



County of Santa Cruz

HEALTH SERVICES AGENCY

P.O. BOX 962, 1080 EMELINE AVENUE
SANTA CRUZ, CA 95061
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HEALTH SERVICES AGENCY ADMINISTRATION

April 21, 2002

AGENDA: May 7, 2002

BOARD OF SUPERVISORS
County of Santa Cruz
701 Ocean Street
Santa Cruz, CA 95060

SUBJECT: 2002/03 Proposition 36 Plan and Related Actions

Dear Members of the Board:

The Health Services Agency (HSA) requests that your Board's adopt the attached resolution approving the attached 2002-03 Proposition 36 Plan and authorizing the Health Services Administrator to sign. In addition, HSA requests that your Board approve six 2001/02 contract amendments totaling \$418,857 for additional Proposition 36 and CaWORKs drug treatment services; authorize HSA to sign the amendments; and adopt the attached resolution accepting and appropriating \$427,888 in unanticipated revenue into the HSA Alcohol and Drug Program budget.

Background

On May 22, 2001, your Board approved the County's 2001-02 plan to implement Proposition 36, which provides for drug treatment instead of incarceration for certain classes of drug offenders. In prior actions, your Board designated HSA as the lead agency for local Proposition 36 implementation, and established a trust fund for deposit of Proposition 36 revenues as required by Proposition 36. On February 5, 2002, HSA provided your Board with a status report on Proposition 36 implementation, and requested authorization to negotiate amendments to contracts for Proposition 36 drug treatment services to accommodate growth in needed services. Since February, the rate of growth in needed Proposition 36 services has been higher than projected, and contract amendments to provide additional drug treatment services are needed.

On March 5, 2002 the State informed HSA that the 2002-03 County Proposition 36 Plan is due to the State on May 1, 2002. HSA has worked closely with the Proposition 36 Steering Committee to develop the plan, and has conducted a public meeting to obtain input to the plan from community members, drug treatment contractors, the Alcohol and Drug Abuse Commission, and the public.

2002-03 Proposition 36 Plan

The attached 2002-03 County Proposition 36 Plan is based on the 2001-02 plan, and incorporates experience from the last year of Proposition 36 implementation as well as input from the community. Highlights of program goals for the upcoming year include improved services for mentally ill drug offenders whose mental illness is not severe enough to meet Community Mental

Health target population criteria, increased residential drug treatment and detoxification services, full implementation of drug testing protocols, and improved collection of client fees.

The plan projects that \$1.173 million will be needed for drug treatment services and \$74,108 for drug testing for an estimated 477 clients. Referral and case management services provided by the HSA Alcohol and Drug Program will be allocated \$181,580 and Probation is allocated \$190,421 for supervision of Proposition 36 probationers. The allocations for HSA and Probation are consistent with the 5-year projected budget contained in the Proposition 36 Implementation Plan approved by your Board on May 22, 2001, except that Probation is allocated an additional \$4,000 to upgrade a vacant Probation Aide position to a Deputy Probation Officer II. This upgrade will provide Probation with an increased amount of staff flexibility to manage the higher than anticipated workload associated with Proposition 36 offenders. These allocation amounts will be included in HSA and Probation's 2002-03 budget requests.

Due to a Proposition 36 trust fund balance resulting from start-up savings, it appears that there will be sufficient Proposition 36 funds to cover projected 2002-03 expenditures. However, the trust fund balance is projected to be exhausted by the end of 2002-03, and it appears unlikely that there will be sufficient Proposition 36 funds to cover all of the cost of services in 2003-04 and subsequent years. Many other counties are projecting similar ongoing funding shortfalls, and HSA is working at the State level to advocate for adequate funding to meet this treatment service mandate. HSA will track Proposition 36 expenditures and, if necessary, seek additional revenues or more closely control costs. If no other alternatives can be found, Proposition 36 clients can be referred to existing County-funded drug treatment services with resultant increases in waiting lists for these services and potential displacement of drug abusers who are not involved with the criminal justice system.

Contract Augmentations

On February 5, 2002 your Board authorized HSA to negotiate amendments to agreements with Proposition 36 service providers cover additional projected expenditures through June 30, 2002. These projections were based on year-to-date expenditures through November 30, 2001. Based on actual expenditures through the end of February 2002, it appears that additional funds will be needed to cover recently updated expense projections. HSA has developed six contract amendments based on these updated projections for the service providers and amounts shown below. The total augmentation amounts shown below include the augmentations approved by your Board on February 5, 2002. Augmentations were negotiated according to the unit of service rates and terms in the existing agreements with these agencies. In addition to the Proposition 36 augmentations, the Santa Cruz Community Counseling Center amendment includes \$39,622 of additional CalWORKs services. Funding for the additional CalWORKs services will be obtained through decreasing the allocations of other contractors that are under-performing on CalWORKs services.

<u>Agency</u>	<u>Augmentation</u>
The Camp Recovery Center	\$23,074
Fenix Services	21,813
Janus of Santa Cruz	57,622
New Life Community Services	143,537
Santa Cruz Community Counseling Center	117,300
Sobriety Works	<u>55,511</u>
Total	\$418,857

Funding

Current appropriations of Proposition 36 trust funds into the HSA Alcohol and Drug Program budget are sufficient to cover a portion of the contract augmentations, and liquidation of amounts in under-utilized Proposition 36 and CalWORKs contracts will provide additional appropriations to offset the amendments listed above. However, an additional appropriation of \$234,887 of Proposition 36 trust funds is needed to offset the contract augmentations listed above. In addition, \$193,001 of unanticipated Drug Medical funds are being appropriated to provide funding for additional Drug Medical services. These contract augmentations will not result in any increase in net County cost.

It is, therefore, RECOMMENDED that your Board:

1. Adopt the attached resolution approving the attached 2002-03 Proposition 36 County Plan and authorizing the Health Services Administrator to sign; and
2. Adopt the attached resolution accepting and appropriating \$427,888 in unanticipated Proposition 36 and Drug Medical revenues into the HSA Alcohol and Drug Program budget; and
3. Approve amendments to the agreements with: The Camp Recovery Center, Contract No. 2536, increasing the maximum amount by \$23,074 to \$51,732, Fenix Services, Contract No. 796, increasing the maximum amount by \$21,813 to \$567,030, Janus of Santa Cruz, Contract No. 133, increasing the maximum amount by \$57,622 to \$1,499,400, New Life Community Services, Contract No. 2537, increasing the maximum amount by \$143,537 to \$217,686, Santa Cruz Community Counseling Center, Contract No. 100, increasing the maximum amount by \$117,300 to \$1,720,249, and Sobriety Works, Contract No. 2535, increasing the maximum amount by \$55,511 to \$184,551 and authorize the Health Services Administrator, or as their designee the Director of Administration, to sign.

Sincerely,

Rama
Health Services Administrator

RECOMMENDED:


Susan A. Mauriello

County Administrative Officer

cc: County Administrative Officer
Auditor Controller
County Counsel
HSA Administration
Mental Health and Substance Abuse Administration
Alcohol and Drug Program Administration

1. Collaborative Process

The 2002-03 Santa Cruz County Proposition 36 Plan is built upon the foundation of the 2001-02, and revised to include new information gained over the past year.

The Health Services Agency is the lead agency for Proposition 36 implementation, and convenes the Proposition 36 Steering Committee monthly. Representation on the Proposition 36 Steering Committee includes the following:

- courts
- District Attorney
- Public Defender
- Defense Bar
- Probation
- Health Services Agency
- State Parole
- Sheriff
- County Administrative Office
- Criminal Justice Council
- Community Mental Health

The Steering Committee reviews all aspects of Proposition 36 implementation, including policy, planning, programs, staffing and finances. Once each quarter, the Steering Committee conducts a public meeting that is widely noticed and complies with the Brown Act. Alcohol and drug treatment providers and provider associations receive notices of these meetings. In addition, meetings with alcohol and drug treatment providers, sober living housing providers, and other groups are conducted as the need to address specific issues arises. Finally, the County Alcohol and Drug Abuse Commission is kept apprised of Proposition 36 planning and implementation issues and is provided the opportunity for input at its monthly meetings.

2. Treatment Providers and Services

The County's Proposition 36 implementation plan is founded upon the values of close collaboration and cooperation among the stakeholders to promote client recovery, ensure client accountability, and protect public safety. Elements of the service provision plan include client flow, assessment, referral, provision of alcohol and drug treatment services, and case monitoring.

Assessment, Treatment Recommendations and Referral

To facilitate coordination of case handling, improve efficiency and increase consistency of defendants' probation and treatment requirements, the courts assign all Proposition 36 cases and Drug Court cases to a single court. At the initial court hearing, out-of-custody

clients are instructed to contact the **HSA** Alcohol and Drug Program (ADP) for an assessment, and are given a second court hearing date approximately 10 days after the first court hearing to review the treatment placement recommendations. ADP is notified by Probation within two days of the initial court hearing that the client needs to be assessed. If the client does not contact ADP within a specified time period, ADP notifies Probation. For out-of-custody clients, ADP has established a standard to assess the client and make placement recommendations back to the court within 10 days of receiving the referral (i.e., in time for the second court hearing). For in-custody clients, ADP's standard is to conduct the assessment and make a report back to the court within 7 days of receiving the referral.

ADP staff conducts **an** alcohol and drug assessment with the client (see below for details of the assessment process), finds an appropriate program to provide the services, and sends a written report of the assessment and treatment recommendations to the court and Probation. Needs for ancillary services (literacy training, vocational and family counseling, mental health and medical services) are also assessed using a brief screening instrument, and service recommendations developed. If a more extensive assessment of ancillary needs (e.g., learning disabilities) is required, the client is referred out to community resources for the assessment.

Fee assessments are also conducted, and clients are re-assessed for fees if their employment status changes. A goal of the Proposition 36 Steering Committee for 2002-03 is to fully implement the client fee assessment and collection system.

Parolees who qualify under Proposition 36 are also referred to **HSA** Alcohol and Drug Program staff, who conducts assessments and make treatment plan recommendations for approval by the Board of Prison Terms. Parolee's compliance with treatment requirements is tracked by Parole, based on reports from treatment providers.

Based on ADP treatment recommendations and a Probation risk assessment, the court orders a treatment placement and gives the client **an** enrolment deadline. The treatment provider is notified by Probation to expect the client. If the client does not arrive at the treatment provider within the enrollment deadline, the treatment provider notifies Probation.

Treatment Services

Treatment services are provided in three levels of intensity (tracks):

- **Track I:** Three months of weekly outpatient education and counseling services, provided primarily in a group format, similar to the existing PC 1000 Deferred Judgment Program. Topics include the effects of alcohol and drugs, the addiction and recovery process, and family dynamics. Ancillary services are provided through referral or directly. The goals of Track I services are to help clients examine the impact of alcohol and drug use on their lives, and motivate them toward recovery.

- Track 1I: Up to six months of outpatient services, which may be augmented by up to three months of clean and sober housing. Ancillary services are provided through referral or directly.
- Track 1II: Up to one year of intensive treatment services based upon an individualized case plan developed by ADP. Services may include detoxification, residential treatment, clean and sober housing, outpatient, and methadone maintenance. Ancillary services are provided through referral or directly.

Reporting from the treatment provider to Probation include quarterly progress reports as required by Proposition 36, and reporting on an exception basis for clients who are non-compliant with court orders for treatment.

As needed, clients who are not succeeding in treatment are referred back to ADP for reassessment and revision of their case plan. Consistent with Proposition 36 requirements, drug treatment services do not exceed 12 months and aftercare services do not exceed 6 months.

A goal of the Proposition 36 Steering Committee is to increase the availability of dual diagnosis services, and residential and detoxification treatment.

Ancillary Services

Ancillary services such as vocational training and literacy training are provided primarily through referrals to existing County-operated and community-based programs supported with non-Proposition 36 funds. In addition, Proposition 36 funds are allocated to a community-based agency to provide case funds to be used at the discretion of the ADP Case Managers for ancillary services which cannot be obtained through other means.

Supervision and Monitoring

Probation has primary responsibility for tracking client compliance with mandated treatment services, based on information from ADP and providers. The level of supervision is based on a public safety risk assessment, level of treatment (track), and treatment phase (early recovery vs. aftercare/recovery maintenance). Supervision is based on reports from treatment providers and drug tests, and may include home and field visits.

For clients who are not complying with treatment requirements or for whom additional service needs are identified, Probation works with ADP, the treatment provider and the court to revise the service plan and/or determine that the client is unamenable to treatment.

3. SACPA Client Treatment Goals

The overall goals for SACPA clients are to attain stable sobriety and become productive members of society. Specific client objectives are to:

- Eliminate or significantly reduce alcohol and drug use
- No further criminal justice system involvement
- Stable employment and/or education
- Stable housing
- Clean and sober social support network
- Address health and mental health needs
- Family reunification, where appropriate
- Address any outstanding legal issues

4. Monitoring Quality of Treatment Services

County contracts provide for monitoring of service providers using criteria consistent with ADP program certification standards. Contracts include goals related to specific program areas (e.g., productivity, staff training, cultural competence, and dual diagnosis), and providers are required to report quarterly on attainment of goals in these areas. County case managers track the progress of clients through programs, and intervene to address program quality issues as they arise in the course of a client's treatment. As needed, program quality issues are escalated to the management level, and written corrective action plans may be required.

5. Monitoring Quality of Ancillary Services

Most ancillary services (such as vocational readiness, job development and literacy) are provided through referral to the County Human Resources Agency or to private non-profit providers using non-Proposition 36 funds. In addition, Proposition 36 funds are allocated to a community-based agency to provide case funds to be used at the discretion of the ADP Case Managers for ancillary services which cannot be obtained through other means.

County case managers track the progress of clients through programs, and intervene to address program quality issues as they arise in the course of a client's treatment. As needed, program quality issues are escalated to the management level. The County Alcohol and Drug Program has a strong working relationship with the Human Resources Agency, and issues are typically resolved between managers at the two agencies. For issues involving contract agencies that cannot be resolved at the Case Manager's level, management may intervene and written corrective action plans may be required.

6. Assessment and Referral Process

ADP staff conducts a thorough assessment of each client using the Addiction Severity Index (ASI) Lite, and develops treatment recommendations using the American Society

of Addiction Medicine Patient Placement Criteria. Both of these tools are research-tested, used nation-wide, and are consistent with best practice standards for the field. Needs for ancillary services (literacy training, vocational **and** family counseling, mental health and medical services) are also be assessed and service recommendations developed. The client flow and referral process are described in Section 2. above.

7. Drug Testing

Drug testing (including alcohol testing) is required of all Proposition 36 clients, and is conducted by treatment providers and Probation Department staff. Testing is randomized and observed. Clients in Track I (once per week outpatient for up to 3 months) are tested once per week. Track II (up to 6 months of outpatient treatment which may include up to 3 months of sober living) clients are tested twice per week for the first three months of treatment and once per week thereafter. Track III clients (all other more intensive treatment modalities) are tested twice per week, unless they are in a closely supervised residential treatment program where they may be tested less frequently at the discretion of the program. The testing regimen described above are the default option used for most clients. Testing regimen may be customized for clients based on individual client's needs. Testing may also be done on suspicion of drug use. The Proposition 36 Steering Committee has a goal for 2002-03 to fully implement the drug testing protocol.

Presumptive tests (e.g., strips) are conducted, with samples sent for laboratory confirmation if the client does not acknowledge drug use after being confronted with the presumptive test results. Providers must telephone Probation with positive results within one working day of receiving the positive result. Providers accompany their report of a positive drug test with a recommended treatment response. Probation, in consultation with the County Alcohol and Drug Program Case Manager, reviews and approves or modifies the treatment response. If needed, clients may be re-assessed by the County Case Manager for modification of the treatment plan, including placement in a higher level of care.

The Santa Cruz County Proposition 36 Team has adopted the philosophy that the power of the criminal justice system should be used to promote recovery while protecting public safety. Factors to be considered in responding to a positive drug test include the client's treatment attendance, treatment phase, progress in treatment (e.g., stage of recovery, progress in employment/education and family/social supports), prior positive tests, response to the positive test, and any public safety issues associated with the drug use (e.g., DUI).

Consistent with Health and Safety Code Division 10.9, Section 11999.20, the results of a drug test are not used as the basis for imposition of a new criminal charge. In addition, a single drug test is not the sole basis for determining unamenability to treatment or revoking probation.

8. Tracking Service Provision

All Proposition 36 clients are tracked using the County Alcohol and Drug Program's Ecco Drug and Alcohol System (DAS) software. Information on each client assessed by County Case Managers is entered into DAS, and a DAS episode is opened by each treatment provider. DAS can generate reports on the number of unique clients, client demographics, the number of treatment admissions by program and modality, and a host of other variables. Referrals to ancillary services are tracked and reported on by the County Case Manager.

California Department of Alcohol & Drug Programs
SACPA Entity Report

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County of: Santa Cruz

Fiscal Year: 2002/2003 **Corson 1**

Status: Draft Created: 04/02/2002 Last Revised: 04/03/2002

<u>Entity Type</u>	<u>Direct Services</u>	<u>Administrative Activities</u>	<u>Total</u>	<u>Percentage of ADP Allocation</u>
Drug Treatment				
Assessment & Referral	\$1,083,097	\$201,091	\$1,284,188	0.00%
Drug Treatment	123,828	57,752	181,580	0.00%
	959,269	143,339	1,102,608	0.00%
Other Service	\$66,450	\$3,550	\$70,000	0.00%
Clean & Sober Housing	57,000	3,000	60,000	0.00%
Literacy	4,725	275	5,000	0.00%
Vocational	4,725	275	5,000	0.00%
Criminal Justice	\$190,421	\$0	\$190,421	0.00%
Court Probation	190,421	0	190,421	0.00%
Grand Total:	\$1,339,968	\$204,641	\$1,544,609	0.00%

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California Department of Alcohol & Drug Programs
 SACPA Plan Service/Activity Report

County of: Santa Cruz

Fiscal Year: 2002/2003 Version 1

Status: Draft Created: 04/02/2002 Last Revised: 04/03/2002

Percentage of ADP Allocation
 \$0
 +
 \$0
\$0
0.00%

Service Type Total
Services \$1,172,608

Drug Treatment

Non-Residential/Outpatient

Treatment/Recovery - No Meds	403,588	0.00%
Treatment/Recovery - Methadone, LAAM, or Other Meds Prescribed	8,764	0.00%
Day Program-Intensive	142,284	0.00%
Detoxification - No Meds	0	0.00%
Detoxification - Methadone, LAAM, or Other Meds Prescribed	0	0.00%

Residential

Detoxification (Hospital)	0	0.00%
Detoxification (Non-Hospital) - No Meds	28,584	0.00%
Detoxification (Non-Hospital) - Methadone, LAAM, or Other Meds Prescribed	0	0.00%

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County of: Santa Cruz

Fiscal Year: 2002/2003 Version 1

Status: Draft Created: 04/02/2002 Last Revised: 04/03/2002

<u>Service Type</u>	<u>Total</u>	<u>Percentage of ADP Allocation</u>
Treatment/Recovery - No Meds	519,388	0.00%
Treatment/Recovery - Methadone, LAAM, or Other Meds Prescribed	0	0.00%
<u>Other Service</u>		
Literacy Training	5,000	0.00%
Family Counseling	0	0.00%
Vocational Training	5,000	0.00%
Other Client Services	60,000	0.00%
Clean and Sober Housing		
Case Management Activities	\$372,001	0.00%
Referral/Assessment	181,580	0.00%
Placement	0	0.00%
Court Monitoring	0	0.00%

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California Department of Alcohol & Drug Programs
SACPA Plan Service/Activity Report

County of: Santa Cruz

Fiscal Year: 2002/2003 Version 1

Status: Draft Created: 04/02/2002 Last Revised: 04/03/2002

<u>Service Type</u>	<u>Total</u>	<u>Percentage of ADP Allocation</u>
Supervision	190,421	50
		+
Miscellaneous Activities	0	\$0
		<u>\$0</u>
		0.00%
Grand Total:	<u>\$1,544,609</u>	<u>0.00%</u>

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California Department of Alcohol & Drug Programs
SACPA Capacity Projections Report



County of: Santa Cruz

Fiscal Year: 2002/2003 Version 1

Status: Draft Created: 04/02/2002 Last Revised: 04/03/2002

<u>Service</u>	<u>Existing</u>	<u>Planned Additional</u>	<u>Total Planned</u>
Drug Treatment			
<u>Non-Residential/Outpatient</u>			
Treatment/Recovery - No Meds	152	0	152
Treatment/Recovery - Methadone, LAAM, or Other Meds Prescribed	5	0	5
Day Program-Intensive	21	0	27
Detoxification - No Meds	0	0	0
Detoxification - Methadone, LAAM, or Other Meds Prescribed	0	0	0
<u>Residential</u>			
Detoxification (Hospital)	0	0	0
Detoxification (Non-Hospital) - No Meds	1	0	1
Detoxification (Non-Hospital) - Methadone, LAAM, or Other Meds Prescribed	0	0	0
Treatment/Recovery - No Meds	79	0	79
Treatment/Recovery - Methadone, LAAM, or Other Meds Prescribed	0	0	0
Subtotal: Drug Treatment	<u>258</u>	<u>6</u>	<u>264</u>

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California Department of Alcohol & Drug Programs
SACPA Capacity Projections Report

County of: Santa Cruz

Fiscal Year: 2002/2003 Version 1

Status: Draft Created: 04/02/2002 Last Revised: 04/03/2002

<u>Service</u>	<u>Existing</u>	<u>Planned Additional</u>	<u>Total Planned</u>
Other Service			
Literacy Training	2	0	2
Family Counseling	0	0	0
Vocational Training	2	0	2
Other Client Services Clean and Sober Housing	14	0	14
Subtotal: Other Service	<u>18</u>	<u>0</u>	<u>18</u>
Grand Total Capacity Projections:	<u>276</u>	<u>6</u>	<u>282</u>

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California Department of Alcohol & Drug Programs
SACPA Client Projection Report

County of: Santa Cruz

Fiscal Year: 2002/2003 Version 1

Status: Draft Created: 04/02/2002 Last Revised: 04/03/2002

<u>Referral Type</u>	<u>Projected Number Of Clients</u>
Referred From Parole	48
Referred From Court/Probation	429
Grand Total Referred:	477

<u>Service Type</u>	<u>Projected Number Of Clients</u>
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Drug Treatment

Non-Residential/Outpatient

Treatment/Recovery - No Meds 456

Treatment/Recovery - Methadone, LAAM, or Other Meds Prescribed 8

Day Program-Intensive 00

Detoxification - No Meds 0

Detoxification - Methadone, LAAM, or Other Meds Prescribed 0

Residential

Detoxification (Hospital) 0

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County of: Santa Cruz

Fiscal Year: 2002/2003 Version 1

Status: Draft Created: 04/02/2002 Last Revised: 04/03/2002

Projected Number
Of Clients

Detoxification (Non-Hospital) - No Meds 28

Detoxification (Non-Hospital) - Methadone, LAAM, or Other Meds Prescribed 0

Treatment/Recovery - No Meds 316

Treatment/Recovery - Methadone, LAAM, or Other Meds Prescribed 0

Subtotal: Drug Treatment

Other Service

Literacy Training 15

Family Counseling 0

Vocational Training 15

Other Client Services 0

Clean and Sober Housing

Subtotal: Other Service

Grand Total Client Projection:

30

30

918

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Department of Alcohol and Drug Programs
Santa Cruz County

SACPA

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- [Plan Questions](#)
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- [Other Services Waiting List Counts](#)
- [Reporting](#)

Original Plan Questions for Fiscal Year 2002/2003, Version 2

Status: Draft Created: 04/03/2002 Last Revised: 04/03/2002

To update Plan Questions, answer each question and click the **Submit** button.

1. Has the county board of supervisors approved the 2002-2003 county plan of approval authority to the county lead agency from the county board of supervisors? (Check one)
 - Yes
 - No (expected date of approval) _____

2. Identify the county agencies and other entities involved in developing the county plan of approval authority. (Check all that apply)

Required

 - County alcohol and other drug agency
 - court
 - Parole authority
 - Probation Department

Other

 - County executive office
 - County mental health
 - County office of education
 - County public health
 - County social services
 - District attorney
 - Police department
 - Sheriff
 - Workforce Investment Board
 - Other (specify) Public Defender

3. List impacted community parties that collaborated in development of the county plan of approval authority. (Check all that apply)

Required

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- Providers of drug treatment services in the community
- Representatives of drug treatment associations in the community

Other

- Civic groups
- Clients / Client groups
- Colleges/Universities (specify) _____
- Local business representatives
- Non-profit organizations
- Parent Teacher Group / Parent Teacher Association
- Workforce Investment Board
- Youth organizations
- Other (specify) Alcohol and Drug Advisory Board

1. How was community input collected?

(Check all that apply)

- Community meetings
- County advisory groups
- Focus groups
- Other method(s) (explain briefly) _____

5. If there are federally recognized American Indian tribe(s) located within you input?

(Check one)

- Yes (required if such tribes are located in your county)
- No federally recognized American Indian tribe(s) in the county

6. Specify how often entities and impacted community parties met to develop

(Check one)

- 1-2 times per year
- 3-4 times per year
- 5 or more times per year

7. Specify how often entities and impacted community parties will meet to cor services and activities.

(Check one)

- Every three months
- 4-8 times per year
- 9 or more times per year

8. What services are available to SACPA clients under the county plan?

*(Check all that apply)***30**

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- Drug treatment
- Family counseling
- Literacy training
- Mental health
- Vocational training
- Other (specify) Clean and Sober Housing

9. Identify the entity(ies) responsible for determining a client's level of need for treatment.

(Check all that apply)

- County alcohol and other drug agency
- Probation Department
- Drug treatment provider(s)
- Other (specify) _____

10. Identify the entity(ies) in your county responsible for determining a client's referral to additional services supplemental to treatment.

(Check all that apply)

- County alcohol and other drug agency
- Drug treatment provider(s)
- Probation department
- Other (specify) _____

11. What assessment tools are being used in your county for SACPA clients?

(Check all that apply)

- ASI (Addiction Severity Index)
- ASAM PPC (American Society of Addiction Medicine Patient Placement C
- Other (specify) _____

12. Will drug testing be required for SACPA clients in your county?

(Check one)

- Yes
- No

13. What other sources of funds, if any, will be used to pay for drug testing? [re

(Check all that apply)

- Client fees
- Additional funds budgeted by the county
- Other (specify) SATTA Burton SB223

14. Has there been a change in Lead Agency designation?

(Check one)

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- Yes
- No

Notes

Submit	Reset	Cancel
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**BEFORE THE BOARD OF SUPERVISORS
OF THE COUNTY OF SANTA CRUZ, STATE OF CALIFORNIA**

0192

RESOLUTION NO. _____

On the motion of Supervisor _____
duly seconded by Supervisor _____
the following resolution is adopted.

RESOLUTION ACCEPTING UNANTICIPATED REVENUE

WHEREAS, the County of Santa Cruz is a recipient of funds from _____ the State Dept. of
Alcohol and Drug Programs for the Proposition 36 and Drug Medical _____ program(s); and

WHEREAS, the County is a recipient of funds in the amount of \$ 427,888
which are either in excess of those anticipated or are not specifically set in the current
fiscal year budget of the County; and

WHEREAS, pursuant to Government Code Section 29130(c)/29064(b), such funds
may be made available for specific appropriation by a four-fifths vote of the
Board of Supervisors;

NOW, THEREFORE, BE IT RESOLVED AND ORDERED that the Santa Cruz County
Auditor-Controller accept funds in the amount \$ 427,888 into
Department HSA Alcohol and Drug Program


T/C	Index Number	Revenue Subobject Number	Account Name	Amount
001	364032	0691	State - Prop 36 Sub Abuse Trmnt.	\$ 234,887
001	364042	0622	State Aid SD/MCAL (MediCal-Alc/Drug)	193,001

and that such funds be and are hereby appropriated as follows:

T/C	Index Number	Expenditure Subobject Number	PRJ/UCD	Account Name	Amount
021	364042	3638		Medical Svs - Other	\$ 234,887
021	364042	3638		Medical Svs - Other	193,001

Total \$ 427,888

DEPARTMENT HEAD I hereby certify that the fiscal provisions have been researched
and that the Revenue(s) (has been) (will be) received within the current fiscal year

By  Date 4/23/12
Department Head

COUNTY ADMINISTRATIVE OFFICER 1 / Recommended to Board
1 / Not recommended to Board

0193

PASSED AND ADOPTED by the Board of Supervisors of the County of Santa Cruz, State of California, this _____ day of _____, 20____ by the following

AYES: SUPERVISORS
NOES: SUPERVISORS
ABSENT: SUPERVISORS

Chairperson of the Board

ATTEST:

Clerk of the Board

APPROVED AS TO FORM:

County Counsel

APPROVED AS TO ACCOUNTING DETAIL:

K Crayar 04/24/02

Auditor-Controller

Distribution:

Auditor-Controller
County Counsel
County Administrative Officer
Originating Department

**COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT**

RECEIVED
SANTA CRUZ COUNTY
AUDITOR-CONTROLLER

0194

TO: Board of Supervisors
County Administrative Office
Auditor Controller

FROM: Health Services Agency (Department) 02 APR 23 PM 4:31

BY: [Signature] (Signature) 4/23/02 (Date)
Signature certifies that appropriations/revenues are available

AGREEMENT TYPE (Check One)

Expenditure Agreement Revenue Agreement

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of same.

1. Said agreement is between the County of Santa Cruz Health Services Agency (Department/Agency)
and Sobriety Works, 1051 41st Ave., Santa Cruz, CA 95052 - ADP (Name/Address)

2. The agreement will provide Proposition 36 outpatient and daycare drug and alcohol counseling and drug and alcohol testing.

3. Period of the agreement is from July 1, 2001 to June 30, 2002

4. Anticipated Cost Is \$ increased to 184,551 Fixed Monthly Rate Annual Rate Not to Exceed

Remarks: This amendment increases the current contract by ~~\$55,551~~ \$55,511

5. Detail: On Continuing Agreements List for FY _____ . Page CC- _____ contract NO: _____ OR 1st Time Agreement

- Section II No Board letter required, will be listed under Item 8
- Section III Board letter required
- Section IV Revenue Agreement

6. Appropriations/Revenues are available and are budgeted in 364042 (Index) 3638 (Sub object)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACHED COMPLETED AUD-74 OR AUD-60

Appropriations are available and will be encumbered.
are not have been

Contract No: 12535
By: [Signature] Date: 04/24/02
Auditor-Controller Deputy

Proposal and accounting detail reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize

Health Services Administrator (Dept/Agency Head) to execute on behalf of the Health Services

(Department/Agency)

Date: 4/25/02

By: [Signature]
County Administrative Office

Distribution:

Board of Supervisors - White
Auditor Controller - canary
Auditor-Controller - Pink
Department - Gold

state of California
County of Santa Cruz
I _____ ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
State of California, do hereby certify that the foregoing request for approval of agreement was approved by said Board of Supervisors as recommended by the County Administrative Office by an order duly entered in the minutes of said Board on _____ 20__

ADM - 29 (8/01)
Title I, Section 300 Proc Man

By: Deputy Clerk

AUDITOR-CONTROLLER USE ONLY

CO	\$				
Document No.	JE Amount	Lines	H/TL	Keyed By	Date
30					
		\$	/		
		Amount	Index	Sub object	User Code

Contract No: 2535
Index: 364042
Subobject: 3638

AMENDMENT No. 2 TO AGREEMENT

The parties hereto agree to amend that certain above Agreement dated July 1, 2001, by the changes as follows:

A. Contract Payment Limit

1. Cover Sheet

Increasing the total contract maximum by \$55,511.00 for a new total contract maximum of \$184,551.00.

2. Budget Sheets

Deleting existing Exhibit A and Exhibit D, Pages 2 and 16, and replacing with revised Exhibits A and Exhibit D, Pages 2 and 16.

3. Scope of Service Sheets

Deleting existing Exhibit E-1 and E-3, Pages 19 and 22, and replacing with Exhibit E-1 and E-3, Pages 19 and 22.

All other provisions of said Agreement, excepting those mentioned above, shall remain the same.

CONTRACTOR

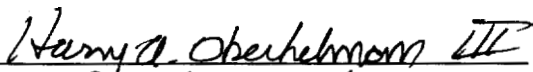
COUNTY OF SANTA CRUZ

By: 

By: _____

Health Services Agency

Approved as to form:


County Counsel 4/9/02

AMENDMENT 2 - EXHIBIT A
INDIVIDUAL CONTRACTOR INFORMATION

- A.1. ADMINISTRATION: COUNTY'S Alcohol and Drug Program Administrator, hereinafter called COUNTY'S Administrator, under the direction of the Health Services Agency Administrator shall represent COUNTY in all matters pertaining to services rendered pursuant to this Agreement and shall administer this Agreement on behalf of COUNTY. CONTRACTOR'S Executive Director shall administer this Agreement on behalf of CONTRACTOR.
- A.2. TERM: The **term** of this Agreement shall commence **on** July 1, 2001 and continue through and including June 30, 2002 during which time CONTRACTOR shall perform the services provided herein.
- A.3. COMPENSATION: Total contract amount shall not exceed One Hundred Eighty-Four Thousand Five Hundred Fifty-One and No/100 (\$184,551.00) for services performed during the term of this Agreement. In no event shall COUNTY obligation of State Drug and Alcohol Allocation base and required COUNTY **funds** exceed this amount.

FOR FEE-FOR-SERVICE CONTRACTS: COUNTY agrees to pay CONTRACTOR a total **s u m** not to exceed One Hundred Eighty-Four Thousand Five Hundred Fifty-One and No/100 (\$184,551.00) for services performed during the term of this Agreement in accord with the negotiated rates set **forth** in Exhibit D. CalWORKs funds may only be used for activities related to CalWORKs clients. Proposition 10 funds may **only** be used for activities related to Proposition 10 clients. Proposition 36 funds may only be used for activities related to Proposition 36 clients. In no event shall COUNTY obligation of State Drug and Alcohol Allocation base, Proposition **36** and Proposition 10 allocations and required COUNTY funds exceed this amount.

In **no** event shall COUNTY be required to pay for the cost of services that are covered **by** funding received by CONTRACTOR from other governmental contracts or grants.

- A.4. NOTICE: Any notice or notices required or permitted to be given pursuant to this Agreement **may** be personally served on the other party by the party giving such notice, or may be served by mail to the COUNTY'S Administrator at: County of Santa Cruz, HEALTH SERVICES AGENCY, Alcohol and **Drug** Programs, 1400 Emeline Avenue, **Santa** Cruz CA 95060, or to CONTRACTOR at: Sobriety Works, 1051 41st Avenue, Santa Cruz, CA 95062.

AMENDMENT 2 – EXHIBIT D
FISCAL PROVISIONS

D.1. MAXIMUM ALLOCATION CONTRACTOR agrees that COUNTY'S Maximum Allocation under the terms of this Agreement for each mode of service are listed below. The COUNTY reserves the right to change the source of funds based on COUNTY and State requirements.

BY FUNDING SOURCE

TOTAL	Modality	Other Funds	Proposition 36
\$118,645	Proposition 36 Outpatient Counseling	\$ 0	\$118,645
\$ 55,110	Proposition 36 Intensive Day Treatment	\$ 0	\$ 55,110
\$ 10,796	Proposition 36 Alcohol & Drug Testing	\$ 10,796	\$ 0
\$184,551	TOTAL	\$ 10,796	\$173,755

D.2. FEE FOR SERVICE CONTRACTS UNIT OF SERVICE RATES: COUNTY agrees to compensate CONTRACTOR at the unit of service rates set forth below. Settlement will be done at the end of the contract with the Cost Report. CONTRACTORS may request a change in the below rates, by a written request to the COUNTY Administrator. COUNTY Administrator may approve rate changes of 10% or less. Rate changes above 10% will require a contract amendment.

UNIT	RATE	SERVICE
Staff Hour - d	42.00	Proposition 36 Outpatient Counseling
Intensive Day Treatment	64.00	Proposition 36 Intensive Day Treatment
Drug Test	17.50	Proposition 36 Alcohol & Drug Testing

D.3. DEFINITIONS: Definition of above units of service shall be as follows:

STAFF HOUR: Those hours that a direct service staff person is on the job and available to provide services. A direct service staff person is defined as a staff person who spends time providing services directly to program clients. Administrative, clerical and other support services may not be billed as staff hours. Staff time used for vacations, holidays, sick leave and other leave may not be billed to COUNTY Volunteer and unpaid intern time may not be billed to COUNTY. Time to be billed in 15 minute increments of direct staff time. Staff Hours are claimed for the following modes of service:

- a. **Outpatient Services:** Staff Hours may include individual counseling and group therapy of a minimum of 3 and not more than 15 unrelated individuals, intake, assessment, case management and aftercare.
- b. **CalWORKs:** Staff Hours may be claimed for assessment, treatment, case management, referral and aftercare services that are authorized and approved by the HRA CalWORKs Employment and Training staff. A copy of the CADDs form for each new client enrolled during the report month will be submitted with each monthly claim. Alcohol or drug (AOD) services are to be employment focused, and in accordance with CalWORKs Welfare-to-Work plans and/or participation agreements. As authorized and approved by HRA, CalWORKs funds may also be claimed for participation in CalWORKs multidisciplinary team meetings; for outreach and education activities related to informing and encouraging CalWORKs recipients to enter into alcohol and drug treatment services; for start-up activities approved by the COUNTY Alcohol and Drug Program Administrator; and for participation as requested in multi-disciplinary team meetings. CONTRACTOR shall establish procedures for screening all clients at intake regarding their status as a CalWORKs recipient and refer

AMENDMENT 2 – EXHIBIT E-1
DESCRIPTION OF SERVICES

Contractor: Sobriety Works
 Component: Proposition 36 Outpatient
 Modality: Individual and Group Counseling
 Primary Target Groups Treated: Proposition 36 Drug Offenders
 Provider #: 44-4419

Budget and Unit of Service(UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$ 0	\$ 0	\$118,645
County Funding	\$ 0	\$ 0	\$118,645
Number of clients funded by County	0	0	211

PRIMARY PROBLEMS TREATED

The Sobriety Works Proposition 36 Outpatient Program provides co-ed, 12 Step, social model, bilingual (Spanish/English) addiction treatment and education, case management and referrals. Treatment includes individual and group therapy sessions used to facilitate the recovery process. Groups include process work, recovery support, drug and alcohol education, relapse prevention, special assignments, special populations and aftercare activities. Court appearances will be provided by treatment staff as required.

PROGRAM GOALS AND OBJECTIVES

GOAL I. Sobriety Works will provide a total of 2,824 Outpatient Counseling staff hours to 63 men and women referred by the SACPA Treatment Team. Sobriety Works will collect fees designated by the Court and provide monthly accounting to HSA and Probation. Random alcohol and drug testing will be provided as ordered by the court. Ancillary services will be provided ~~through~~ referral or directly

OBJECTIVE A. INDIVIDUAL COUNSELING. Of the 2,824 staff hours for Outpatient Services, Sobriety Works will provide 282 staff hours for Individual Counseling to 63 unduplicated clients.

A.1. Of the 282 hours, at least 183 staff hours will be for face-to-face Individual Counseling client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows, court appearances and session planning.

OBJECTIVE B. GROUP COUNSELING. Of the 2,824 staff hours for Outpatient Services, Sobriety Works will provide 2,542 staff hours for Group counseling to 63 unduplicated clients.

B.1. Of the 2,524 hours, at least 1,271 staff hours will be for face-to-face Group Counseling client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows, court appearances and session planning.

AMENDMENT 2 – EXHIBIT E-3
DESCRIPTION OF SERVICES

Contractor: Sobriety Works
 Component: Proposition 36 Outpatient
 Modality: Drug and Alcohol Testing
 Primary Target Groups Treated: Proposition 36 Drug Offenders

Provider #: 44-4419

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$ 0	\$ 0	\$ 10,796
County Funding	\$ 0	\$ 0	\$ 10,796
Number of clients funded by County	N/A	N/A	N/A

PRIMARY PROBLEMS TREATED

The Sobriety Works Proposition 36 Services will include drug and alcohol testing according to a schedule mandated by the Court.

PROGRAM GOALS AND OBJECTIVES

GOAL I: Sobriety Works will provide random alcohol and drug testing of Proposition 36 outpatient and residential clients as ordered by the Court. Testing will be conducted on site using the protocols established by the COUNTY. Results of the tests will be included in all reports on client progress provided to the SACPA Team. Costs of the testing will be offset first by fees collected from Proposition 36 clients, and then from non-Proposition 36 funds provided by the COUNTY.

OBJECTIVE A. Assay at least 85% of samples collected.

OBJECTIVE B. Conduct at least one full panel test per month, and test the remaining samples to be assayed for the client’s primary drug(s) of choice.

OBJECTIVE C. Where non-evidentiary tests are used, be prepared to submit the specimen for confirmatory analysis if a positive result is challenged by the client.

OBJECTIVE D. Report any positive test results to Probation within two working days of receiving the positive result.

**COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT**

0200

TO: Board of Supervisors
County Administrative Office
Auditor Controller

FROM: Health Services Agency (Department)

BY: [Signature] (Signature) 4/23/02 (Date)

Signature certifies that appropriations/revenues are available

AGREEMENTTYPE (Check One) Expenditure Agreement Revenue Agreement

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of same.

1. Said agreement is between the County of Santa Cruz Health Services Agency - ADP (Department/Agency)
and Santa Cruz Community Counseling Center, 195-A Harvey West Blvd, Santa Cruz CA 95060 (Name/Address)

2. The agreement will provide Alcohol & Drug Abuse Prevention, outpatient counseling, and residential services.

3. Period of the agreement is from July 1, 2001 to June 30, 2002

4. Anticipated Cost is \$ increased to \$1,720,249.00 Fixed Monthly Rate Annual Rate Not to Exceed

Remarks: This amendment increases the current contract by \$117,300.00.

5. Detail: On Continuing Agreements List for FY _____ Page CC-_____ Contract No: _____ OR 1st Time Agreement

Section II No Board letter required, will be listed under Item 8

Section III Board letter required

Section IV Revenue Agreement

6. Appropriations/Revenues are available and are budgeted in 364042 (Index) 3638 (Sub object)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACHED COMPLETED AUD-74 OR AUD-60

Appropriations are available and will be encumbered. Contract No. 10100

are not available and will be encumbered. By: [Signature] Date: 04/24/02

Auditor-Controller Deputy

Proposal and accounting detail reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize Health Services Administrator (Dept/Agency Head) to execute on behalf of the Health Services (Department/Agency)

Date: 4/25/02 By: [Signature]
County Administrative Office

Distribution:

Board of Supervisors - White State of California
Auditor Controller - Canary County of Santa Cruz
Auditor-Controller - Pink I _____ ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
Department - Gold State of California, do hereby certify that the foregoing request for approval of agreement was approved by said Board of Supervisors as recommended by the County Administrative Office by an order duly entered in the minutes of said Board on _____ 20__

ADM - 29 (8/01)
Title I, Section 300 Proc Man By: Deputy clerk

AUDITOR-CONTROLLER USE ONLY

CO	\$				
Document No.	JE Amount	Lines	H/T/L	Keyed By	Date
TC113	\$				
Auditor Description	\$	Amount	Index	Sub object	User Code

30

Contract No: 0100
Index: 364042
Subobject: 3638

AMENDMENT No. 2 TO AGREEMENT

The parties hereto agree to amend that certain above Agreement dated July 1, 2001, by the changes as follows:

A. Contract Payment Limit

1. Cover Sheet

Increasing the total contract maximum by \$1 17,300.00 for a new total contract maximum of \$1,720,249.00.

2. Budget Sheets

Deleting existing Exhibit A and Exhibit D, Page 15, and replacing with revised Exhibits A and Exhibit D, Page 15.

3. Scope of Service Sheets

Deleting existing Exhibits E-2, E-3, E-4, and E-8 and replacing with and Exhibits E-2, E-3, E-4, and E-8.

All other provisions of said Agreement, excepting those mentioned above, shall remain the same.

CONTRACTOR

COUNTY OF SANTA CRUZ

By: Paul M. O'Brien

By: _____

Health Services Agency

Approved as to form:

Jerry A. Oberholman III
County Counsel 4/9/02

AMENDMENT 1 – EXHIBIT A
INDIVIDUAL CONTRACTOR INFORMATION

- A.1. **ADMINISTRATION:** County's Alcohol and Drug Program Administrator, hereinafter called County's Administrator, under the direction of the Health Services Agency Administrator shall represent County in all **matters** pertaining to services rendered pursuant to this Agreement and shall administer this Agreement **on** behalf of County. Contractor's Executive Director shall administer this Agreement **on** behalf of Contractor.
- A.2. **TERM:** The **term** of this Agreement shall commence **on** July 1, 2001 and **continue** through **and** including June 30, 2002 during which time Contractor shall perform the services provided herein.
- A.3. **COMPENSATION** Total contract amount shall not exceed One Million, Seven Hundred Twenty Thousand, Two Hundred forty-nine and No/100 (\$1,720,249.00) for services performed during the term of this Agreement. In **no** event shall County obligation of State Drug and Alcohol Allocation base and required County funds exceed this amount.

FOR FEE-FOR-SERVICE CONTRACTS: County agrees to pay Contractor a **total s u m** not to exceed One Million, Three Hundred Seventy-six Thousand, Seven Hundred Twenty-seven **and** No/100 dollars (\$1,376,727.00) for services performed during the term of this Agreement in accord with the negotiated rates set forth in Exhibit D. CalWORKs **funds** may only be used **for** activities related to CalWORKs clients. Proposition 10 **funds** may only be used for activities related to Proposition 10 clients. Proposition 36 **funds** may only be used for activities related to Proposition 36 clients. In **no** event shall County obligation of State Drug and Alcohol Allocation **base**, Proposition 36 and Proposition 10 allocations and required County funds exceed **this** amount.

FOR COST REIMBURSEMENT CONTRACTS (DRUG COURT): County agrees to pay Contractor a **total s u m** not to exceed Two Hundred Ninety-four **Thousand**, Nine Hundred Eighty-one and No/100 dollars (\$294,981.00) for services performed during the term of this Agreement, based **on** reimbursement of allowable costs.

FOR DRUG MEDI-CAL CONTRACTS: County agrees to pay Contractor a **total s u m** not to exceed Forty-eight Thousand, Five Hundred Forty-one and No/100 Dollars (\$48,541.00) for Drug Medical services, **as** follows:

- a. \$48,541.00 of Minor Consent State Drug Medi-Cal Funds **for** services performed during the term of this Agreement, based on reimbursement of allowable costs.

In no event shall County be required to pay for the cost of services which are covered by **funding** received by Contractor from other governmental contracts or grants.

Contractor shall be paid only for Drug Medi-Cal units **of** service approved by the State. County shall not be required to pay Contractor for any Drug Medi-Cal **units** of service denied or disallowed by the State.

- A.4. **NOTICE:** Any notice or notices required or permitted to be given pursuant to this Agreement may be personally served **on** the other party by the party giving **such** notice, or may be served by **mail** to the County's Administrator at: County **of** Santa Cruz, **HEALTH SERVICES AGENCY**, Alcohol and Drug Programs, 1400 Emeline Avenue, Santa Cruz CA 95060, or to Contractor at: Santa Cruz Community Counseling Center, 195-A Harvey West Blvd., Santa Cruz, **CA** 95060.

AMENDMENT 1 – EXHIBIT D
FISCAL PROVISIONS

0203

D.1. **MAXIMUM ALLOCATION:** Contractor agrees that County's Maximum Allocation under the terms of this Agreement for each mode of service are listed below. The County reserves the right to change the source of funds based on County and State requirements.

BY FUNDING SOURCE

TOTAL	Modality	Other	CalWORKs SAT	Federal Drug Court	State Drug Court	Minor Consent State Drug MediCal	Prop. 10	Prop. 36
\$ 16,615	Prevention	\$ 16,615						
\$236,741	Outpatient Counseling	\$150,247	\$72,189				\$ 11,305	\$ 3,000
\$ 48,541	Outpatient Minor Consent DMC					\$48,541		
\$643,680	Residential – Sun Flower House	\$481,142	\$97,433				\$ 6,738	\$ 58,367
\$461,895	Residential – Se Si Puede	\$394,967			\$ 4,396			\$ 62,532
\$294,981	Drug Court			\$95,345	\$199,636			
\$ 7,000	Drinking Driver Assessment	\$ 7,000						
\$ 10,796	Prop. 36 Drug Testing	\$ 10,796						
\$1,720,249	Total	\$1,060,767	\$169,622	\$95,345	\$204,032	\$48,541	\$ 18,043	\$123,899

D.2. **FEE FOR SERVICE CONTRACTS UNIT OF SERVICE RATES:** County agrees to compensate Contractor at the unit of service rates set forth below. Settlement will be done at the end of the contract with the Cost Report. Contractors may request a change in the below rates, by a written request to the County Administrator. County Administrator may approve rate changes of 10% or less. Rate changes above 10% will require a contract amendment.

UNIT	RATE	SERVICE
Staff Hour – a.4.	\$56.13	Prevention
Staff Hour – a.1.	\$49.79	Outpatient Services
Staff Hour -a.2.	\$49.79	CalWORKs Outpatient Services
Staff Hour - a.3.	\$49.79	Proposition 10 Outpatient Counseling
D/MC Individual - b.	\$68.12	Youth Services Minor Consent D/MC Outpatient (Lesser of Cost or Rate Cap)
D/MC Group - c.	\$32.33	Youth Services Minor Consent D/MC Outpatient (Lesser of Cost or Rate Cap)
Bed Day - d.,d.1,d.2,d.3	\$65.01	Residential – Sunflower House (Individual Client)
Bed Day - d.,d.1,d.2,d.3	\$110.72	Residential – Sunflower House (Client with Child(ren))
Bed Day - d.,d.1,d.2,d.3	\$85.00	Residential – Se Si Puede (Individual Client)
Testing - e.	\$17.50	Proposition 36 Alcohol and Drug Testing
Assessment - f.	\$100.00	Drinking Driver Assessment

D.3. **DEFINITIONS:** Definition of above units of service shall be as follows:

- a. **STAFF HOUR:** Those hours that a direct service staff person is on the job and available to provide services. A direct service staff person is defined as a staff person who spends time providing services directly to program clients. Administrative, clerical and other support services may not be billed as staff hours. Staff time used for vacations, holidays, sick leave and other leave may not be billed to County. Volunteer and unpaid intern time may not be billed to County. Time to be billed in 15 minute increments of direct staff time. Staff Hours are claimed for the following modes of service:
 1. **Outpatient Services:** Staff Hours may include individual counseling and group therapy of a minimum of 3 and not more than 15 unrelated individuals, intake, assessment, case management and aftercare.
 2. **CalWORKs Outpatient Services:** Staff Hours may be claimed for assessment, treatment, case management, referral and aftercare services that are authorized and approved by the HRA CalWORKs Employment and Training staff. A copy of the CADDs form for each new client enrolled during the report month will be submitted with each monthly claim. Alcohol or drug (AOD) services are to be employment focused, and in accordance with CalWORKs Welfare-to-Work plans and/or participation agreements. As authorized and approved by HRA, CalWORKs funds may also be

claimed for participation in CalWORKs multi-disciplinary team meetings; for outreach and education activities related to informing and encouraging CalWORKs recipients to enter into alcohol and drug treatment services; for start-up activities approved by the County Alcohol and Drug Program Administrator; and for participation as requested in multi-disciplinary team meetings. Contractor shall establish procedures for screening all clients at intake regarding their status as a CalWORKs recipient and refer CalWORKs recipients who were not initially referred by the Human Resources Agency (HRA) back to HRA for inclusion of alcohol and drug treatment into their CalWORKs activity agreement and/or CalWORKs Welfare-to-Work plan. If access to service for clients referred under CalWORKs cannot be provided within seven days of the receipt of the HRA referral, Contractor shall inform HRA and the Health Services Agency (HSA) Alcohol and Drug Program, and work in cooperation with HRA and HSA to address access issues. Contractor will coordinate with HRA and HSA to develop participant tracking and monitoring systems, as needed, by the CalWORKs program. Contractor will also work with HRA and HSA to develop protocols for protecting client confidentiality and exchanging necessary and appropriate information as required for reporting purposes.

3. Proposition 10 Outpatient Services: Staff Hours may be claimed for assessment, treatment, case management, court appearances, referral and aftercare services that are authorized and approved by the HSA Mental Health Client Specialist as part of the Child Welfare Services Treatment Team. In addition, contractor will provide Client Progress Reports in accordance with County Protocols established in compliance with federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records, 42 C.F.R Part 2.
4. Proposition 36 Outpatient Services: Staff Hours may be claimed for assessment, treatment, case management, court appearances, referral and aftercare services that are authorized and approved by the HSA Mental Health Client Specialist as part of the Substance Abuse and Crime Prevention Act (SACPA) Treatment Team. In addition, CONTRACTOR will provide Client Progress Reports in accordance with COUNTY Protocols established in compliance with federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records, 42 C.F.R Part 2.
5. Prevention Services: Those hours that a direct service staff person is on the job and available to provide prevention services. Time is billed in 15-minute increments of direct work time.
 - b. DMC INDIVIDUAL SESSION: Face-to-face contact between D/MC beneficiary and a counselor, limited to intake, crisis intervention, collateral services, and treatment and discharge planning.
 - c. D/MC GROUP SESSION: Face-to-face contact in which one or more clients in a group of not less than four and no more than 10 clients is a D/MC beneficiary. Group will focus on short-term personal, family, job/school, and other problems and their relationship to substance abuse or return to substance abuse. Each beneficiary shall receive at least two group counseling sessions per month.
 - d. BED DAY: A bed day for an individual client is one in which one (1) treatment bed is utilized to provide 24-hour inpatient care for an individual client. In the case of bed days for clients with child(ren), a "treatment bed" includes provisions for beds for and care of both the client and their accompanying child(ren). The bed must be licensed and funded. The facility, staffing and other conditions necessary to provide the treatment services to a client occupying that bed must be available. Billable day shall include the day of admission, but not the day of discharge.
 1. CalWORKs Bed Day: CalWORKs bed days may be claimed for alcohol and drug residential services that are employment focused, and in accordance with CalWORKs Welfare to Work plans and/or participations agreements. CalWORKs bed days may be

claimed for assessment, treatment, case management, referral and aftercare services that are authorized and approved by the HRA CalWORKs Employment and Training staff. As authorized and approved by HRA, CalWORKs funds may also be claimed for participation in CalWORKs multi-disciplinary team meetings; for outreach and education activities related to informing and encouraging CalWORKs recipients to enter into alcohol and drug treatment services; for start-up activities approved by the County Alcohol and Drug Program Administrator; and for participation as requested in multi-disciplinary team meetings. Contractor shall establish procedures for screening all clients at intake regarding their status as a CalWORKs recipient and refer CalWORKs recipients who were not initially referred by the Human Resources Agency (HRA) back to HRA for inclusion of alcohol and drug treatment into their CalWORKs activity agreement and/or CalWORKs Welfare-to-Work plan. If access to service for clients referred under CalWORKs cannot be provided within seven days of the receipt of the HRA referral, Contractor shall inform HRA and the Health Services Agency (HSA) Alcohol and Drug Program, and work in cooperation with HRA and HSA to address access issues. Contractor will coordinate with HRA and HSA to develop participant tracking and monitoring systems, as needed, by the CalWORKs program. Contractor will also work with HRA and HSA to develop protocols for protecting client confidentiality and exchanging necessary and appropriate information as required for reporting purposes.

- 2. Proposition 10 Bed Day: Bed Days may be claimed for services that are authorized and approved by the HSA Mental Health Client Specialist as part of the Child Welfare Services Treatment Team. In addition, contractor will provide Client Progress Reports in accordance with County protocols established in compliance with federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records, 42 C.F.R Part 2.
- 3. Proposition 36 Bed Day: Bed Days may be claimed for services that are authorized and approved by the HSA Mental Health Client Specialist as part of the Substance Abuse and Crime Prevention Act (SACPA) Treatment Team. In addition, contractor will provide Client Progress Reports in accordance with County protocols established in compliance with federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records, 42 C.F.R Part 2.
- e. DRUG AND ALCOHOL TESTING: All Proposition 36 clients will be randomly tested using standard urinalysis and breathalyzer tests as ordered by the Court. A drug and alcohol test is defined as an all-inclusive unit of service that includes collecting, handling, initial and confirmatory assaying, and reporting on a drug and alcohol specimen. Tests shall be conducted randomly and administered according to American Probation and Parole Guidelines for drug testing and County protocols. Any client fees collected in the course of providing proposition 36 services shall first be used to reduce the costs of these tests as outlined in Exhibit C of this Agreement. Proposition 36 treatment funds may not be used for drug testing.
- f. ASSESSMENT: A County ADP approved assessment completed within 21 calendar days of client presentation of Drinking Driver Assessment Instructions Form, and submission of a standardized court-approved Treatment Evaluation and Recommendation to County ADP within 5 calendar days of completion of the assessment interview. Provider will be reimbursed by County only for assessments of clients referred by County.

D.4. ADVANCE BASE: Advances for NNA, CalWORKs, Proposition 36, Proposition 10, and Drug Medical services shall be made on a base of \$1,285,909. Advance Base does not include 15% of Federal Medical funds if applicable as outlined in the Fiscal Provisions in Exhibit C.8, Drug Court, or Drinking Driver Assessment funds. Settlement of final NNA and Drug Medical contract payments will be based on the final Cost Report.

D.5. DRUG MEDI-CAL ADMINISTRATIVE CHARGES: County administrative charges for Drug Medical services will not exceed 10% of the approved rate per unit of service, unless provider cost is less than the contract amount and County administrative cost is higher. Drug Medical

unit of service costs that exceed the rate may be paid up to the limit of County funds available, not to exceed actual costs of the Drug Medical program.

0206

- D.6. **MINOR CONSENT DRUG MEDI-CAL:** Contractor agrees to provide Minor Consent Drug Medical State services that meet the D/MC outpatient service guidelines and standards. In addition, Minor Consent D/MC Funds can only be earned for Minor Consent Drug Medical units of service reimbursed by the State. Unearned D/MC advances will be returned to the County.
- D.7. **COST REIMBURSEMENT (Drug Court):** Payment of Federal Block Grant, State and County funds shall be based on actual costs and shall not exceed \$294,981.
- D.8. **INCREASE IN MAXIMUM ALLOCATION FOR MODE OF SERVICE:** Funds may not be shifted between modalities, e.g., Outpatient and Residential, without written approval by County Administrator. Shifts can be requested to the extent that there are funds available as a result of reduced billings for another mode of service or other modes of services hereunder. Such shifting of funds shall be on a dollar for dollar basis and as the Maximum Allocation for provision of a particular mode of service is augmented, there shall be a corresponding reduction in the Maximum Allocation for another mode of service or modes of services. County reserves the right to redirect Proposition 10 and Proposition 36 funding to other services or organizations if funds are not utilized as intended or if other service priorities are established.

EXHIBIT E-2
DESCRIPTION OF SERVICES

0207

Contractor: Santa Cruz Community Counseling Center
 Component: Outpatient Services Provider #: 44-4487 & 44-4485
 Modality: Alto Individual and Group Counseling
 Primary Target Groups Treated: Poly Drug, Women and Latinos

Budget and Unit of Service (UOS) Data			
	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$147,815	\$151,801	\$245,711
County Funding	\$139,078	\$144,641	\$236,741
Number of clients funded by County	222	220	304

PRIMARY PROBLEMS TREATED

The ALTO Counseling Center treats a constellation of chemical dependence problems including educational deficits, unemployment, financial difficulties, health concerns, family problems, and criminal justice system involvement. Program services are designed on the basis of the severity of these chemical dependency problems and the wide scope of client needs. These factors require that traditional therapy services be combined with comprehensive assessment, intense clinical consultation, and extensive support services. The program provides services to the following under-served populations: poly drug abusers, female drug abusers, Latinos and individuals from these target populations who are involved with the criminal justice system.

PROGRAM GOALS AND OBJECTIVES

GOAL I. To provide comprehensive intake/assessment and outpatient counseling services to substance abusing adults. Intake services will include: assessment of impact of drug use and degree of dysfunction in the areas of psychosocial, education/vocational, and justice system involvement, and medical review of health history for obtaining physical exams as needed. Outpatient services will include individual counseling, group counseling and family therapy as determined by client needs.

OBJECTIVE A. OUTPATIENT COUNSELING. Santa Cruz Community Counseling Center will provide a total of 3,202 Outpatient Counseling staff hours at the Alto Counseling Center to 218 poly-drug users, women and Latinos.

- a. North County: 1,601 total staff hours (50%).
 - b. South County: 1,601 total staff hours (50%).
- A.1. Santa Cruz Community Counseling Center will encourage non-Medical clients to participate financially in their own recovery by charging for outpatient services according to each individual's ability to pay, in order to extend the units of service which may be provided by public funding. No client will be turned away because of inability to pay.
- A.2. Of the 218 clients, Santa Cruz Community Counseling Center will provide Outpatient services to the following hard to reach populations:
- a. 35% Women.
 - b. 25% Latinos,
 - c. 15% IVDU clients.

OBJECTIVE B. INDIVIDUAL COUNSELING. Of the 3,202 staff hours for Outpatient Services, Santa Cruz Community Counseling Center will provide 2,882 staff hours of Individual Counseling to 174 unduplicated clients.

0208

- a. North County: 1,441 staff hours (50%).
- b. South County: 1,441 staff hours (50%).

B.1. Of the 2,882 hours at least 1,441 staff hours will be for Individual Counseling face-to-face client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows and session planning.

OBJECTIVE C. GROUP COUNSELING. Of the 3,202 staff hours for Outpatient services, Santa Cruz Community Counseling Center will provide 320 staff hours for Group Counseling to 44 unduplicated clients.

- a. North County: 160 staff hours (50%).
- b. South County: 160 staff hours (50%).

C.1. Of the 320 hours, at least 160 staff hours will be devoted to face-to-face client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows and session planning.

GOAL 11. To provide a total of 1450 outpatient staff hours to 72 unduplicated CalWORKs clients for services including assessment, treatment, case management, referral and aftercare services that are authorized and approved by the HRA CalWORKs Employment and Training staff. Alcohol or drug (AOD) services are to be employment focused, and in accordance with CalWORKs Welfare-to-Work plans and/or participation agreements.

OBJECTIVE A. INDIVIDUAL COUNSELING. Of the 1,450 staff hours for Outpatient Services, provide 1,378 staff hours for Individual Counseling to 59 unduplicated clients.

A.1. Of the 1,378 hours, at least 689 staff hours will be for face-to-face Individual Counseling client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows and session planning.

OBJECTIVE B. GROUP COUNSELING. Of the 1450 staff hours for Outpatient Services, provide 72 staff hours for Group Counseling to 13 unduplicated clients.

B.1. Of the 72 hours, at least 36 staff hours will be devoted to face-to-face client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows and session planning.

GOAL 111. To provide a total of 228 outpatient staff hours for 11 unduplicated Proposition 10 clients for services including assessment, treatment, case management, court appearances, referral and aftercare services that are authorized and approved by the HSA Mental Health Client Specialist as part of the Child Welfare Services Treatment Team. In addition, CONTRACTOR will provide Client Progress Reports in accordance with COUNTY Protocols.

OBJECTIVE A. INDIVIDUAL COUNSELING. Of the 228 staff hours for Outpatient Services, provide 217 staff hours for Individual Counseling to 9 unduplicated clients.

A.1. Of the 217 hours, at least 109 staff hours will be for face-to-face Individual Counseling client services. Face-to-face client service staff

hours will not equal available staff hours because of staff time for charting, no-shows and session planning.

0209

OBJECTIVE B. GROUP COUNSELING. Of the 228 staff hours for Outpatient Services, provide 11 staff hours for Group Counseling to 2 unduplicated clients.

B.1. Of the 11 hours, at least 6 staff hours will be devoted to face-to-face client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows and session planning.

GOAL IV. To provide a total of 60 outpatient staff hours for 3.5 unduplicated Proposition 36 clients for services including assessment, treatment, case management, court appearances, referral and aftercare services that are authorized and approved by the HSA Mental Health Client Specialist as part of the Substance Abuse and Crime Prevention Act (SACPA) Treatment Team. Fenix Services, Inc. will provide Client Progress Reports in accordance with COUNTY Protocols. In addition, Fenix Services, Inc. will collect fees designated by the Court and provide monthly accounting to HSA and Probation. Random alcohol and drug testing will be provided as ordered by the court. Ancillary services will be provided through referral or directly.

OBJECTIVE A. INDIVIDUAL COUNSELING. Of the 60 staff hours for Outpatient Services, provide 30 staff hours for Individual Counseling to 3.5 unduplicated clients.

A.1. Of the 30 hours, at least 15 staff hours will be for face-to-face Individual Counseling client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows and session planning.

OBJECTIVE B. GROUP COUNSELING. Of the 60 staff hours for Outpatient Services, provide 30 staff hours for Group Counseling to 3.5 unduplicated clients.

B.1. Of the 30 hours, at least 15 staff hours will be devoted to face-to-face client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows and session planning.

EXHIBIT E-3
DESCRIPTION OF SERVICES

0210

Contractor: Santa Cruz Community Counseling Center
 Component: Residential Services Provider #: 44-4486
 Modality: Sunflower House Residential
 Primary Target Groups Treated: Poly Drug Users, Women and Other Custodial Parents

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$539,220	\$497,436	\$683,200
County Funding	\$460,037	\$403,637	\$643,680
Number of clients funded by County	107	50	106

PRIMARY PROBLEMS TREATED

Sunflower House is a licensed residential treatment community providing comprehensive rehabilitation services for substance abusing men and women ages 18-64. The program includes four phases of treatment and is 9-12 months in length. Sunflower House places a special emphasis on providing treatment services to high risk, hard-to-reach populations.

GOAL I: To provide comprehensive residential treatment and rehabilitation services for drug dependent adults at Sunflower House, in Santa Cruz County.

OBJECTIVE A. RESIDENTIAL. Santa Cruz Community Counseling Center will provide residential treatment with an average length of treatment of 6 months to poly-drug users, women and Latinos, at Sunflower House.

- A.2. Sunflower House will provide the following:
 - a. A total of 25.34 facility beds with an average 85% occupancy rate.
 - b. 7,863 bed days of residential treatment per year.
 - c. Residential services to 86 poly-drug users, women and Latinos.
- A.3. To extend the units of service that are provided from public funding Santa Cruz Community Counseling Center will encourage non-Medical clients to participate financially in their own recovery by charging for residential services according to each individual's ability to pay. No client will be turned away because of inability to pay.
- A.4. Of the 86 clients, Santa Cruz Community Counseling Center will provide Residential services to the following hard to reach populations:
 - a. 1,180 bed days to 12 Latino clients.
 - b. 2,595 bed days to 25 women.
 - c. 3,931 bed days to clients referred from the criminal justice system.

OBJECTIVE B. CalWORKs RESIDENTIAL. Santa Cruz Community Counseling Center will provide residential treatment with an average length of treatment of 3 months to CalWORKs poly-drug users, women and custodial parents, at Sunflower House.

- A.1. Sunflower House will provide the following:
 - a. A total of 2.3 facility beds with an average 85% occupancy rate.
 - b. 710 bed days of CalWORKs Residential treatment per year.
 - c. CalWORKs Residential services to 9 CalWORKs poly-drug users, women and custodial parents.
- A.2. Of the 9 clients, Santa Cruz Community Counseling Center will provide CalWORKs Residential services to the following hard to reach populations:
 - a. 36 bed days to Latinos
 - b. 620 BED days to Women.

OBJECTIVE C. PROPOSITION 36 RESIDENTIAL. Santa Cruz Community Counseling Center will provide residential treatment with an average length of treatment of 3 months to Proposition 36 poly-drug users, women and custodial parents, at Sunflower House.

- A.1. Sunflower House will provide the following:
 - a. A total of 2.9 facility beds with an average 85% occupancy rate.
 - b. 898 bed days of Proposition 36 Residential treatment per year.
 - c. Proposition 36 Residential services to 10 poly-drug users, women and custodial parents.

OBJECTIVE D. PROPOSITION 10 RESIDENTIAL. Santa Cruz Community Counseling Center will provide residential treatment with an average length of treatment of 3 months to Proposition 10 poly-drug users, women and custodial parents, at Sunflower House. Staff will provide client updates to HSA and HRA caseworkers as required by County protocols.

- A.1. Sunflower House will provide the following:
 - a. A total of 0.3 facility beds with an average 85% occupancy rate.
 - b. 104 bed days of Proposition 10 Residential treatment per year.
 - c. Proposition 10 Residential services to 1 poly-drug user, woman or custodial parent.

EXHIBIT E-4
DESCRIPTION OF SERVICES

0212

Contractor: Santa Cruz Community Counseling Center
 Component: Residential Services Provider #: 44-4482
 Modality: Se Si Puede Residential
 Primary Target Groups Treated: Juvenile and Adult Latino Males, Poly-Drug

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$463,388	\$534,598	\$593,877
County Funding	\$345,132	\$435,693	\$461,895
Number of clients funded by County	73	75	69.5

PRIMARY PROBLEMS TREATED

Si Se Puede is a licensed residential treatment community providing comprehensive rehabilitation services targeting substance abusing Latino juveniles and adult males, ages 15 and above. The program consists of 6 months of residential treatment followed by 3 - 6 months of transition back into the community. Si Se Puede places a special emphasis on providing culturally relevant treatment services to Latino juvenile and adult males involved in the criminal justice system.

GOALS AND OBJECTIVES

GOAL I: To provide comprehensive residential treatment, transition and rehabilitation services to alcohol and drug dependent juvenile and adult males.

OBJECTIVE A. RESIDENTIAL. Santa Cruz Community Counseling Center will provide residential treatment with an average length of treatment of 9 months to juvenile and adult Latino males, and poly-drug users, at Si Se Puede.

- A.1. Si Se Puede will provide the following:
 - a. A total of **15.5** facility beds with an average 85% occupancy rate.
 - b. 4,819 bed days of Residential treatment per year.
 - c. Residential services to 63 juvenile and adult Latino males, and poly-drug users.
- A.2. To extend the units of service that are provided from public funding Santa Cruz Community Counseling Center will encourage non-Medical clients to participate financially in their own recovery by charging for residential services according to each individual's ability to pay. No client will be turned away because of inability to pay.
- A.3. Of the 63 clients, Santa Cruz Community Counseling Center will provide Residential services to the following hard to reach populations:
 - a. 4,578 bed days to Latinos
 - b. 3,373 bed days to clients referred from the criminal justice sytem.
 - c. 620 bed days to juveniles.

OBJECTIVE B. PROPOSITION 36 RESIDENTIAL. Santa Cruz Community Counseling Center will provide residential treatment with an average length of treatment of 3 months to Proposition 36 poly-drug users, women and custodial parents, at Si

Se Puede.

0213

A.1. Si Se Puede will provide the following:

- a. A total of 1.8 facility beds with an average 85% occupancy rate.
- b. 583 bed days of Proposition 36 Residential treatment per year.
- c. Proposition 36 Residential services to 6.5 poly-drug users, women and custodial parents.

EXHIBIT E-8
DESCRIPTION OF SERVICES

0214

Contractor: Santa Cruz Community Counseling Center
 Component: Proposition 36 Outpatient
 Modality: Drug and Alcohol Testing
 Primary Target Groups Treated: Proposition 36 Drug Offenders

Provider #: 44-4482

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$ 0	\$ 0	\$ 10,796
County Funding	\$ 0	\$ 0	\$ 10,796
Number of clients funded by County	N/A	N/A	N/A

PRIMARY PROBLEMS TREATED

Santa Cruz Community Counseling Center Proposition 36 Services will include drug and alcohol testing according to a schedule mandated by the Court.

PROGRAM GOALS AND OBJECTIVES

GOAL I: Santa Cruz Community Counseling Center will provide random alcohol and drug testing of Proposition 36 outpatient and residential clients as ordered by the Court. Testing will be conducted on site using the protocols established by the COUNTY. Results of the tests will be included in all reports on client progress provided to the SACPA Team. Costs of the testing will be offset first by fees collected from Proposition 36 clients, and then from non-Proposition 36 funds provided by the COUNTY.

OBJECTIVE A. Assay at least 85% of samples collected.

OBJECTIVE B. Conduct at least one full panel test per month, and test the remaining samples to be assayed for the client's primary drug(s) of choice.

OBJECTIVE C. Where non-evidentiary tests are used, be prepared to submit the specimen for confirmatory analysis if a positive result is challenged by the client.

OBJECTIVE D. Report any positive test results to Probation within two working days of receiving the positive result.

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT

TO: Board of Supervisors
County Administrative Office
Auditor Controller

FROM: Health Services Agency (Department)

BY: [Signature] (Signature) 4/23/02 (Date)
Signature certifies that appropriations/revenues are available

AGREEMENT TYPE (Check One)

Expenditure Agreement

Revenue Agreement

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of same.

1. Said agreement is between the County of Santa Cruz Health Services Agency - ADP (Department/Agency)
and New Life Community Services, 707 Fair Ave., Santa Cruz, CA 95060 (Name/Address)

2. The agreement will provide Proposition 36 residential and outpatient drug and alcohol counseling and drug and alcohol testing.

3. Period of the agreement is from July 1, 2001 to June 30, 2002

4. Anticipated Cost is \$ increased to 217,686 Fixed Monthly Rate Annual Rate Not to Exceed

Remarks: This amendment increases the current contract by \$143,537.

5. Detail: On continuing Agreements List for FY _____ Page CC-_____ Contract No: _____ OR 1st Time Agreement

- Section II No Board letter required, will be listed under Item 8
- Section III Board letter required
- Section IV Revenue Agreement

6. Appropriations/Revenues are available and are budgeted in 364042 (Index) 3638 (Sub object)

NOTE: IF APPROPRIATIONS ARE INSUFRCIENT, ATTACHED COMPLETED AUD-74 OR AUD-60

Appropriations are available and will be encumbered.
are not

Contract No. 12537

By: [Signature]
Auditor-Controller Deputy

Date: 04/24/02

Proposal and accounting detail reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize

Health Services Administrator (Dept/Agency Head) to execute on behalf of the Health Services

(Department/Agency)

Date: 4/25/02

By: [Signature]
County Administrative Office

Distribution:

Board of Supervisors - White
Auditor Controller - Canary
Auditor-Controller - Pink
Department - Gold

State of California
County of Santa Cruz

I _____ ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz, State of California, do hereby certify that the foregoing request for approval of agreement was approved by said Board of Supervisors as recommended by the County Administrative Office by an order duly entered in the minutes of said Board on _____ 20__

ADM - 29 (8/01)
Title I, Section 300 Proc Man

By: Deputy Clerk

AUDITOR-CONTROLLER USE ONLY

CO _____ \$ _____
Document No. JE Amount Lines H/TL Keyed By Date

TC110 _____ \$ _____ / _____
Auditor Description Amount Index Sub object User Code

Contract No: 2537
Index: 364042
Subobject: 3638

AMENDMENT No. 1 TO AGREEMENT

The parties hereto agree to amend that certain above Agreement dated July 1, 2001, by the changes as follows:

A. Contract Payment Limit

1. Cover Sheet

Increasing the total contract maximum by \$143,537.00 for a new total contract maximum of \$217,686.00.

2. Budget Sheets

Deleting existing Exhibit A and Exhibit D, Pages 2 and 16, and replacing with revised Exhibits A and Exhibit D, Pages 2 and 16.

3. Scope of Service Sheets

Deleting existing Exhibit E-1 through E-3, Pages 19, 21, and 22 and replacing with Exhibit E-1 through E-3, Pages 19, 21, and 22.

All other provisions of said Agreement, excepting those mentioned above, shall remain the same.

CONTRACTOR

COUNTY OF SANTA CRUZ

By: *Steve Stiles*

By: _____

Health Services Agency

Approved as to form:

Henry A. Oberhelman III
County Counsel *4/9/02*

AMENDMENT 1 – EXHIBIT A
INDIVIDUAL CONTRACTOR INFORMATION

- A.1. ADMINISTRATION: COUNTY'S Alcohol and Drug Program Administrator, hereinafter called COUNTY'S Administrator, under the direction of the Health Services Agency Administrator shall represent COUNTY in all matters pertaining to services rendered pursuant to this Agreement and shall administer this Agreement on behalf of COUNTY. CONTRACTOR'S Executive Director shall administer this Agreement on behalf of CONTRACTOR.
- A.2. TERM: The term of this Agreement shall commence on July 1,2001 and continue through and including June 30,2002 during which time CONTRACTOR shall perform the services provided herein.
- A.3 COMPENSATION: Total contract amount shall not exceed Two-Hundred Seventeen Thousand Six Hundred Eighty-six and No/100 (\$217,686.00) for services performed during the term of this Agreement. In no event shall COUNTY obligation of State Drug and Alcohol Allocation base and required COUNTY funds exceed this amount.

FOR FEE-FOR-SERVICE CONTRACTS: COUNTY agrees to pay CONTRACTOR a total sum not to exceed Two-Hundred Seventeen Thousand Six Hundred Eighty-six and No/100 (\$217,686.00) for services performed during the term of this Agreement in accord with the negotiated rates set forth in Exhibit D. CalWORKs funds may only be used for activities related to CalWORKs clients. Proposition 10 funds may only be used for activities related to Proposition 10 clients. Proposition 36 funds may only be used for activities related to Proposition 36 clients. In no event shall COUNTY obligation of State Drug and Alcohol Allocation base, Proposition 36 and Proposition 10 allocations and required COUNTY funds exceed this amount.

In no event shall COUNTY be required to pay for the cost of services which are covered by funding received by CONTRACTOR from other governmental contracts or grants.

- A.4. NOTICE: Any notice or notices required or permitted to be given pursuant to this Agreement may be personally served on the other party by the party giving such notice, or may be served by mail to the COUNTY'S Administrator at: County of Santa Cruz, HEALTH SERVICES AGENCY, Alcohol and Drug Programs, 1400 Emeline Avenue, Santa Cruz CA 95060, or to CONTRACTOR at: New Life Community Services, Inc., 707 Fair Avenue, Santa Cruz, CA 95060.

AMENDMENT 1 – EXHIBIT D
FISCAL PROVISIONS

- D.1. MAXIMUM ALLOCATION: CONTRACTOR agrees that COUNTY'S Maximum Allocation under the terms of this Agreement for each mode of service are listed below. The COUNTY reserves the right to change the source of funds based on COUNTY and State requirements.

BY FUNDING SOURCE

TOTAL	Modality	Other Funds	Proposition 36
\$ 27,744	Proposition 36 Outpatient Counseling	\$ 0	\$ 27,744
\$ 179,146	Proposition 36 Residential Treatment	\$ 0	\$ 179,146
\$ 10,796	Proposition 36 Alcohol & Drug Testing	\$ 10,796	\$ 0
\$ 217,686	TOTAL	\$ 10,796	\$ 206,890

- D.2. FEE FOR SERVICE CONTRACTS UNIT OF SERVICE RATES: COUNTY agrees to compensate CONTRACTOR at the unit of service rates set forth below. Settlement will be done at the end of the contract with the Cost Report. CONTRACTORS may request a change in the below rates, by a written request to the COUNTY Administrator. COUNTY Administrator may approve rate changes of 10% or less. Rate changes above 10% will require a contract amendment.

UNIT	RATE	SERVICE
Staff Hour – d	46.00	Proposition 36 Outpatient Counseling
Bed Day – c	68.00	Proposition 36 Residential Treatment
Drug Test	17.50	Proposition 36 Alcohol & Drug Testing

- D.3. DEFINITIONS: Definition of above units of service shall be as follows:

STAFF HOUR: Those hours that a direct service staff person is on the job and available to provide services. A direct service staff person is defined as a staff person who spends time providing services directly to program clients. Administrative, clerical and other support services may not be billed as staff hours. Staff time used for vacations, holidays, sick leave and other leave may not be billed to COUNTY. Volunteer and unpaid intern time may not be billed to COUNTY. Time to be billed in 15 minute increments of direct staff time. Staff Hours are claimed for the following modes of service:

- a. **Outpatient Services:** Staff Hours may include individual counseling and group therapy of a minimum of 3 and not more than 15 unrelated individuals, intake, assessment, case management and aftercare.
- b. **CalWORKs:** Staff Hours may be claimed for assessment, treatment, case management, referral and aftercare services that are authorized and approved by the HRA CalWORKs Employment and Training staff. A copy of the CADDs form for each new client enrolled during the report month will be submitted with each monthly claim. Alcohol or drug (AOD) services are to be employment focused, and in accordance with CalWORKs Welfare-to-Work plans and/or participation agreements. As authorized and approved by HRA, CalWORKs funds may also be claimed for participation in CalWORKs multi-disciplinary team meetings; for outreach and education activities related to informing and encouraging CalWORKs recipients to enter into alcohol and drug treatment services; for start-up activities approved by the COUNTY Alcohol and Drug Program Administrator; and for participation as requested in multi-disciplinary team meetings. CONTRACTOR shall establish procedures for screening all clients at intake regarding their status as a CalWORKs recipient and refer CalWORKs recipients who were not initially referred by the Human Resources Agency (HRA) back to HRA for inclusion of alcohol and drug treatment into their CalWORKs activity agreement and/or CalWORKs Welfare-to-Work plan. If access to service for clients referred under CalWORKs cannot be provided within seven days of the receipt of the HRA referral,

AMENDMENT 1 – EXHIBIT E-1
DESCRIPTION OF SERVICES

Contractor: New Life Community Services
 Component: Proposition 36 Outpatient
 Modality: Individual and Group Counseling
 Primary Target Groups Treated: Proposition 36 Drug Offenders

Provider #: 44-4418

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$ 0	\$ 0	\$ 27,744
County Funding	\$ 0	\$ 0	\$ 27,744
Number of clients funded by County	0	0	42

PRIMARY PROBLEMS TREATED

The New Life Community Services, Inc. Proposition 36 Outpatient Program provides co-ed, 12 Step, social model, bilingual (Spanish/English) addiction treatment, case management and referrals. Treatment includes individual and group therapy sessions used to facilitate the recovery process. Groups include intra-psychic, recovery support, broad-based education, drug and alcohol education, relapse prevention, special assignments, special populations and aftercare activities. Court appearances will be provided by treatment staff as required.

PROGRAM GOALS AND OBJECTIVES

GOAL 1. New Life Community Services will provide a total of 603 Outpatient Counseling staff hours to 42 men and women referred by the Proposition 36 SACPA Treatment Team. New Life Community Services, Inc. will collect fees designated by the Court and provide monthly accounting to HSA and Probation. Random alcohol and drug testing will be provided as ordered by the court. Ancillary services will be provided through referral or directly.

OBJECTIVE A. INDIVIDUAL COUNSELING. Of the 603 staff hours for Outpatient Services, New Life Community Services will provide 199 staff hours for Individual Counseling to 42 unduplicated clients.

A.1. Of the 199 hours, at least 130 staff hours will be for face-to-face Individual Counseling client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows, court appearances and session planning.

OBJECTIVE B. GROUP COUNSELING. Of the 603 staff hours for Outpatient Services, New Life Community Services will provide 405 staff hours for Group Counseling to 42 unduplicated clients.

B.1. Of the 405 hours, at least 202 staff hours will be for face-to-face Group Counseling client services. Face-to-face staff hours will not equal available staff hours because of staff time for charting, no-shows, court appearances and session planning.

GOAL V. (APPLIES TO ALL E EXHIBITS) To promote staff development and competency by providing training to staff.

AMENDMENT 1 – EXHIBIT E-2
DESCRIPTION OF SERVICES

0220

Contractor: New Life Community Services
 Component: Proposition 36 Residential Treatment
 Modality: Residential Treatment
 Primary Target Groups Treated: Proposition 36 Drug Offenders

Provider #: 44-4418

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$ 0	\$ 0	\$ 179,146
County Funding	\$ 0	\$ 0	\$ 179,146
Number of clients funded by County	0	0	62

PRIMARY PROBLEMS TREATED

The New Life Community Services, Inc. Proposition 36 Outpatient Program provides co-ed, 12 Step, social model, bilingual (Spanish/English) addiction treatment, case management and referrals. Residential Treatment includes individual and group therapy sessions used to facilitate the recovery process. Groups include intra-psychic, recovery support, broad-based education, drug and alcohol education, relapse prevention, special assignments, special populations and aftercare activities. Court appearances will be provided by treatment staff as required.

PROGRAM GOALS AND OBJECTIVES

GOAL I: New Life Community Services, Inc. will operate and maintain **62** residential treatment beds for adult residents and their children in accordance with the “Standards for Direct Alcohol Treatment Services” published by the State Department of Alcohol and Drug programs, and the “County Monitoring Manual For Treatment Providers,” prepared by the State Division of Drug programs.

OBJECTIVE A. RESIDENTIAL TREATMENT. New Life Community Services, Inc. will provide residential treatment from 28 days to 12 months to men and women, referred by the SACPA Treatment Team.

- A.1. New Life Community Services, Inc. will provide the following:
 - a. A total of 62 facility beds with an average 85% occupancy rate for COUNTY qualified clients.
 - b. 2634 bed days of Proposition 36 Residential Treatment per year.
- A.2. Random alcohol and drug testing will be provided as ordered by the court. Ancillary services will be provided through referral or directly.
- A.3. New Life Community Services, Inc. will collect fees designated by the Court and provide monthly accounting to HSA and Probation.

AMENDMENT 1 – EXHIBIT E-3
DESCRIPTION OF SERVICES

Contractor: New Life Community Services
 Component: Proposition 36 Outpatient
 Modality: Drug and Alcohol Testing
 Primary Target Groups Treated: Proposition 36 Drug Offenders

Provider #: 44-4418

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$ 0	\$ 0	\$ 10,796
County Funding	\$ 0	\$ 0	\$ 10,796
Number of clients funded by County	N/A	N/A	N/A

PRIMARY PROBLEMS TREATED

The New Life Community Services, Inc. Proposition 36 Services will include drug and alcohol testing according to a schedule mandated by the Court.

PROGRAM GOALS AND OBJECTIVES

GOAL I: New Life Community Services, Inc. will provide random alcohol and drug testing of Proposition 36 outpatient and residential clients as ordered by the Court. Testing will be conducted on site using the protocols established by the COUNTY. Results of the tests will be included in all reports on client progress provided to the SACPA Team. Costs of the testing will be offset first by fees collected from Proposition 36 clients, and then from non-Proposition 36 funds provided by the COUNTY.

OBJECTIVE A. Assay at least 85% of samples collected.

OBJECTIVE B. Conduct at least one full panel test per month, and test the remaining samples to be assayed for the client’s primary drug(s) of choice.

OBJECTIVE C. Where non-evidentiary tests are used, be prepared to submit the specimen for confirmatory analysis if a positive result is challenged by the client.

OBJECTIVE D. Report any positive test results to Probation within two working days of receiving the positive result.

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT

TO: Board of Supervisors
County Administrative Office
Auditor Controller

FROM: Health Services Agency (Department)

BY: [Signature] (Signature) 4/23/02 (Date)
Signature certifies that appropriations/revenues are available

AGREEMENT TYPE (Check One)

Expenditure Agreement [X]

Revenue Agreement []

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of same.

1. Said agreement is between the Health Services Agency - Alcohol & Drug (Department/Agency)
and Janus of Santa Cruz, 200 7th Ave., Suite 150, Santa Cruz, CA 95062 (Name/Address)

2. The agreement will provide residential, detox and outpatient alcohol and drug abuse treatment
services.

3. Period of the agreement is from July 1, 2001 to June 30, 2002

4. Anticipated Cost is \$ increased to \$1,499,400 [] Fixed [] Monthly Rate [] Annual Rate [] Not to Exceed

Remarks: Auditor Controller: Please encumber an additional \$91,622 in 133-01

5. Detail: [] On Continuing Agreements List for FY - . Page CC- . Contract No: . OR [] 1st Time Agreement
[] Section II No Board letter required, will be listed under Item 8
[X] section III Board letter required
[] Section IV Revenue Agreement

362950 (Suffix 02) 3638 \$30,000

6. Appropriations/Revenues are available and are budgeted in 364042 (Suffix 01) (Index) 3638 \$1,469,400 (Sub object)

NOTE: IF APPROPRIATIONS ARE INSUFRCIENT, ATTACHED COMPLETED AUD-74 OR AUD-60

Appropriations are available and will be encumbered.

Contract No: 0133

By: [Signature] Auditor-Controller Deputy

Date: 04/24/02

Proposal and accounting detail reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize
Health Services Administrator (Dept/Agency Head) to execute on behalf of the
(Department/Agency)

Date: 4/25/02

By: [Signature] County Administrative Office

Distribution:

Board of supervisors - white
Auditor Controller - Canary
Auditor-Controller - Pink
Department - Gold

State of California
County of Santa Cruz
I, [Signature] ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
State of California, do hereby certify that the foregoing request for approval of agreement was ap-
proved by said Board of Supervisors as recommended by the County Administrative Office by an
order duly entered in the minutes of said Board on 20

ADM - 29 (8/01)
Title I, Section 300 Proc Man

By: Deputy Clerk

AUDITOR-CONTROLLER USE ONLY

CO Document No. JE Amount Lines H/TL Keyed By Date

30 Auditor Description Amount Index Sub object User Code

Contract No: 0133
Index: 364042
Subobject: 3638

AMENDMENT No. 1 TO AGREEMENT

The parties hereto agree to amend that certain above Agreement dated July 1, 2001, by the changes as **follows**:

A. Contract Payment Limit

1. Cover Sheet

Increasing the total contract maximum by ~~\$57,622.00~~ for a new total contract maximum of **\$1,499,400.00**.

2. Budget Sheets

Deleting existing Exhibit A and Exhibit D, Pages 2 and 15, and replacing with revised Exhibits A and Exhibit **D**, Pages 2 and 15.


3. Scope of Service Sheets

Deleting existing Exhibit **E-1** through **E-9**, Pages 20 through 36 and replacing with revised Exhibit **E-1** through E-9, Pages 20 through 36.

All other provisions of said Agreement, excepting those mentioned above, shall remain the same.

CONTRACTOR


COUNTY **OF SANTA CRUZ**

By: 

By: _____

Health Services Agency

Approved **as** to form:


County Counsel 4/9/02

AMENDMENT 1 – EXHIBIT A
INDIVIDUAL CONTRACTOR INFORMATION

- A.1. **ADMINISTRATION** COUNTY'S Alcohol and Drug Program Administrator, hereinafter called COUNTY'S Administrator, under the direction of the Health Services Agency Administrator shall represent COUNTY in **all** matters pertaining to services rendered pursuant to **this** Agreement and **shall** administer **this** Agreement on behalf of COUNTY. CONTRACTORS Executive Director shall administer **this** Agreement **on behalf of** CONTRACTOR
- A.2. **TERM:** The term of this Agreement shall commence on July 1, 2001 and continue through and including June 30, 2002 during which time CONTRACTOR **shall** perform the services provided herein.
- A.3. **COMPENSATION** ~~Total~~ contract amount shall not exceed One **Million**, Four Hundred Ninety-nine Thousand, **Four** Hundred and **No/100** Dollars (\$1,499,400.00) for services performed during the **term** of **this** Agreement. In no event shall COUNTY obligation of State Drug and Alcohol Allocation **base** and required COUNTY funds exceed this amount.

FOR FEE-FOR-SERVICE CONTRACTS: COUNTY agrees to pay CONTRACTOR a total **sum** not to exceed One Million, Three Hundred Fifty-seven Thousand, One Hundred Fourteen and No/100 Dollars (\$1,357,114.00) for services performed during the term of **this** Agreement in accord with the negotiated rates set forth in Exhibit D.

FOR COST **REIMBURSEMENT** CONTRACTS: COUNTY agrees to pay CONTRACTOR a total **sum** not to exceed Sixty-one Thousand Five Hundred Eighty-two and No/100 (\$61,582.00) for services **as** set forth in Exhibit D.

In no event shall COUNTY be required to pay for the cost of services which are covered by funding received by CONTRACTOR from other governmental **contracts** or grants.

FOR DRUG MEDI-CAL CONTRACTS: COUNTY agrees to pay CONTRACTOR a total **sum** not to exceed Eighty Thousand, Seven Hundred Four and No/100 Dollars (\$80,704.00) for Drug/MediCal services, **as** follows:

- (a) \$40,352.00 State General Fund Match to Drug/MediCal and
- (b) \$40,352.00 Federal Drug/MediCal funds,

for services performed during the term of **this** Agreement, based on reimbursement **of** allowable costs.

In no event shall COUNTY be required to pay for the cost of services which are covered by funding received **by** CONTRACTOR **from** other governmental contracts or grants.

CONTRACTOR shall be paid only for Drug Medi-Cal units **of** service approved by the State. COUNTY shall not be required **to** pay CONTRACTOR for any Drug Medi-Cal **units of** service denied or disallowed by the State.

- A.4. **NOTICE:** Any notice or notices required or permitted to be given pursuant to this Agreement may be personally served on the other party by the party **giving** such notice, or **may** be served by mail to the COUNTY'S Administrator at: County of Santa Cruz, **HEALTH SERVICES AGENCY**, Alcohol and Drug Programs, 1400 Emeline Avenue, Santa Cruz CA **95060**, or to CONTRACTOR at: Janus **of** Santa Cruz, Inc., 200 **7th** Avenue, ~~Suite~~ 150, Santa Cruz, CA 95062.

**AMENDMENT 1 – EXHIBIT D
FISCAL, PROVISIONS**

D.1. MAXIMUM ALLOCATION: CONTRACTOR agrees that **COUNTY'S** Maximum Allocation under the terms of this Agreement for each mode of service are listed below. The COUNTY reserves the right to change the source of funds based on COUNTY and State requirements.

BY FUNDING SOURCE

TOTAL	Modality	Other Funds	Fed DMC	State DMC	Fed Drug Court	Prop. 10	Prop. 36	CalWORKs
\$ 243,139	Outpatient	\$ 63,500				\$ 7,135	\$ 72,504	\$100,000
\$ 30,000	Homeless Residential	\$ 30,000						
\$ 219,160	Residential 28 Day	\$158,776			\$ 6,270	\$ 2,110	\$ 32,004	\$ 20,000
\$ 280,217	Detox	\$248,878				\$ 1,597	\$ 19,742	\$ 10,000
\$ 106,225	Day Care Habilitative	\$ 76,284	\$ 5,704	\$ 5,704		\$ 3,108	\$ 5,425	\$ 10,000
\$ 250,979	Peri Residential Housing	\$194,420				\$10,021	\$ 36,538	\$ 10,000
\$ 221,506	Peri Residential Treatment	\$104,102	\$34,648	\$34,648		\$ 6,132	\$ 31,976	\$ 10,000
\$ 75,792	Perinatal Transitions Housing					\$ 5,792		\$ 70,000
\$ 54,582	Clean and Sober Housing						\$ 54,582	
\$ 7,000	Drinking Driver Assessment	\$ 7,000						
\$ 0	Naltrexon Outpatient						\$ 0	
\$ 10,800	Drug Testing						\$ 10,800	
\$ 1,499,400	TOTAL	\$882,960	\$40,352	\$40,352	\$ 6,270	\$35,895	\$263,571	\$230,000

D.2. FEE FOR SERVICE CONTRACTS UNIT OF SERVICE RATES: COUNTY agrees to compensate CONTRACTOR at the unit of service rates set forth below. Settlement will be done at the end of the contract with the Cost Report. CONTRACTORS may request a change in the below rates, by a written request to the COUNTY Administrator. COUNTY Administrator may approve rate changes of 10% or less. Rate changes above 10% will require a contract amendment.

UNIT	RATE	SERVICE
Staff Hour – a., a.1., 2., 3., 4.	\$ 40.85	Outpatient Counseling Services
Bed Day – b., b.1., 2., 3.	\$ 88.29	Residential 28-Day
Bed Day – b.	\$ 88.29	Residential Homeless
Bed Day – c., c.1., c.2, c.3.	\$121.11	Detox Special Care Unit
Bed Day – b., b.1., 2., 3.	\$ 97.56	Perinatal Residential – Housing
Bed Day – b., b.1., 2., 3.	\$ 77.67	Perinatal Residential – Treatment
Bed Day – b.4.	\$ 76.18	Perinatal Residential – DMC Treatment (Cost Cap)
Bed Day – b.1.	\$ 29.14	CalWORKs Transitions Housing
DCH Day – d., d.1., d.2., d.3.	\$ 76.25	Day Care Habilitative
DCH Day – d.	\$ 77.50	Day Care Habilitative – DMC Day Treatment (Cost/Cap)
Assessment – e.	\$100.00	Drinking Driver Assessment
Testing – f.	\$ 17.50	Proposition 36 Alcohol and Drug Testing
Naltrexone Dosing - g	\$ 21.83	Proposition 36 Naltrexone Dosing Sessions

D.3. DEFINITIONS: Definition of above units of service shall be as follows:

- a. **STAFF HOUR:** Those hours that a direct service staff person is on the job and available to provide services. A direct service staff person is defined as a staff person who spends time providing services directly to program clients. Administrative, clerical and other support services may not be billed as staff hours. Staff time used for vacations, holidays, sick leave and other leave may not be billed to COUNTY. Volunteer and unpaid intern time may not be billed to COUNTY. Time to be billed in 15 minute increments of direct staff time. Staff Hours are claimed for the following modes of service:
- (1) **Outpatient Services:** Staff Hours may include individual counseling and group therapy of a minimum of 3 and not more than 15 unrelated individuals, intake, assessment, case management and aftercare.
 - (2) **CalWORKs Outpatient Services:** Staff Hours may be claimed for assessment, treatment, case management, referral and aftercare services that are authorized and approved by the HRA

**AMENDMENT 1 - EXHIBIT E-1
DESCRIPTION OF SERVICES**

Contractor: JANUS of Santa Cruz
 Component: Outpatient Services
 Modality: Individual and Group Counseling
 Primary Target Groups Treated: Men and women of Santa Cruz County, age 18 or over, who are dependent on alcohol and/or other drugs.

Provider #: 44-4498

Budget and Unit of Service (UOS) Data

	98-99 Past Year Actual	99-00 Current Year Estimated	00-01 New Budget Year Estimated
Gross Program cost	\$99,169	\$260,745	\$310,129
County Funding	\$57,559	\$61,058	\$243,139
Number of clients funded by County	224	221	344

PRIMARY PROBLEMS TREATED

Janus maintains a counseling center which provides outclient services in a drug-free, non-drinking environment. Recovery services are provided by degreed/licensed and experienced personnel for individuals and family members affected by alcohol problems. These services include personal recovery planning, individual and group therapy sessions, information about alcoholism, and identification and referral services. Interns and qualified volunteers are utilized to assist in the delivery of these services whenever possible.

PROGRAM GOALS AND OBJECTIVES

GOAL I. The Janus Counseling Program will provide recovery services on an outpatient basis in a supportive non-drinking environment in accord with the "Standards for Direct Alcohol Services" of the State Department of Alcohol and Drug Programs.

OBJECTIVE A. OUTPATIENT COUNSELING. Janus will provide a total of ~~1,554~~ Outpatient Counseling staff hours to ~~221~~ adult men and women who are dependent on alcohol and/or other drugs.

- A.1. Janus will encourage clients to participate financially in their own recovery by charging for outpatient services according to each individual's ability to pay, in order to extend the units of service which may be provided by public funding. No client will be turned away because of inability to pay,
- A.3. Of the ~~221~~ clients, Janus will provide Outpatient Services to the following hard to reach populations:
 - a. Women
 - b. Latinos - Janus will provide Spanish translation services on an as-needed basis.

OBJECTIVE B. INDIVIDUAL COUNSELING. Of the ~~1,554~~ staff hours for Outpatient Services, Janus will provide ~~350~~ staff hours for Individual Counseling to ~~40~~ clients.

- B.1. Of the ~~350~~ hours, at least ~~225~~ staff hours will be for Individual Counseling face-to-face client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows and session planning.

OBJECTIVE C. GROUP COUNSELING. Of the ~~1,554~~ staff hours for Outpatient Services, Janus will provide ~~1,204~~ staff hours for Group Counseling to ~~181~~ unduplicated clients.

- C. 1. Of the 1,204 hours, at least **780 staff** hours will be devoted to face-to-face client services. Face-to-face client service **staff** hours will not equal available **staff hours** because of staff time for chatting, no-shows and session planning.

GOAL II. To provide a **total** of **2,248** outpatient staff hours to **83** unduplicated CalWORKs clients for services including assessment, treatment, case management, referral and **aftercare** services that **are** authorized and approved by the HRA CalWORKs Employment and Training staff. Alcohol or drug (AOD) services **are** to be employment focused, and in accordance with CalWORKs Welfare-to-Work plans and/or participation agreements.

OBJECTIVE A. **INDIVIDUAL COUNSELING.** Of the **2,448 staff** hours for Outpatient Services, **Janus** will provide **540 staff** hours for Individual Counseling to **68** unduplicated clients.

- A.1. Of the **540** hours, at least **350 staff** hours will be for face-to-face Individual Counseling client services. Face-to-face client service **staff hours** will not equal available **staff** hours because of **staff time** for charting, no-shows and session planning.

OBJECTIVE B. **GROUP COUNSELING.** Of the **2,448 staff** hours for Outpatient Services, Janus will provide **1,708 staff** hours for Group Counseling to **68** unduplicated clients.

- B.1. **Of the 1,708 hours**, at least **1,025 staff** hours will be devoted to face-to-face client services. Face-to-face client service **staff** hours will not equal available **staff** hours because **of staff** time for charting, no-shows and session planning.

GOAL III. To provide a **total of 175** outpatient **staff** hours to **6** unduplicated Proposition 10 clients for services including assessment, treatment, case management, court appearances, referral and aftercare services that are authorized and approved by the HSA Mental Health Client Specialist as part of the Child Welfare Services Treatment Team. In addition, CONTRACTOR will provide Client Progress Reports in accordance with COUNTY Protocols.

OBJECTIVE A. **INDIVIDUAL COUNSELING.** Of the **175 staff hours** for Outpatient Services, Janus will provide **25 staff hours** for Individual Counseling to **5** unduplicated clients.

- A. 1. Of the **25** hours, at least **15 staff** hours will be for face-to-face Individual Counseling client services. Face-to-face client service **staff** hours will not equal available **staff** hours because of staff time for charting, no-shows and session planning.

OBJECTIVE B. **GROUP COUNSELING.** Of the **175 staff** hours for Outpatient Services, Janus will provide **150 staff hours** for Group Counseling to **6** unduplicated clients.

- B.1. Of the **150** hours, at least **90 staff** hours will be devoted to face-to-face client services. Face-to-face client service **staff** hours will not **equal** available **staff** hours because **of staff** time for charting, no-shows and session planning.

GOAL IV. To provide a total of **1,775** outpatient staff hours to **51** unduplicated Proposition **36** clients for services including assessment, treatment, case management, court appearances, referral and aftercare services that **are** authorized and approved by the HSA Mental Health Client Specialist **as part** of the Substance Abuse and Crime Prevention Act (SACPA) Treatment Team. Janus. will provide Client **Progress** Reports in accordance with COUNTY Protocols. In addition, Janus. will collect fees designated by the Court and provide monthly accounting to HSA and Probation. Random alcohol and drug testing will be provided **as** ordered by the court. Ancillary services will **be** provided through referral or directly.

OBJECTIVE A. **INDIVIDUAL COUNSELING.** Of the **1,775 staff** hours for Outpatient Services, Janus will provide **408** staff hours for Individual Counseling to **51** unduplicated clients.

- A. 1. Of the **408** hours, at least **245 staff** hours will **be** for face-to-face Individual

Counseling client services. Face-to-face client service **staff hours** will not equal available staff hours because of **staff time** for charting, no-shows and session planning.

OBJECTIVE B. GROUP COUNSELING. Of the **1,775 staff hours** for Outpatient Services, Janus will provide **1,360 staff hours** for Group Counseling to 51 unduplicated clients.

B.1. Of the 1,360 hours, **at least 888 staff hours will** be devoted to face-to-face client services. Face-to-face client service **staff hours** will not equal available **staff hours** because of **staff time** for charting, no-shows and session planning.

GOAL V. (APPLIES TO ALL E EXHIBITS) To promote **staff** development and competency by providing training to **staff**.

OBJECTIVE A. To develop a **Staff Training Plan** and submit the Plan with the First Quarter Report. **The Staff Training Plan** must include the title and topic of the training, **the** trainer's name, the **date of the** training and the cost. In addition to alcohol and drug treatment and prevention training topics, the Training Plan must include the following:

- a. Safety and Infectious **Disease** policy issues;
- b. **HIV/AIDS** prevention, treatment, confidentiality, and referrals;
- c. Admission priority and waiting lists requirements, **TB** testing and services, and **interim** services for injection drug users;
- d. ADA requirements and agency plan;
- e. Programmatic issues related **to** the diverse aspects of the population (**e.g.**, culture, acculturation and assimilation, cultural competency and Latino accessibility, dual diagnosis, and other population characteristics).

OBJECTIVE B. Document trainings attended by **staff** in individual employee training logs and maintain in employees' personnel **files**.

OBJECTIVE C. Report actual trainings attended by **staff** in each Quarterly Report, including the following:

- a. The date, title and topic **of** the training;
- b. The length **of** the training;
- c. The name and title of each **staff** attending the **training**.

GOAL VI. (APPLIES TO ALL E EXHIBITS) To ensure accessibility to individuals with disabilities into county funded programs and to meet the Americans With Disabilities Act (**ADA**) requirements, and County and **ADP** reporting and action requirements.

OBJECTIVE A. **To** conduct an annual review **of** the agency's ADA Accessibility Policy, and report on any revisions **to** the policy in the First Quarter Report. Name the agency **staff** person who is responsible for ADA compliance.

OBJECTIVE B. Maintain the appropriate Fire **Marshal** clearance and **State** License.

OBJECTIVE C. Any complaints related to ADA compliance must be reported verbally to DADPA within **24 hours** and in writing within three days.

GOAL VII. (APPLIES TO ALL E EXHIBITS) To evaluate program effectiveness.

OBJECTIVE A. To evaluate in the annual report the effectiveness of services provided including any outcome study results controlled by the agency

GOAL VIII. (APPLIES TO ALL OUTPATIENT AND RESIDENTIAL E EXHIBITS) To promote accessibility for dual diagnosis clients into the agency's residential and outpatient treatment modalities.

OBJECTIVE A. Review **and** revise prior year Action **Plan** and submit with the First Quarter Report.

OBJECTIVE B. Designate a lead **staff** person to assist the County **in** planning **staff** training activities and implementing these activities, **as** per the current year **plan**. Report the name **of** the **staff** person **in** the First Quarter Report.

OBJECTIVE C. Report significant changes **or** accomplishments in each Quarterly Report, including **trainings** attended.

GOAL IX. (APPLIES ONLY TO MEDI-CAL FUNDED PROGRAMS) To manage the Medical program and funding to meet all County and **ADP M/C** requirements in order to maximize revenue, to reduce disallowances, and to prevent audit exceptions.

OBJECTIVE A. To ensure timely accurate submission and data entry **of** Medi-Cal billable units **of** service within **10** days after the month **of** service, **to** processing **of** all **reports from** State Alcohol and **Drug** Program (**ADP**) Medical by due dates; and submission **of** **DATAR** reports with monthly claims.

OBJECTIVE B. To monitor Medical revenue status by doing quarterly written analysis **of** the **units of** service, **the** **dollars** earned, the program, and projections **for** the year **to** **be** included with each quarterly report.

AMENDMENT 1 - EXHIBIT E-2
DESCRIPTION OF SERVICES

0230

Contractor: **JANUS of Santa Cruz**
 Component: Residential Services
 Modality: Residential 28-Day
 Provider# 44-4498
Primary Target Groups Treated. Santa Cruz County residents - men and women, age 18 and over who are dependent on alcohol and/or other drugs.

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$450,802	\$490,120	\$551,114
County Funding	\$138,235	\$152,910	\$249,160
Number of clients funded by County	83	83	136

PRIMARY PROBLEMS TREATED

Janus of Santa Cruz maintains a 19-bed, 28-day, residential treatment center for men and women who have become dependent on alcohol and/or other drugs. Group and individual counseling, educational, recreational, family, **aftercare** and referral services **are** provided by well-trained personnel. Both **degreed** and paraprofessional staff are employed and supervised by experienced and licensed professionals.

The Janus **staff** believes in each resident's effectiveness, drive for health, and ability to discipline him/herself. To enhance these competencies the program coordinates **(1)** supervised and unsupervised house **groups**; **(2)** formal and informal contact with members of Alcoholics Anonymous; **(3)** education on the effects of alcohol, alcoholism, and drug abuse; **(4)** education on how to effectively use the program of Alcoholics Anonymous; and, **(5)** specifically designed tools for re-entry into the community **as** a sober, responsible individual. All admissions into the program **are** on a voluntary basis only.

In addition to providing residential treatment services to local residents under funds **from** the County, Janus offers these services to others, both local and out-of-County, who **are** able to pay for these services or who have a **third** Party **payor**.

PROGRAM GOALS AND OBJECTIVES

GOAL I. Janus will operate and maintain 19 residential treatment **beds** with **an** average occupancy rate or **85%** for residents of Santa Cruz County in accordance with the "Standards for Direct Alcohol Treatment Services" published by the State Department of Alcohol and Drug programs, and the "County Monitoring Manual **For** Treatment Providers," prepared by the **State** Division of Drug programs.

OBJECTIVE A. RESIDENTIAL 28-DAY. Janus will provide residential treatment with an average length of treatment **of** 22 days to men and women, age 18 and over, who are dependent on alcohol **and/or** other **drugs**.

- A.1. County clients: 1,898 bed days per year to 78 clients. Of these, 71 bed days will be provided **to** 3 **Drug Court** clients. **To** extend the **units** of service that **are** provided from public funding Janus will encourage County clients to participate financially in their own recovery by charging **for** residential services according to each individual's ability to pay. No County client will be turned away because of inability to pay.
- A.2. CalWORKs clients: 227 bed days per year to **8** clients. Additional support services for CalWORKs clients will address barriers to employment.
- A.3. Proposition 10 clients: **24** bed days per year **to** 1 clients. Janus. will provide client updates to HSA and HRA caseworkers as required by COUNTY protocols.

- A.4.** 362 bed days per year to **15** Proposition 36 clients. Janus will collect fees designated by the **Court** for Proposition **36** clients and provide monthly accounting to HSA and Probation. In addition, random alcohol and **drug** testing will be provided **as** ordered by the court, and ancillary services will be provided through referral or directly.

OBJECTIVE B. **RESIDENTIAL SERVICES FOR HOMELESS CLIENTS.** Janus will provide residential treatment with **an** average length **of** treatment of 22 days to Homeless **adults** age **18** and over referred **from** the Homeless Persons Health Project (HPHP) who **are** dependent upon alcohol and/or other **drugs**.

B. 1. Janus will provide **340** bed days **of** Residential Services to 16 Homeless Clients per year. In addition, Janus will provide:

- a. Transportation to assist with entry into the program, when possible.
- b. Steady **communication** and close coordination with the Santa Cruz County Homeless Persons Health Project (**HPHP**) in order to effectively **link** case management and treatment services for homeless clients **and maximize** the chance that recovery efforts may be **successful** and sustained through the following:
 - (1) All Homeless Persons Health Project (HPHP) clients will be informed at intake **that** their 28-day program at Janus is linked to HPHP. Clients will be informed about what services HPHP offers, and that **an** HPHP case coordinator will be contacting them to arrange an appointment to take place in the third week of their program.
 - (2) All HPHP clients will be asked at the time **of** intake to sign an authorization for release of information to HPHP Case Coordinator.
 - (3) The Janus case manager for HPHP clients **will** be responsible for contacting HPHP Substance Abuse **Case** Coordinator to **begin** coordination of care for clients within **5** days of the client's entry into Janus.
 - (4) After two weeks **of** care Janus **staff** will help facilitate regular contact between the HPHP Coordinator and the HPHP client according to the client's need and interest.
 - (5) Janus will continue to support HPHP clients in recovery, aftercare, relapse prevention and issues related to homelessness after the 28-day program **is** over.
 - (6) **Janus staff** and HPHP **staff** will meet at **least** once per quarter to review successes and failures **of** recovery efforts of homeless clients, in order **to** identify ways in which program efforts or coordination can be changed to create more successes.

**AMENDMENT 1 – EXHIBIT E-3
DESCRIPTION OF SERVICES**

Contractor: **JANUS** of Santa Cruz
 Component: Residential Services
 Modality: **Detox Special Care Unit**
Primary Target Groups Treated: Alcohol and Drug dependent men and women undergoing withdrawal

Provider #: 44-4498

Budget and Unit of Service (UOS) ~~Data~~

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$291,375	\$304,896	\$375,821
County Funding	\$230,102	\$239,306	\$280,217
Number of clients funded by County	470	480	488

PRIMARY PROBLEMS TREATED

Janus of Santa Cruz maintains an 8 bed Special Care Unit for alcohol and drug dependent men and women. The unit provides crisis support for the acutely intoxicated during the period of withdrawal. Other services include assessment and referral for individuals requiring medical and/or long term rehabilitation, and treatment focusing on intervention and placement into the continuum of alcohol and drug services. Services are provided twenty-four hours a day by trained and experienced staff.

Philosophically, Janus is committed to personal responsibility for one's good health and abstinence from alcohol and drugs. Admission to the Special Care Unit is voluntary and continued participation in the program, while strongly encouraged, is not forced on the individual. During a participant's stay in the Special Care Unit they receive daily staff assessment to determine the appropriateness of continuing care. On the basis of individual assessment, discharge and/or referral may take place at the point when an individual is stabilized and no longer deemed to be intoxicated, or, in the case of medical and/or long term rehabilitation, when a suitable placement has been identified. Continuation of services beyond a 48-hour period are conditioned on a positive assessment of the individual's anticipated response to intervention and entry into a continuum of treatment. Participation in the pre-treatment program is anticipated to last three to six days.

Pre-treatment services provide a daily program of alcohol and drug education, group and individual counseling, attendance at AA meetings, self-assessment activities and treatment planning. In addition, trained staff is provided to assist participants in resolving legal, socio/economic and familial problems which may present barriers to treatment.

PROGRAM GOALS AND OBJECTIVES

GOAL I. Janus will operate and maintain a social setting Special Care Unit in accordance with the "Standards for Direct Alcohol Treatment Services" and the "County Monitoring Manual for Treatment Providers" published by the State Department of Alcohol and Drug Programs.

OBJECTIVE A. RESIDENTIAL SPECIAL CARE UNIT. Janus will provide a total of 8 residential treatment beds with an average 85% occupancy rate and an average length of treatment of 4.3 days to Alcohol and drug dependent men and women undergoing withdrawal, at Janus Special Care Unit. Janus will provide:

- A. 1. County clients: 2,055 bed days per year to 425 clients. To extend the units of service that are provided from public funding Janus will encourage County clients to participate financially in their own recovery by charging for residential services according to each individual's ability to pay. No County client will be turned away because of inability to pay.
- A. 2. CalWORKs clients: 83 bed days per year to 20 clients. Additional support services for CalWORKs clients will address barriers to employment.

- A.3. Proposition **10** clients: 13 bed days per year ~~to 3~~ clients. Janus. will provide client updates to **HSA** and HRA caseworkers **as** required by COUNTY protocols.
- A.4. Proposition **36** clients: **163** bed days per year to **40** clients. Janus will collect fees designated by the **Court** for Proposition **36** clients and provide monthly accounting to **HSA** and Probation. In **addition**, random alcohol and **drug** testing will be provided **as** ordered by the court, and ancillary services will be provided through referral **or** directly.
- A.5. **Track**, report and coordinate referrals with **County** Mental Health and Paloma **House**.
- A.6. Referrals to ongoing treatment for 100% **of** individuals completing **the** program.
- A.7. A volunteer training program and utilize **350 hours of** volunteer services per month.
- A.8. Janus will provide Residential Special **Care Unit** services to the following hard to **reach** populations:
 - a. **404** Detox days to **94 Latinos**.
 - b. **657** Detox days (**2** beds at **90%** occupancy ~~rate~~) to Dual Diagnosis clients referred **from** Mental Health

AMENDMENT 1 – EXHIBIT E-4
DESCRIPTION OF SERVICES

Contractor: **JANUS of Santa Cruz**
 Component: Day Care Habilitative Services Provider # **44-4496**
 Modality: Perinatal Day Care Habilitative
Primary Target Groups Treated: Pregnant and parenting women and their children.

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$87,476	\$100,761	\$113,456
County Funding	\$87,442	\$90,940	\$106,255
Number of clients funded by County	23	28	49

PRIMARY PROBLEMS TREATED

The day care habilitative treatment program serves women **who** are either pregnant or parenting and who have an identified impairment in their ability to care for their children, ages **birth** through 17, due to alcohol or other drug abuse.

PROGRAM GOALS AND OBJECTIVES

GOAL I. To operate the Day Care Habilitative program activities for three **or more** hours per day, **5** days per week, with available capacity to serve up to **10** women and their children on a daily basis.

OBJECTIVE A. DAY CARE HABILITATIVE. Janus will provide residential treatment with an average length of treatment **of from 3** months to 1 year to pregnant and/or parenting women and their children, at Janus Perinatal. Services include childcare for children of DCH clients and to weekly sessions to mothers in **areas** involving child development, parenting, and related living issues. Janus will provide the following:

- A.1.** County clients: 1,000 days per year to **30** clients. **To** extend the units of service that are provided **from** public funding Janus **will** encourage County clients to participate financially in their **own** recovery by charging for residential services according to each individual's ability to pay. **No** County client will be turned away because **of** inability to pay.
- A.2.** CalWORKs clients: **131** days per year **to 4** clients. Additional support services for CalWORKs clients will address barriers **to** employment.
- A.3.** Proposition **10** clients: **40** days per year to **2** client. Janus will provide client updates to **HSA** and HRA caseworkers as required by **COUNTY** protocols.
- A.4.** Proposition **36** clients: 71 days per year to **2** clients. Janus will collect fees designated by the **Court** for Proposition **36** clients and provide monthly accounting **to HSA** and Probation. **In** addition, random alcohol and drug **testing** will be provided **as** ordered by the court, and ancillary services will be provided through referral or directly.
- A.5.** Drug/MediCal clients: **148** days per year to 10 clients. Services will meet the Perinatal Drug/MediCal service guidelines and standards.

**AMENDMENT 1 – EXHIBIT E-5
DESCRIPTION OF SERVICES**

Contractor: JANUS of Santa Cruz
Component: Residential Services
Modality: Perinatal Residential

Provider # 44-4496

Primary Target Groups Treated: Pregnant and parenting women and their children.

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$363,620	\$372,781	\$437,360
County Funding	\$314,208	\$340,776	\$472,485
Number of clients funded by County	30	30	34

PRIMARY PROBLEMS TREATED

Janus of Santa Cruz provides residential treatment services for women who are abusing alcohol and other drugs during pregnancy/post-partum or parenting, and their children.

PROGRAM GOALS AND OBJECTIVES

GOAL 1. Janus Perinatal will provide **8 beds** in a drug-free, nondrinking environment for up to **30** pregnant/post-partum/parenting women and up to **30** of their children through age **3**.

OBJECTIVE A. RESIDENTIAL HOUSING. Janus will provide residential housing for clients in residential treatment with an average length of stay of from 3 months to 1 year to pregnant and parenting women and their children, at Janus Mondanaro Baskin. Janus will maintain a total of 8 adult beds and 8 children's beds with an average 85% occupancy rate for county qualified clients. Janus will provide:

- A.1. County clients: 1,993 bed days per year to 25 clients. To extend the units of service that are provided from public funding Janus will encourage County clients to participate financially in their own recovery by charging for residential services according to each individual's ability to pay. No County client will be turned away because of inability to pay.
- A.2. CalWORKs clients: 103 bed days per year to 2 clients. Additional support services for CalWORKs clients will address barriers to employment.
- A.3. Proposition 10 clients: 103 bed days per year to 2 clients. Janus will provide client updates to HSA and HRA caseworkers as required by COUNTY protocols.
- A.4. Proposition 36 clients: 372 bed days per year to 5 clients. Janus will collect fees designated by the Court for Proposition 36 clients and provide monthly accounting to HSA and Probation. In addition, random alcohol and drug testing will be provided as ordered by the court, and ancillary services will be provided through referral or directly.

OBJECTIVE B. Janus will provide a 7 day per week Residential Treatment program consistent with California State Alcohol and Drug Program standards for alcohol and drug treatment certification, perinatal treatment standards, and Medical standards. Janus Mondanaro Baskin will provide:

- B.1. County clients: 1,340 bed days per year to 25 clients. To extend the units of service that are provided from public funding Janus will encourage County clients to participate financially in their own recovery by charging for residential

services according to each individual's ability to pay. No **County** client will be turned away because of inability to pay.

- B.2.** **CalWORKs** clients: **129** bed days per year to **2** clients. Additional support services for **CalWORKs** clients will **address** barriers to employment.
- B.3.** Proposition **10** clients: **79** bed days per year to **1** client. Janus. will provide client updates to **HSA** and **HRA** caseworkers **as** required by **COUNTY** protocols.
- B.4.** Proposition **36** clients: **414** bed days **per** year to **5** clients. Janus **will** collect fees designated by the **Court** for Proposition **36** clients and provide monthly accounting to **HSA** and Probation. In addition, random alcohol and drug testing will be provided **as** ordered by the court, and ancillary services will be provided through referral **or** directly.
- B.5.** Drug/MediCal clients: **910** bed days per year to **4** clients. Services will meet **the** Perinatal Drug/MediCal service guidelines and standards.

**EXHIBIT E-5
DESCRIPTION OF SERVICES**

Contractor: JANUS of Santa Cruz
 Component: Residential Services Provider #: 44-4496
 Modality: CalWORKs **Transitional** Housing
Primary Target Groups Treated: CalWORKs parenting women and their children

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$24,335	\$45,020	\$75,792
County Funding		\$30,900	\$75,792
Number of clients funded by County		14	21

PRJMARY PROBLEMS TREATED

Janus maintains a transitional living facility offering a drug-free, non-drinking environment for women who are either pregnant or parenting **who** have **an** identified impairment in their ability to care **for** their children due to alcohol and other drug abuse. Women enrolled in the CalWORKs Welfare-to-Work programs **who** qualify for housing **will** be provided a clean and sober living environment to help them overcome **drug** and alcohol abuse barriers to employment.

PROGRAM GOALS AND OBJECTIVES

GOAL I: Janus will provide 4 transitional living beds for qualified residents of Santa Cruz County.

OBJECTIVE A. CalWORKs PERINATAL TRANSITIXONAL HOUSING. Janus will provide **4** residential housing beds with an average occupancy **of 85%** and an average **length of stay of 90** days to adult women with infants or young children; women must be in recovery from alcohol or other **drug** dependency. Janus will provide the following:

- A.1. CalWORKs **clients:** 2,402 bed days per year to **27** clients. Additional support services for CalWORKs clients will address barriers to employment
- A.2. Proposition 10 clients: 199 bed **days** per year to **2** clients. Janus. will provide client updates to **HSA** and **HRA** caseworkers **as** required by COUNTY protocols.

EXHIBIT E-6
DESCRIPTION OF SERVICES

0238

Contractor: Janus of **Santa Cruz**
 Component: Outpatient Services
 Modality: Drinking Driver Assessment Program
 Provider #: 44-4498
Primary Target Groups Treated: Self-referred Drinking Driver Offenders

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$3,500	\$7,000	\$7,000
County Funding	\$3,500	\$7,000	\$7,000
Number of assessments funded by County	35	70	70

PRIMARY PROBLEMS TREATED

Janus maintains a counseling center which provides outclient services in a drug-free, non-drinking environment. Assessment and referral services are provided by degreed/licensed and experienced personnel.

PROGRAM GOALS AND OBJECTIVES

- GOAL I.** Upon receipt of the Drinking Driver Assessment Instructions Form **from** client, an AOD assessment interview will be scheduled and completed within 21 calendar days. The following protocols will be followed:
- A.** The AOD assessment will include the following:
 - 1. If client previously completed a **DDP** assessment with Provider within the last six months, the DDP assessment may be updated with information from the AOD assessment.
 - 2. If client has not completed a DDP assessment with Provider within the last six months, a new AOD assessment will be completed.
 - 3. The AOD assessment tool **shall** be approved by County **ADP** and meet **the** minimum **State** specifications. Treatment evaluation of client problem areas will include, but not limited to, current/past drug/alcohol use, legal history/status, medical status, psychiatric status, employment/lifestyle, family/social, relapse potential, and treatment acceptance.
 - 4. Treatment level of care recommendations **as** appropriate to the completed AOD assessment results.
 - a. Recommendations will be reviewed with the client during the AOD assessment.
 - b. Treatment source options will be discussed with the client. Client preference for a provider for each treatment recommendation will be obtained and included in the Treatment Evaluation and Recommendation Report.
 - c. Prior to the conclusion of the AOD assessment, client will sign a statement stating that results of the assessment, treatment recommendations and treatment source options were reviewed during the assessment.
 - B.** At conclusion of the AOD assessment, Provider will give client a court-approved handout explaining the procedure for the pending court hearing on the treatment recommendations.
 - C.** A Treatment Evaluation and Recommendation Report will be completed using a standardized court-approved form and mailed or faxed to County ADP within 5 calendar days of the assessment interview.

- D. Once each quarter, Provider will report number of AOD assessments completed and will claim the amount as stipulated in Exhibit D of this contract.

0239

AMENDMENT 1 - EXHIBIT E-7
DESCRIPTION OF SERVICES

Component: Proposition 36
Modality: Proposition 36 Clean and Sober Housing
Primary Target Groups Treated: Proposition 36 Clients

Provider # 44-4496

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$0	\$0	\$54,582
Proposition 36 Funding	\$0	\$0	\$54,582
Number of clients funded by County			33

PRIMARY PROBLEMS TREATED

Janus will provide clean and sober housing services for Proposition 36 clients through agreements with clean and sober housing providers in the community. Janus may also provide clean and sober housing services using its own clean and sober housing facilities, provided that client stays at Janus clean and sober houses are pre-authorized by the County. The County will provide Janus with advance written authorization for expenditure of a specified amount of funds to a specified clean and sober housing provider for a specific client. Janus will pay the clean and sober housing provider the approved amount within three working days of receiving notice from the provider that the client is staying at the provider's clean and sober house.

Proposition 36 clients are legally responsible for any damages they may cause to a clean and sober house. However, County will guarantee payment of up to \$100 per Occurrence upon receipt of a substantiated damage claim from a clean and sober housing provider for damages caused by a County-funded Proposition 36 client. The client is ultimately financially responsible for any such damages, and the County will make efforts to collect reimbursement for any damages from the client.

Janus will be reimbursed by the County for County-approved expenditures by Janus for clean and sober housing services plus 10% Janus administrative costs.

PROGRAM GOALS AND OBJECTIVES

GOAL I: Janus will provide clean and sober housing services for Proposition 36 clients authorized by the County.

OBJECTIVE A. PROPOSITION 36 CLEAN AND SOBER HOUSING. Janus will provide, through agreements with clean and sober houses in the community and through Janus houses, up to 99 months of clean and sober housing services to 33 Proposition 36 clients.

OBJECTIVE B. MONTHLY REPORTS. Janus will submit written monthly reports in a format agreed to by Janus and the County that provide information on expenditures for each client at each clean and sober house, client length of stay, and fund balance in the clean and sober housing allocation.

**AMENDMENT 1 - EXHIBIT E-8
DESCRIPTION OF SERVICES**

Component: Proposition 36
Modality: Proposition 36 Alcohol and Drug Testing
Primary Target Groups Treated: Proposition 36 Clients

Provider # 44-4496

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$0	\$0	\$10,800
Proposition 36 Funding	\$0	\$0	\$10,800
Number of clients funded by County			n/a

PRIMARY PROBLEMS TREATED

The Janus. Proposition 36 Services will include drug and alcohol testing according to a schedule mandated by the court.

PROGRAM GOALS AND OBJECTIVES

GOAL I Janus will provide random alcohol and drug testing of Proposition 36 outpatient and residential clients as ordered by the Court. Testing will be conducted on site using the protocols established by the COUNTY. Results of the tests will be included in all reports on client progress provided to the SACPA Team. Costs of the testing will be offset first by fees collected from Proposition 36 clients, and then from non-Proposition 36 funds provided by the COUNTY.

OBJECTIVE A. Assay at least 85% of samples collected.

OBJECTIVE B. Conduct at least one full panel test per month, and test the remaining samples to be assayed for the client's primary drug(s) of choice.

OBJECTIVE C. Where non-evidentiary tests are used, be prepared to submit the specimen for confirmatory analysis if a positive result is challenged by the client.

OBJECTIVE D. Report any positive test results to Probation within two working days of receiving the positive result.

**AMENDMENT 1 – EXHIBIT E-9
DESCRIPTION OF SERVICES**

Component: Proposition **36**
Modality: Naltrexone Outpatient
Primary Target Groups Treated: Proposition **36** Clients

Provider # **44-4496**

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$0	\$0	\$0
Proposition 36 Funding	\$0	\$0	\$0
Number of clients funded by County			0

PRIMARY PROBLEMS TREATED

The Janus Proposition 36 Services naltrexone support therapy program involves an initial assessment to evaluate the individual's appropriateness for treatment, periodic (weekly) individual counseling sessions and 3 to 4 dosing sessions a week. Duration of the program may be up to one year, but each individual is evaluated by the counselor and physician on a 90-day basis.

PROGRAM GOALS AND OBJECTIVES

GOAL I: Janus will provide Medical and psychological clearance to enter the naltrexone program, individualized treatment planning and counseling, dosing and discharge planning as follows:

OBJECTIVE A. INDIVIDUAL COUNSELING. 0 staff hours for Outpatient Services, Janus will provide 0 staff hours for Individual Counseling to 0 clients.

OBJECTIVE B. MEDICAL EVALUATION. 0 staff hours for medical evaluation and assessment.

OBJECTIVE C. NALTREXONE DOSING SESSIONS. 0 naltrexone dosing sessions to 0 unduplicated individuals.

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT

TO: Board of Supervisors
County Administrative office
Auditor Controller

FROM: Health Services Agency (Department)

BY: [Signature] (Signature) 4/23/02 (Date)
Signature certifies that appropriations/revenues are available

AGREEMENT TYPE (Check One)

Expenditure Agreement [X]

Revenue Agreement []

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of same.

1. Said agreement is between the County of Santa Cruz Health Services Agency - ADP (Department/Agency)
and Fenix Services Inc., 10 Alexander Street, Watsonville, CA 95076 (Name/Address)

2. The agreement will provide Alcohol and Drug Abuse Prevention, outpatient counseling and residential services.

3. Period of the agreement is from July 1, 2001 to June 30, 2002

4. Anticipated Cost is \$ increased to \$567,030.00 [] Fixed [] Monthly Rate [] Annual Rate [X] Not to Exceed

Remarks: This amendment increases the current contract by \$21,813.00.

5. Detail: [] On Continuing Agreements List for FY . Page CC- Contract No: CR [] 1st Time Agreement

[X] Section III Board letter required, will be listed under Item 8
[] Section IV Revenue Agreement

6. Appropriations/Revenues are available and are budgeted in 364042 (Index) 3638 (Sub object)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACHED COMPLETED AUD-74 OR AUD-60

Appropriations are available and will be encumbered.

Contract No. 10796

By: [Signature] Auditor-Controller Deputy

Date: 04/24/02

Proposal and accounting detail reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize

Health Services Administrator (Dept/Agency Head) to execute on behalf of the Health Services

(Department/Agency)

Date: 4/25/02

By: [Signature] County Administrative Office

Distribution:

Board of Supervisors - White
Auditor Controller - Canary
Auditor-Controller - Pink
Department - Gold

State of California
County of Santa Cruz

I, [Signature] ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz, State of California, do hereby certify that the foregoing request for approval of agreement was approved by said Board of Supervisors as recommended by the County Administrative Office by an order duly entered in the minutes of said Board on 20

ADM - 29 (8/01)
Title I, Section 300 Proc Man

By: Deputy clerk

AUDITOR-CONTROLLER USE ONLY

CO \$ Document No. JE Amount Lines H/TL Keyed By Date

TC110 \$ Auditor Description Amount Index Sub object User Code

Contract No: 0796
Index: 364042
Subobject: 3638

AMENDMENT No. 2 TO AGREEMENT

The parties hereto agree to amend that certain above Agreement dated July 1, 2001, by the changes as follows:

A. Contract Payment Limit

1. Cover Sheet

Increasing the total contract maximum by \$21,813.00 for a new total contract maximum of \$567,030.00.

2. Budget Sheets

Deleting existing Exhibit A and Exhibit D, Page 16, and replacing with revised Exhibits A and Exhibit D, Page 16.

3. Scope of Service Sheets

Deleting existing Exhibits E-2, E-4, and E-5 and replacing with and Exhibits E-2, E-4, and E-5.

All other provisions of said Agreement, excepting those mentioned above, shall remain the same.

CONTRACTOR

COUNTY OF SANTA CRUZ

By: Cory Jo Allen

By: _____

Health Services Agency

Approved as to form:

Henry A. Oberhelman III
County Counsel 4/9/02

AMENDMENT 2 - EXHIBIT A
INDIVIDUAL CONTRACTOR INFORMATION

- A.1. ADMINISTRATION COUNTY'S Alcohol and Drug Program Administrator, hereinafter called COUNTY'S Administrator, under the direction of the Health Services Agency Administrator shall represent COUNTY in all matters pertaining to services rendered pursuant to this Agreement and shall administer this Agreement on behalf of COUNTY. CONTRACTOR'S Executive Director shall administer this Agreement on behalf of CONTRACTOR.
- A.2. TERM: The term of this Agreement shall commence on July 1, 2001 and continue through and including June 30, 2002 during which time CONTRACTOR shall perform the services provided herein.
- A.3. COMPENSATION Total contract amount shall not exceed Five Hundred Sixty-seven Thousand, **Thirty** and No/100 (\$567,030.00) for services performed during the term of this Agreement. In no event shall COUNTY obligation of State Drug and Alcohol Allocation base and required COUNTY funds exceed this amount.

FOR FEE-FOR-SERVICE CONTRACTS: COUNTY agrees to pay CONTRACTOR a total sum not to exceed exceed Five Hundred Sixty-seven Thousand, Thirty and No/100 (\$567,030.00) for services performed during the term of this Agreement in accord with the negotiated rates set forth in Exhibit D. CalWORKs funds may only be used for activities related to CalWORKs clients. Proposition 10 funds may only be used for activities related to Proposition 10 clients. Proposition 36 funds may only be used for activities related to Proposition 36 clients. In no event shall COUNTY obligation of State Drug and Alcohol Allocation base, Prop 36 & Prop 10 allocations, and required COUNTY funds exceed this amount.

In no event shall COUNTY be required to pay for the cost of services which are covered by funding received by CONTRACTOR from other governmental contracts or **grants**.

- A.4. NOTICE: Any notice or notices required or permitted to be given pursuant to this Agreement may be personally served on the other party by the party giving such notice, or may be served by mail to the COUNTY'S Administrator at: County of Santa **Cruz**, HEALTH SERVICES AGENCY, Alcohol and Drug Programs, 1400 Emeline Avenue, Santa Cruz CA 95060, or to CONTRACTOR at: Fenix Services, Inc. 10 Alexander Street, Watsonville, CA 95076.

AMENDMENT 1 – EXHIBIT D
FISCAL PROVISIONS

D.1. **MAXIMUM ALLOCATION:** CONTRACTOR agrees that COUNTY'S Maximum Allocation under the terms of this Agreement for each mode of service are listed below. The COUNTY reserves the right to change the source of funds based on COUNTY and State requirements.

BY FUNDING SOURCE

TOTAL	Modality	Other Funds	Proposition 10	Proposition 36	CalWORKs SAT
\$ 66,094	Prevention	\$ 66,094			
\$ 134,576	Outpatient	\$ 70,500	\$ 12,511	\$ 27,065	\$ 24,500
\$ 341,118	Residential Hermanas	\$ 205,998	\$ 7,769	\$ 44,701	\$ 82,650
\$ 14,446	Perinatal Outpatient	\$ 12,354	\$ 2,092		
\$ 10,796	Proposition 36 Drug Testing	\$ 10,796			
\$ 567,030	TOTAL	\$ 365,742	\$ 22,372	\$ 71,766	\$ 107,150

D.2. **FEE FOR SERVICE CONTRACTS UNIT OF SERVICE RATES:** COUNTY agrees to compensate CONTRACTOR at the unit of service rates set forth below. Settlement will be done at the end of the contract with the Cost Report. CONTRACTORS may request a change in the below rates, by a written request to the COUNTY Administrator. COUNTY Administrator may approve rate changes of 10% or less. Rate changes above 10% will require a contract amendment.

UNIT	RATE	SERVICE
Staff Hour - a.5.	\$ 47.71	Primary Prevention
Staff Hour – a. 1., 2., 3., 4.	\$ 48.28	Outpatient Counseling
Staff Hour – a. 1., 3.	\$ 49.61	Perinatal Outpatient Counseling
Bed Day – b., b. 1., 2., 3.	\$ 93.33	Residential Treatment (Individual Client)
Bed Day – b., b. 1., 2., 3.	\$112.32	Residential Treatment (Client with Child(ren))
Drug & Alcohol Testing – c.	\$ 17.50	Proposition 36 Drug and Alcohol Testing

D.3. **DEFINITIONS:** Definition of above units of service shall be as follows:

a. **STAFF HOUR:** Those hours that a direct service staff person is on the job and available to provide services. A direct service staff person is defined as a staff person who spends time providing services directly to program clients. Administrative, clerical and other support services may not be billed as staff hours. Staff time used for vacations, holidays, sick leave and other leave may not be billed to COUNTY. Volunteer and unpaid intern time may not be billed to COUNTY. Time to be billed in 15 minute increments of direct staff time. Staff Hours are claimed for the following modes of service:

- Outpatient Services:** Staff Hours may include individual counseling and group therapy of a minimum of 3 and not more than 15 unrelated individuals, intake, assessment, case management and aftercare.
- CalWORKs Outpatient Services:** Staff Hours may be claimed for assessment, treatment, case management, referral and aftercare services that are authorized and approved by the HRA CalWORKs Employment and Training staff. Alcohol or drug (AOD) services are to be employment focused, and in accordance with CalWORKs Welfare-to-Work plans and/or participation agreements. As authorized and approved by HRA, CalWORKs funds may also be claimed for participation in CalWORKs multi-disciplinary team meetings; for outreach and education activities related to informing and encouraging CalWORKs recipients to enter into alcohol and drug treatment services; and for participation as requested in multi-disciplinary team meetings. CONTRACTOR shall establish procedures for screening all clients at intake regarding their status as a CalWORKs recipient and refer CalWORKs recipients who were not initially referred by the Human Resources Agency (HRA) back to HRA for inclusion of alcohol and drug

EXHIBIT E-2
DESCRIPTION OF SERVICES

Contractor: FENIX Services, Inc.
 Component: Outpatient Program Provider # 44-0001
 Modality: Outpatient Alcohol and Drug Treatment
Primary Target Groups Treated: Men, Women and Youth; Latinos

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$133,076	\$116,627	\$134,576
County Funding	\$53,795	\$88,069	\$134,576
Number of clients funded by County	129	135	174

PRIMARY PROBLEMS TREATED

The Fenix Outpatient Program provides comprehensive outpatient counseling services for residents of **South** Santa Cruz County who have a primary alcohol or drug abuse problem and to family members of individuals with an alcohol or drug problem. Program emphasis is on the Latino population taking into consideration the cultural diversity, language, **and** socio-economic factors that impact **this** population.

PROGRAM GOALS AND OBJECTIVES

GOAL I. To provide comprehensive outpatient services including preliminary screenings, intake assessments, individual and group counseling, case conferences, and aftercare services to adults and family members experiencing **problems with** drugs and alcoholism, with specific emphasis **on** the Latino population of South Santa Cruz County.

OBJECTIVE A. OUTPATIENT COUNSELING. Fenix will provide a total of 1,545 Outpatient Counseling staff hours to 92 men, women **and/or** youth.

- A. 1. Fenix will encourage clients to participate financially in their **own** recovery by charging for outpatient services according to each individual's ability to pay, in order **to** extend the **units** of service which **may** be provided by public funding. No client **will** be turned away because of inability to pay.
- A.2. Of the 92 clients, Fenix will provide Outpatient Services to the following hard to reach populations:
 - a. Alcohol and drug abusing Latinos, youth and family members.

OBJECTIVE B. INDIVIDUAL COUNSELING. Of **the** 1,545 staff hours for Outpatient Services, Fenix will provide 772 staff hours for Individual Counseling to 92 unduplicated clients.

- B.1. Of the 772 hours, at least 502 staff hours **will be** for face-to-face Individual Counseling client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows and session planning.

OBJECTIVE C. GROUP COUNSELING. Of the 1,545 staff hours for Outpatient Services, Fenix

will provide **773** staff hours for Group Counseling to **46** unduplicated clients.

- C.1. Of the **773** hours, at least **387** staff hours will be devoted to face-to-face client services. Face-to-face client service staff hours **will** not equal available staff hours because of staff time for charting, no-shows and session planning.

GOAL II. To provide a total of 508 outpatient staff hours to 33 unduplicated CalWORKs clients for services including assessment, treatment, case management, referral and aftercare services that are authorized and approved by the HRA CalWORKs Employment and Training staff. Alcohol or drug (AOD) services are to be employment focused, and in accordance with CalWORKs Welfare-to-Work plans and/or participation agreements.

OBJECTIVE A. INDIVIDUAL COUNSELING. Of the **508** staff hours for Outpatient Services, Fenix will provide 254 staff hours for Individual Counseling to **33** unduplicated clients.

- A.1. Of the 254 hours, at least 165 staff hours will be for face-to-face Individual Counseling client services. Face-to-face client service staff hours **will** not equal available staff hours because of staff time for charting, no-shows and session planning.

OBJECTIVE B. GROUP COUNSELING. Of the 508 staff hours for Outpatient Services, Fenix will provide 254 staff hours for Group Counseling to **17** unduplicated clients.

- B.1. Of the **254** hours, at least 127 **staff** hours will be devoted to face-to-face client services. Face-to-face client service staff hours **will** not equal available staff hours because of staff time for charting, no-shows and session planning.

GOAL III. To provide a total of 258 outpatient staff hours for 16 unduplicated Proposition 10 clients for services including assessment, treatment, case management, court appearances, referral and aftercare services that are authorized and approved by the HSA Mental Health Client Specialist as part of the Child Welfare Services Treatment Team. In addition, CONTRACTOR will provide Client Progress Reports in accordance with COUNTY Protocols.

OBJECTIVE A. INDIVIDUAL COUNSELING. Of the 258 staff hours for Outpatient Services, Fenix will provide 129 staff hours for Individual Counseling to **16** unduplicated clients.

- A.1. Of the 129 hours, at least **84** staff hours will be for face-to-face Individual Counseling client services. Face-to-face client service staff hours **will** not equal available **staff** hours because of staff time for charting, no-shows and session planning.

OBJECTIVE B. GROUP COUNSELING. Of the 258 staff hours for Outpatient Services, Fenix will provide 129 staff hours for Group Counseling to **8** unduplicated clients.

- B.1.** Of the 129 hours, at least 65 staff hours will be devoted to face-to-face client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows and session planning.

GOAL IV. To provide a total of 560 outpatient staff hours to **33** unduplicated Proposition **36** clients for services including assessment, treatment, case management, court appearances, referral and

aftercare services that are authorized and approved by the **HSA** Mental Health Client Specialist as part of the Substance Abuse and Crime Prevention Act (SACPA) Treatment Team. Fenix Services, Inc. will provide Client Progress **Reports** in accordance with **COUNTY** Protocols. In addition, Fenix Services, Inc. will collect fees designated by the **Court** and provide monthly accounting to **HSA** and Probation. Random alcohol and drug testing will be provided as ordered by the court. Ancillary services will be provided **through** referral or directly.

OBJECTIVE A. INDIVIDUAL COUNSELING. Of the 560 **staff** hours for Outpatient Services, Fenix will provide 280 staff hours for Individual Counseling to 33 unduplicated clients.

A.1. Of the 280 hours, at least **182 staff** hours will be for face-to-face Individual Counseling client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows and session planning.

OBJECTIVE B. GROUP COUNSELING. Of the **560** staff hours for Outpatient Services, Fenix will provide **280** staff hours for Group Counseling to **16** unduplicated clients.

B.1. Of the 280 hours, at least 140 staff hours will be devoted to face-to-face client services. Face-to-face client service **staff** hours will not equal available staff hours because of **staff** time for charting, no-shows and session planning.

EXHIBIT E-4
DESCRIPTION OF SERVICES

Contractor: **FENIX Services, Inc.**
 Component: Residential Services
 Modality: Hermanas Residential
 Primary Target Groups Treated: Women, Latinas

Provider #: 44-007

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	00-01 New Budget Year Estimated
Gross Program Cost	\$250,688	\$241,730	\$341,118
County Funding	\$209,608	\$182,305	\$341,118
Number of clients funded by County	40	40	39

PRIMARY PROBLEMS TREATED

Hermanas Residential Program is a community-based residential treatment program consisting of a social model, peer oriented recovery home for Latina alcoholics. The 90 to 120 day residential program includes individual counseling, group work, aftercare and outreach services. Program emphasis is on the Latina population taking into consideration the cultural diversity, language, and socio-economic factors that impact this population.

GOAL I: To provide comprehensive community-based residential treatment and rehabilitation services to 40 Latina alcohol and drug abusers.

OBJECTIVE A. RESIDENTIAL TREATMENT. Fenix will provide residential treatment with an average length of treatment of ~~from~~ 90 to 120 days to adult Latinas, at Hermanas Recovery Home. A total of 12 facility beds will be maintained with an average 85% occupancy rate. Hermanas Recovery Home will provide the following:

- A.1. County clients: 2,246 bed days per year to 25 clients. To extend the ~~units of service that are provided from public funding~~ Fenix will encourage County clients to participate financially in their own recovery by charging for residential services according to each individual's ability to pay. No County client will be turned away because of inability to pay.
- A.2. CalWORKs clients: 735 bed days per year to 8.2 clients. Additional support services for CalWORKs clients will address ~~barriers~~ to employment.
- A.3. Proposition 10 clients: ~~69~~ bed days per year to 0.8 clients. Fenix Services, Inc. will provide client updates to HSA and HRA caseworkers as required by COUNTY protocols.
- A.4. 478 bed days per year to 5.5 Proposition 36 clients. Fenix Services, Inc. will collect fees designated by the Court for Proposition 36 clients and provide monthly accounting to HSA and Probation. In addition, random alcohol and drug testing will be provided as ordered by the court, and ancillary services will be provided through referral or directly.

OBJECTIVE B. To provide promote additional recovery activities, including relapse prevention follow-up contacts with graduates of Hermanas, bi-weekly Family Strengthening Groups, home visits to prospective clients and/or their families, and Life skills workshops.

EXHIBIT E-5
DESCRIPTION OF SERVICES

Contractor: Fenix Services, Inc.
 Component: Proposition 36 Outpatient
 Modality: Drug and Alcohol Testing
 Provider # 44-001
Primary Target Groups Treated Proposition 36 Drug Offenders

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$ 0	\$ 0	\$ 10,796
County Funding	\$ 0	\$ 0	\$ 10,796
Number of clients funded by County	NIA	NIA	NIA

PRIMARY PROBLEMS TREATED

The Fenix Services, Inc. Proposition 36 Services ~~will~~ include drug and alcohol testing according to a schedule mandated by the Court.

PROGRAM GOALS AND OBJECTIVES

GOAL I: Fenix Services, Inc. will provide random alcohol and drug testing of Proposition 36 outpatient and residential clients as ordered by the Court. Testing will be conducted on site using the protocols established by the COUNTY. Results of the tests will be included in all reports on client progress provided to the SACPA Team. Costs of the testing will be offset first by fees collected from Proposition 36 clients, and then from non-Proposition 36 funds provided by the COUNTY.

- OBJECTIVE A. Assay at least 85% of samples collected.
- OBJECTIVE B. Conduct at least one full panel test per month, and test the remaining samples to be assayed for the client's primary drug(s) of choice.
- OBJECTIVE C. Where non-evidentiary tests are used, be prepared to submit the specimen for confirmatory analysis if a positive result is challenged by the client.
- OBJECTIVE D. Report any positive test results to Probation within two working days of receiving the positive result.

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT

TO: Board of Supervisors
County Administrative Office
Auditor Controller

FROM: Health Services Agency (Department)
BY: [Signature] (Signature) 4/23/02 (Date)
Signature certifies that appropriations/revenues are available

AGREEMENT TYPE (Check One) Expenditure Agreement [X] Revenue Agreement []

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of same.

1. Said agreement is between the County of Santa Cruz Health Services Agency - ADP (Department/Agency)
and The Camp Recovery Center, P.O. Box 66569, Scotts Valley, CA 95067 (Name/Address)

2. The agreement will provide Proposition 36 outpatient drug and alcohol counseling and drug and alcohol testing.

3. Period of the agreement is from July 1, 2001 to June 30, 2002

4. Anticipated Cost is \$ increased to 51,732 [] Fixed [] Monthly Rate [] Annual Rate [X] Not to Exceed
Remarks: This amendment increases the current contract by \$23,074.

5. Detail: [] On continuing Agreements List for FY - , Page CC- Contract No: OR [] 1st Time Agreement
[] Section II No Board letter REQUIRED will be listed under Item 8
[X] Section III Board letter required
[] Section IV Revenue Agreement

6. Appropriations/Revenues are available and are budgeted in 364043 (Index) 3638 (Sub object)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACHED COMPLETED AUD-74 OR AUD-60

Appropriations are available and have been encumbered.
are not available and will be encumbered.

Contract No: 12536
By: [Signature] Auditor-Controller Deputy Date: 04/24/02

Proposal and accounting detail reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize Health Services Administrator (Dept/Agency Head) to execute on behalf of the Health Services

Date: 4/25/02 By: [Signature] County Administrative Office (Department/Agency)

Distribution:

Board of Supervisors - White
Auditor Controller - canary
Auditor-Controller - Pink
Department - Gold

state of California
County of Santa Cruz
I, [Signature] ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz, State of California, do hereby certify that the foregoing request for approval of agreement was approved by said Board of Supervisors as recommended by the County Administrative office by an order duly entered in the minutes of said Board on 20

ADM - 29 (8/01)
Title I, Section 300 Proc Man

By: Deputy Clerk

AUDITOR-CONTROLLER USE ONLY

Table with columns: CO, Document No., JE Amount, Lines, H/TL, Keyed By, Date, TC110, Auditor Description, Amount, Index, Sub object, User Code. Includes handwritten number 30.

Contract No: 2536
Index: 364042
Subobject: 3638

AMENDMENT No. 1 TO AGREEMENT

The parties hereto agree to amend that certain above Agreement dated July 1, 2001, by the changes as follows:

A. Contract Payment Limit

1. Cover Sheet

Increasing the total contract maximum by \$23,074.00 for a new total contract maximum of \$51,732.00.

2. Budget Sheets

Deleting existing Exhibit A and Exhibit D, Pages 2 and 16, and replacing with revised Exhibits A and Exhibit D, Pages 2 and 16.

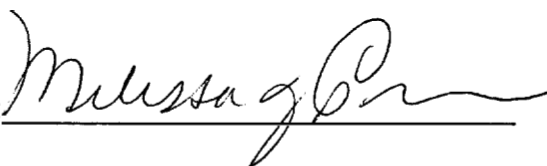
3. Scope of Service Sheets

Deleting existing Exhibit E-1 and E-3, Pages 19 and 21, and replacing with Exhibit E-1 and E-3, Pages 19 and 21.

All other provisions of said Agreement, excepting those mentioned above, shall remain the same.

CONTRACTOR

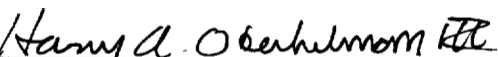
COUNTY OF SANTA CRUZ

By: 

By: _____

Health Services Agency

Approved as to form:


County Counsel 4/9/02

AMENDMENT 1 – EXHIBIT A
INDIVIDUAL CONTRACTOR INFORMATION

0255

- A. 1. ADMINISTRATION: County's Alcohol and Drug Program Administrator, hereinafter called County's Administrator, under the direction of the Health Services Agency Administrator shall represent County in all matters pertaining to services rendered pursuant to this Agreement and shall administer this Agreement on behalf of County. Contractor's Executive Director shall administer this Agreement on behalf of Contractor.
- A.2. TERM: The term of this Agreement shall commence on July 1, 2001 and continue through and including June 30, 2002 during which time Contractor shall perform the services provided herein.
- A.3. COMPENSATION: Total contract amount shall not exceed Fifty-One Thousand Seven Hundred ~~Thirty-Two~~ and No/100 (\$51,732.00) for services performed during the term of this Agreement. In no event shall County obligation of State Drug and Alcohol Allocation base and required County funds exceed ~~this~~ amount.

FOR FEE-FOR-SERVICE CONTRACTS: County agrees to pay Contractor a total sum not to exceed Fifty-One Thousand Seven Hundred ~~Thirty-Two~~ and No/100 (\$51,732.00) for services performed during the term of this Agreement in accord ~~with~~ the negotiated rates set forth in Exhibit D. CalWORKs funds may only be used for activities related to CalWORKs clients. Proposition 10 funds may only be used for activities related to Proposition 10 clients. Proposition 36 funds may only be used for activities related to Proposition 36 clients. In no event shall County obligation of State Drug and Alcohol Allocation base, Proposition 36 and Proposition 10 allocations and required COUNTY' funds exceed ~~this~~ amount.

In no event shall County be required to pay for the cost of services which are covered by funding received by Contractor ~~from~~ other governmental contracts or grants.

- A.4. NOTICE: Any notice or notices required or permitted to be given pursuant to this Agreement may be personally served on the other party by the party giving such notice, or may be served by mail to the County's Administrator at: County of Santa Cruz, HEALTH SERVICES AGENCY, Alcohol and ~~Drug~~ Programs, 1400 Emeline Avenue, Santa Cruz CA 95060, or to Contractor at: The Camp Recovery Center, P.O. Box 66569, Scotts Valley, CA, 95067.

AMENDMENT 1 – EXHIBIT D
FISCAL PROVISIONS

D.1. **MAXIMUM ALLOCATION:** Contractor agrees that County's Maximum Allocation under the terms of this Agreement for each mode of service are listed below. The County reserves the right to change the source of funds based on County and State requirements.

BY **FUNDING SOURCE**

TOTAL	Modality	Other Funds	Proposition 36
\$ 40,936	Proposition 36 Outpatient Counseling	\$ 0	\$ 40,936
\$ 10,796	Proposition 36 Alcohol & Drug Testing	\$ 0	\$ 10,796
\$ 51,732	TOTAL	\$ 0	\$ 51,732

D.2. **FEE FOR SERVICE CONTRACTS UNIT OF SERVICE RATES:** County agrees to compensate Contractor at the unit of service rates set forth below. Settlement will be done at the end of the contract with the Cost Report. Contractors may request a change in the below rates, by a written request to the County Administrator. County Administrator may approve rate changes of 10% or less. Rate changes above 10% will require a contract amendment.

UNIT	RATE	SERVICE
Staff Hour - d	32.50	Proposition 36 Outpatient Counseling
Drug Test	17.50	Proposition 36 Alcohol & Drug Testing

D.3. **DEFINITIONS:** Definition of above units of service shall be as follows:

STAFF HOUR: Those hours that a direct service staff person is on the job and available to provide services. A direct service staff person is defined as a staff person who spends time providing services directly to program clients. Administrative, clerical and other support services may not be billed as staff hours. Staff time used for vacations, holidays, sick leave and other leave may not be billed to County. Volunteer and unpaid intern time may not be billed to County. Time to be billed in 15 minute increments of direct staff time. Staff Hours are claimed for the following modes of service:

- a. **Outpatient Services:** Staff Hours may include individual counseling and group therapy of a minimum of 3 and not more than 15 unrelated individuals, intake, assessment, case management and aftercare.
- b. **CalWORKs:** Staff Hours may be claimed for assessment, treatment, case management, referral and aftercare services that are authorized and approved by the HRA CalWORKs Employment and Training staff. A copy of the CADDs form for each new client enrolled during the report month will be submitted with each monthly claim. Alcohol or drug (AOD) services are to be employment focused, and in accordance with CalWORKs Welfare-to-Work plans and/or participation agreements. As authorized and approved by HRA, CalWORKs funds may also be claimed for participation in CalWORKs multi-disciplinary team meetings; for outreach and education activities related to informing and encouraging CalWORKs recipients to enter into alcohol and drug treatment services; for start-up activities approved by the County Alcohol and Drug Program Administrator; and for participation as requested in multi-disciplinary team meetings. Contractor shall establish procedures for screening all clients at intake regarding their status as a CalWORKs recipient and refer CalWORKs recipients who were not initially referred by the Human Resources Agency (HRA) back to HRA for inclusion of alcohol and drug treatment into their CalWORKs activity agreement and/or CalWORKs Welfare-to-Work plan. If access to service for clients referred under CalWORKs cannot be provided within seven days of the receipt of the HRA referral, Contractor shall inform HRA and the Health Services Agency (HSA) Alcohol and Drug Program, and work in cooperation with HRA and HSA to address access issues. Contractor will coordinate with HRA and HSA to develop participant tracking and monitoring systems,

AMENDMENT 1– EXHIBIT E-1
DESCRIPTION OF SERVICES

Contractor: The Camp Recovery Center
 Component: Proposition 36 Outpatient
 Modality: Individual and Group Counseling
 Primary Target Groups Treated: Proposition 36 Drug Offenders

Provider #: 44-4499

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$ 0	\$ 0	\$ 40,936
County Funding	\$ 0	\$ 0	\$ 40,936
Number of clients funded by County	0	0	34

PRIMARY PROBLEMS TREATED

The Camp Recovery Center Proposition 36 Outpatient Program is designed for adults who do not require 24-hour care, but are not capable of assuming full responsibility for their lives without the structure and support of an outpatient program. Goals of the program are to develop a commitment to recovery, demonstrate an understanding of addiction and basic relapse principles, and develop a recovery plan. Services include intake, individual and group counseling, multi-family group therapy, education groups, life skills development, work adjustment counseling, aftercare planning and monitoring of attendance at 12-step meetings.

PROGRAM GOALS AND OBJECTIVES

GOAL I. To provide outpatient education and counseling services to clients referred by the Proposition 36 SACPA Treatment Team. Random alcohol and drug testing will be provided as ordered by the court. Ancillary services will be provided through referral or directly

OBJECTIVE A. OUTPATIENT COUNSELING. The Camp Recovery Center will provide a total of 1,260 Outpatient Counseling staff hours to 34 men and women referred by the SACPA Treatment Team. The Camp Recovery Center will collect fees designated by the Court and provide monthly accounting to HSA and Probation.

OBJECTIVE B. INDIVIDUAL COUNSELING. Of the 1,260 staff hours for Outpatient Services, The Camp Recovery Center will provide 129 staff hours for Individual Counseling to 34 unduplicated clients.

B. 1. Of the 129 hours, at least 84 staff hours will be for face-to-face Individual Counseling client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows, court appearances and session planning.

OBJECTIVE C. GROUP COUNSELING. Of the 1,260 staff hours for Outpatient Services, The Camp Recovery Center will provide 1,131 staff hours for Group Counseling to 34 unduplicated clients.

B. 1. Of the 1,131 hours, at least 735 staff hours will be for face-to-face Group Counseling client services. Face-to-face client service staff hours will not equal available staff hours because of staff time for charting, no-shows, court appearances and session planning.

**AMENDMENT 1 – EXHIBIT E-3
DESCRIPTION OF SERVICES**

Contractor: The Camp Recovery Center
 Component: Proposition 36 Outpatient
 Modality: Drug and Alcohol Testing
 Primary Target Groups Treated: Proposition 36 Drug Offenders

Provider #: 44-4499

Budget and Unit of Service (UOS) Data

	99-00 Past Year Actual	00-01 Current Year Estimated	01-02 New Budget Year Estimated
Gross Program Cost	\$ 0	\$ 0	\$ 10,796
County Funding	\$ 0	\$ 0	\$ 10,796
Number of clients funded by County	N/A	N/A	N/A

PRIMARY PROBLEMS TREATED

The Camp Recovery Center's Proposition 36 services will include drug and alcohol testing according to a schedule mandated by the Court.

PROGRAM GOALS AND OBJECTIVES

GOAL I: The Camp Recovery Center will provide random alcohol and drug testing of Proposition 36 outpatient clients as ordered by the Court. Testing will be conducted on site using the protocols established by the County. Results of the tests will be included in all reports on client progress provided to the SACPA Team. Costs of the testing will be offset first by fees collected from Proposition 36 clients, and then from non-Proposition 36 funds provided by the County.

OBJECTIVE A. Assay at least 85% of samples collected.

OBJECTIVE B. Conduct at least one full panel test per month, and test the remaining samples to be assayed for the client's primary drug(s) of choice.

OBJECTIVE C. Where non-evidentiary tests are used, be prepared to submit the specimen for confirmatory analysis if a positive result is challenged by the client.

OBJECTIVE D. Report any positive test results to Probation within two working days of receiving the positive result.

**BEFORE THE BOARD OF SUPERVISORS
OF THE COUNTY OF SANTA CRUZ, STATE OF CALIFORNIA**

RESOLUTION NO.

On the motion of Supervisor
Duly seconded of Supervisor
The following resolution is adopted

**RESOLUTION APPROVING THE SUBSTANCE ABUSE AND CRIME PREVENTION ACT OF
2000 ANNUAL PLAN FOR 2002/03 AND FUNDING**

WHEREAS, the voters have adopted the Substance Abuse and Crime Prevention Act of 2000 (Proposition 36), which mandates drug treatment instead of incarceration for certain drug offenses; and

WHEREAS, in order to receive State Proposition 36 funding the County must submit an annual plan and make certain assurances to the State,

NOW, THEREFORE, BE IT RESOLVED that the Santa Cruz County Board of Supervisors hereby:

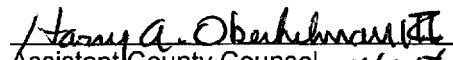
- Approves the County 2002/03 Proposition 36 plan and authorizes the Health Services Agency Administrator to sign;
- Designates the Health Services Agency as the lead agency of Santa Cruz County's Substance Abuse and Crime Prevention Act of 2000 responsibilities and;
- Assures that the County of Santa Cruz shall comply with the provisions of the Substance Abuse and Crime Prevention Act of 2000 and the California Code of Regulations, Title 9, Division 4, Chapter 2.5; and
- Assures that the County of Santa Cruz has established a trust fund; and
- Assures that the County of Santa Cruz shall deposit all funds received into that trust fund.

PASSED AND ADOPTED, by the Board of Supervisors of the County of Santa Cruz, State of California, this seventh day of May, 2002 by the following vote:

AYES: SUPERVISORS
NOES: SUPERVISORS
ABSTAIN: SUPERVISORS

Chair of the Board

APPROVED AS TO FORM:


Assistant County Counsel 4/25/02

Distribution: CAO County Counsel Auditor-Controller Probation
 District Attorney Public Defender HSA Administration Sheriff