

Amendment No.1 TO THE AGREEMENT BETWEEN COUNTY OF LAKE AND MOTHER-WISE PROGRAM (PERINATAL MOOD AND ANXIETY DISORDERS) FOR FISCAL YEAR 2019-20

This Amendment No. 1 to Agreement is made and entered into this 1st day of April, 2020 by and between the County of Lake, a political subdivision of the State of California (hereinafter referred to as "County") Mother-Wise Program (hereinafter referred to as "Contractor").

RECITALS

WHEREAS, the parties hereto have entered into an Agreement dated July 1, 2019 under which Contractor will provide specialized mental health services to County; and

WHEREAS, the parties wish to amend that agreement to allow for additional compensation to be paid; and

NOW, THEREFORE, the parties hereto agree to the following amendment to be effective April 1, 2020

Section 3 – COMPENSATION is hereby amended to read as follows:

"COMPENSATION" Contractor has been selected by County to provide the services described hereunder in **Exhibit A**, titled **"Scope of Services"**. **Compensation to the Contractor previously listed as not to exceed Sixty Five Thousand Dollars (\$65,000) shall now read One Hundred Eight Four Thousand Eight Hundred Sixty Two Dollars and Fifteen Cents (\$184,862.15).**

Exhibit B, Section 4 – PAYMENT TERMS is hereby amended to read as follows:

"PAYMENT TERMS" County shall reimburse the contractor monthly upon receipt of the invoices from prior month's services, provided County receives invoices no later than the 10th day of the calendar month. Late receipt of invoices by the timeframes specified in Exhibit B, Section 2 or MHSA progress reports by the timeframes specified in Exhibit A, Section 2 of this agreement may delay payment of invoices. **The monthly amount of the invoices should not total more than Forty Five Thousand Three Hundred Seventy Dollars and Seventy Two Cents (\$45,370.72) per month from April 2020 to June 2020.** Please reference item 4.1, Mother-Wise 2019-2020 Annual Budget.

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Exhibit B, Section 4.1 –MOTHER-WISE 2019-2020 ANNUAL BUDGET

	Hrs/ wk	Rate	Subtotal	Total
Unmet Needs from 2019-2020 Budget				\$13,566.15
Lakeport Office				
Carpet/Upholstery cleaning				\$1,100.00
Computer, Backup Drive, Software, Printer, Fax				\$3,930.00
Cabinets				\$600.00
Staff				
Group Facilitator	3.00	\$18.00		\$2,700.00
Clearlake Office				
Facility Rent				\$4,800.00
Utilities				\$2,000.00
Computer, Backup Drive, Software, Printer, Fax				\$3,930.00
Staff				
Concierge	20.00	\$20.00		\$20,800.00
Group Facilitator	3.00	\$18.00		\$2,700.00
Office Furniture				\$1,400.00
Group Supplies				\$5,000.00
Carpet cleaning				\$300.00
Bilingual (Spanish/English) Staff				\$10,296.00
Mileage				\$3,000.00
Volunteer Appreciation Event				\$1,000.00
PPD Support				
Books				\$4,800.00
Insurance				\$7,000.00
Clearlake Facility			\$3,500.00	
Lakeport			\$3,500.00	
Promotional Items				\$6,300.00
Event Station				\$300.00
New Signs				\$500.00

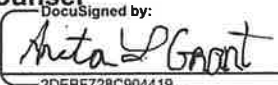
Printing Expenses	\$1,000.00
Background checks	\$1,500.00
Advertising	\$3,500.00
Engagement Specialist Hours	\$8,840.00
Volunteer Trainings	\$600.00
Staff Training/Continued Education	
CPR	\$400.00
PSI Conference	\$6,000.00
2020 Mom Forum	\$2,000.00
Grand Total	\$119,862.15

The Parties agree that all other terms and conditions of the original Agreement shall remain in full force and effect.

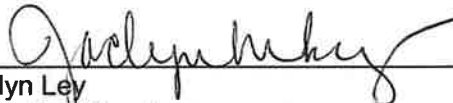
COUNTY OF LAKE

By: _____
Chair
Board of Supervisors
Date: _____

APPROVED AS TO FORM:
ANITA L. GRANT
County Counsel

By:  _____
Date: 4/17/2020

MOTHER-WISE

By:  _____
Jaclyn Ley
Executive Director
Date: 4/21/2020

ATTEST:
CAROL J. HUCHINGSON
Clerk to the Board of Supervisors

By: _____
Date: _____

