to the COUNTY within 45 days of receiving the referral. If CONTRACTOR will not complete the Psychosocial Assessment within 45 days of receiving the referral, the CONTRACTOR shall submit a request for additional time to complete the Assessment to the COUNTY's RFA social worker. The RFA social worker has the discretion to grant more time to complete the Assessment. Such grant of additional time shall be provided in writing and shall specify the date upon which the Assessment is due.
9. The CONTRACTOR shall consult with COUNTY when questions or concerns arise from the recommendations.

COUNTY RESPONSIBILITIES

The COUNTY shall perform as follows:

1. The COUNTY will refer applicants that have passed the Home Environment Assessment and Background Check Assessment to the CONTRACTOR for a Psychosocial Assessment and provide the CONTRACTOR with the following: application, health screen, budget information and release of information.

2. The COUNTY will identify RFA Applicants that are Monolingual Non-English and refer those applicants to CONTRACTORS that have bilingual staff.
3. The COUNTY will work concurrently with the CONTRACTOR for the next 45 days to assist the RFA applicant in successfully completing the Psychosocial Assessment.
4. The COUNTY will provide COUNTY standardized forms to the CONTRACTOR to be used in completing the Psychosocial Assessment.
5. The COUNTY will provide consultation to the CONTRACTOR as needed in the completing of a Psychosocial Assessment.
6. The COUNTY will coordinate with the CONTRACTOR to have weekly meetings to review the Questionnaire #1 and background check summation.
7. The COUNTY will on a case-by-case basis work with the CONTRACTOR on RFA applicant needs. The COUNTY will evaluate and grant, if appropriate, CONTRACTOR requests for more time to complete the Psychosocial Assessment.
8. The COUNTY will retain the RFA approval certificate and all documents filed in court.
9. The COUNTY staff shall monitor the CONTRACTOR'S performance to assure compliance with the terms, conditions and specifications of the contract.
10. The COUNTY shall coordinate with the CONTRACTORS to participate in monthly meetings, or as often as needed, to discuss requirements, data reporting, policies and procedures, overall program operations and any issues or foreseeable issues which may arise.

OUTCOMES:

Long Term Goal: Timely and quality-driven Psychosocial Assessments of families that increase the likelihood of safe, stable and optimal placements of foster children.

The performance outcomes below are preliminary and may be modified by the Department of Social Services.

PERFORMANCE OUTCOMES	EXPECTED LEVEL OF PERFORMANCE
Performance Measure 1: Timely Response Rate: The number of Psychosocial Assessments scheduled for interviews within 3 days of referral received by Contractor.	100% Psychosocial Assessments scheduled for interviews within 3 days of referral received by Contractor.
Performance Measure 2: Timely Submission Rate: The number of Psychosocial Assessments and forms submitted within 45 days.	80% Psychosocial Assessments and forms submitted within 45 days. Assessments with approved extension request shall be considered timely.