

BOS No. Orig. #23-320; Amd2 #24-284
Infor Contract No. 5228
Cobblestone ID No. 1875

**THIRD AMENDMENT
(BOS AGREEMENT NO. ____ - ____)**

This Third Amendment to Agreement No. 23-320 (“Third Amendment”) is made and entered into as of the last date signed below, by and between the County of Yolo (“County”) and Yolo Community Care Continuum (“Contractor”), jointly referred to as the “Parties” herein.

WHEREAS, on or about December 8, 2023, the Parties entered into Agreement No. 23-320 (“Agreement”); and

WHEREAS, on or about August 24, 2024, the Parties amended the Agreement via the First Amendment; and

WHEREAS, on or about October 8, 2024, the Parties further amended the Agreement via the Second Amendment; and

WHEREAS, the Parties would now like to amend the Agreement, as previously amended, to:

1. Revise **Paragraph III.D. of Article 1** to add funding in the amount of \$120,000 for a new contract maximum of \$3,395,667.79 by adding \$60,000 to Fiscal Year (FY) 2024-25 and adding \$60,000 to FY 2025-26; and
2. Revise **Paragraph III.E. of Article 1** to increase the lifetime maximum; and
3. Revise **Paragraphs III.A. and III.B. of Article 2** to update County contacts; and
4. Revise **Paragraph XI.B. of Article 2** to update County signing authority; and
5. Revise **Paragraph 2.d.i of Exhibit D** to update County Risk Manager; and
6. Revise **Exhibit E** to add numbering for ease of reference and update County contacts.

NOW, THEREFORE, THE PARTIES HEREBY AGREE AS FOLLOWS:

1. Paragraph III.D. of Article 1 of the Agreement is hereby amended to read as follows:

D. The maximum financial obligation of County under this Agreement for the term of this Agreement shall not exceed **THREE MILLION THREE HUNDRED NINETY-FIVE THOUSAND SIX HUNDRED SIXTY-SEVEN DOLLARS AND SEVENTY-NINE CENTS (\$3,395,667.79)**, as follows:

Fiscal Year 2023-24 January 1, 2024 through June 30, 2024	Fiscal Year 2024-25 July 1, 2024 through June 30, 2025	Fiscal Year 2025-26 July 1, 2025 through June 30, 2026	Total
\$691,467.79	\$1,352,100.00	\$1,352,100.00	\$3,395,667.79

These amounts are not guaranteed but shall be paid only for services rendered and received in conformance with this Agreement.

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2. Paragraph III.E. of Article 1 of the Agreement is hereby amended to read as follows:

E. County may exercise its option to extend the term of the Agreement pursuant to Article I, Section I., above. In the event that County elects to take its option, County shall notify Contractor in writing. The notice shall include the revised agreement term, approved funding amount to be added to the Agreement; and revised agreement maximum compensation, subject to the maximums set forth below:

Option Year/ Fiscal Year (OY/FY)	Revised Agreement Expiration Date Per OY/FY	Maximum Increased Funding Amount Per OY/FY	Revised Agreement Lifetime Maximum Per OY/FY
OY/FY 2026-27	On or before June 30, 2027	Less than or equal to \$1,292,100	Less than or equal to \$4,687,767.79
OY/FY 2027-28	On or before June 30, 2028	Less than or equal to \$1,292,100	Less than or equal to \$5,979,867.79

In no event shall the term of the Agreement extend beyond **June 30, 2028**, nor shall the total contract maximum exceed the amount of **FIVE MILLION NINE HUNDRED SEVENTY-NINE THOUSAND EIGHT HUNDRED SIXTY-SEVEN DOLLARS AND SEVENTY-NINE CENTS (\$5,979,867.79)**, unless otherwise agreed to in writing by the Parties and in conformity with the then-current Yolo County Procurement Policy approved by the Yolo County Board of Supervisors.

3. Paragraphs III.A. and III.B. of Article 2 of the Agreement are hereby amended to read as follows:

A. All notices shall be deemed to have been given when made in writing and delivered or mailed to the respective representatives of County and Contractor at their respective addresses as follows:

Contractor:
 Yolo Community Care Continuum
 P.O. Box 1101
 Davis, CA 95617
 Attn: Michelle Kellogg, Interim Director

County:
 Yolo County Health and Human Services Agency
 137 N. Cottonwood Street
 Woodland, CA 95695
 Attn: HHSA Director

B. In lieu of written notice to the above addresses, any Party may provide notices by email provided the following email addresses are used:

Contractor:
mkellogg@y3c.org

County:
 Contracts Unit HHSAContracts@yolocounty.gov
 Contract Administrator Joni.Lara-Jimenez@yolocounty.gov

4. Paragraph XI.B. of Article 2 of the Agreement is hereby amended to read as follows:

B. Specific County Authority

1. Director’s Authority: Director may exercise optional extensions, if any, and execute related option notices in conformance with the conditions of Section III of Article 1. Director may also issue any other general notices regarding the administration of this Agreement, including letters re disallowances and recoupment.
2. County Procurement Manager’s Authority: The Yolo County Deputy Director/Manager of Procurement (“Procurement Manager”) may approve and execute amendments regarding allocation of funds between categories of services, scope of services, billing rates, and other

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IN WITNESS WHEREOF the Parties have executed this Third Amendment as of the day and year last set forth below.

CONTRACTOR

COUNTY OF YOLO

DocuSigned by:
Michelle Kellogg
ABF37B4267654E2
Michelle Kellogg, Interim Director
Yolo Community Care Continuum

Mary Vixie Sandy, Chair
Board of Supervisors

Date: 5/1/2025

Date: _____

Signed by:
J Planell
B3F18BE249E54DA...
Joan Planell, Interim Director
Health and Human Services Agency

Attest:
Julie Dachtler, Senior Deputy Clerk

By: _____
Deputy (Seal)

Approved as to Form:
Philip J. Pogledich, County Counsel

By: *Hope P. Welton*
Hope P. Welton, Senior Deputy

EXHIBIT E – PERFORMANCE MEASURES

Safe Harbor – Crisis Residential	Yolo Community Care Continuum	Michelle Kellogg
Program Purpose	To provide Crisis Residential program offers therapeutic or rehabilitative services in a non-institutional residential setting which uses a structured program. It functions both as an alternative to hospitalization for beneficiaries experiencing an acute psychiatric episode or crisis or as a step-down level of care for beneficiaries discharging from hospitalization. Services include a range of activities that support beneficiaries in their efforts to restore, maintain, and apply interpersonal and independent living skills, and to access community support systems. The service is available 24 hours a day, seven days a week.	
Program Information	Safe Harbor Crisis Residential Program (SHCRP) is designed to offer both short-term (up to 4 day), and longer-term (up to 30 day), crisis-oriented care in a social rehabilitation setting. The goal of the program is to stabilize a beneficiary’s immediate crisis and help them transition to ongoing mental health and/or substance use disorder care based on their individual needs. Referrals to housing supports, physical health providers, and other community resources also occur, as needed.	
PM1: How much did we do?		
1.1	Total # of individuals served in a Short-Term crisis bed.	
1.2	Average length of stay (in hours) in a Short-Term crisis bed.	
1.3	Total # of individuals served in a Longer-Term crisis bed.	
1.4	Average length of stay (in days) in a Longer-Term crisis bed.	
1.5	Average Crisis Residential program daily census (both Short- and Longer-Term beds).	
1.6	Total # of individuals referred to the Crisis Residential program from each of the following: <ul style="list-style-type: none"> • the Crisis Receiving/Sobering Center, • an HHSA Outpatient clinic/provider, • an inpatient facility, or • Other (please specify). 	
1.7	Total number of individuals referred to the Crisis Residential program (for either a Short- or Longer-Term bed) that were NOT accepted and provide the reason for denial.	
PM2: How well did we do it?		
2.1	# and % of individuals served in the Short-Term bed who engaged in treatment and/or support group (as indicated by participation in at least one activity per day, excluding medication services).	
2.2	# and % of individuals served in a Short-Term bed that DID NOT transition to a Longer-Term bed during their Safe Harbor stay.	
2.3	# and % of individuals served in a Longer-Term bed who completed at least one treatment goal, per their treatment plan, during their stay.	
2.4	# and % of individuals served in the Crisis Residential program whose total length of stay was 30 days or less.	
2.5	# and % of individuals served in the Crisis Residential program who WERE NOT placed in an involuntary psychiatric hold during their stay.	

EXHIBIT E – PERFORMANCE MEASURES

PM3: Is anyone better off?	
3.1	# and % of individuals served in the Crisis Residential program that DID NOT return for an additional Crisis bed stay in the subsequent 30 days.
3.2	# and % of individuals served in a Short-Term bed who were linked, by warm hand-off, to an appropriate MH and/or SUD provider.
3.3	# and % of individuals served in a Short-Term bed who were linked to an appropriate homeless and/or housing support provider.
3.4	# and % of individuals served in a Longer-Term bed who were linked, by warm hand-off, to an appropriate MH and/or SUD provider.
3.5	# and % of individuals served in a Longer-Term bed who were linked to an appropriate homeless and/or housing supports provider.

A. Performance Measures Reports are due Quarterly as follows:

- Submit October 31st for the period of July 1st through September 30th
- Submit January 31st for the period of October 1st through December 31st
- Submit April 30th for the period of January 1st through March 31st
- Submit July 31st for the period of April 1st through June 30th

B. Contractor shall submit the Performance Outcome Measures report electronically via email to Joni.Lara-Jimenez@yolocounty.gov and Sajana.Budhathoki@yolocounty.gov.

[END EXHIBIT E]