

AGREEMENT NO. _____

**AMENDMENT TO COUNTY OF MENDOCINO
STANDARD SERVICES AGREEMENT NO. HH-17-011**

This Amendment to Agreement No. HH-17-011 is entered into this _____ day of _____, 2018, by and between the COUNTY OF MENDOCINO, a political subdivision of the State of California, hereinafter referred to as "COUNTY" and Kemper Consulting Group, hereinafter referred to as "CONTRACTOR".

WHEREAS, Agreement No. HH-17-011 was entered into on July 1, 2017; and

WHEREAS, upon execution of this document by the County of Mendocino and the Contractor, this document will become part of the aforementioned contract and shall be incorporated therein; and

WHEREAS, it is the desire of the CONTRACTOR and the COUNTY to extend the termination date set out in the original Agreement No. HH-17-011, from June 30, 2018 to June 30, 2019; and

WHEREAS, it is the desire of the COUNTY to increase the original compensation of Twenty Five Thousand Dollars (\$25,000) by Forty Thousand Dollars (\$40,000) for a new not to exceed amount of Sixty Five Thousand Dollars (\$65,000) for the term of this agreement; and

WHEREAS, the scope of work under the original Agreement No. HH-17-011 has been altered to include a Mental Health Needs Assessment as listed in Exhibit A.

NOW, THEREFORE, we agree as follows:

1. The termination date set out in the original Agreement No. HH-17-011 will be extended from June 30, 2018 to June 30, 2019.
2. An additional Forty Thousand Dollars (\$40,000) has been added to the original Agreement No. HH-17-011. The new compensation payable to CONTRACTOR hereunder shall not exceed Sixty Five Thousand Dollars (\$65,000) for the term of this agreement.
3. The scope of work listed in the original Agreement No. HH-17-011 has been altered to include a Mental Health Needs Assessment as listed in Exhibit A.

All other terms and conditions of Agreement No. HH-17-011 shall remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the day and year first above written.

DEPARTMENT FISCAL REVIEW:

DEPARTMENT HEAD _____ DATE _____
Budgeted: ☒ Yes ☐ No
Budget Unit: HH 5020
Line Item: 862239
Grant: ☐ Yes ☒ No
Grant No.: N/A

COUNTY OF MENDOCINO

By: _____
DAN HAMBURG, Chair
BOARD OF SUPERVISORS

ATTEST:

CARMEL J. ANGELO, Clerk of said Board

By: _____
Deputy

I hereby certify that according to the provisions of Government Code section 25103, delivery of this document has been made.

CARMEL J. ANGELO, Clerk of said Board

By: _____
Deputy

INSURANCE REVIEW:

By: _____
Risk Management

EXECUTIVE OFFICE/FISCAL REVIEW:

APPROVAL RECOMMENDED

By: _____
Deputy CEO

CONTRACTOR/COMPANY NAME:

By: _____

NAME AND ADDRESS OF CONTRACTOR:

Kemper Consulting Group
1841 11th Avenue
Sacramento, CA 95818

By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her signature on this Agreement, he/she or the entity upon behalf of which he/she acted, executed this Agreement

COUNTY COUNSEL REVIEW:

APPROVED AS TO FORM:

KATHARINE L. ELLIOTT,
County Counsel

By: _____
Deputy

Signatory Authority: \$0-25,000 Department; \$25,001-50,000 Purchasing Agent; **\$50,001+ Board of Supervisors**

Exception to Bid Process Required/Completed ☐ _____

Mendocino County Business License: Valid ☐

Exempt Pursuant to MCC Section: _____

EXHIBIT A

DEFINITION OF SERVICES

CONTRACTOR shall provide the following services:

1. Assist the Health and Human Services Agency (HHSA) and the County Executive's Office with the implementation of the recommendations included in the Kemper Consulting Group's "Review of Mendocino County's Administrative Service Organization (ASO) Model for the Delivery of Mental Health Services."
2. Guide and assist COUNTY with other facility, service, and organizational assessments as needed, **including a Mental Health Needs Assessment.**
3. Provide support related to new program implementation on an as-needed basis.
4. Provide other assistance, support, or consultation as recommended by the Behavioral Health Director and approved by the HHSA Director.

[END OF DEFINITION OF SERVICES]