

CONTRACT AMENDMENT E

This CONTRACT AMENDMENT is made and entered into between SALISH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION, through Kitsap County, as its administrative entity, a political subdivision of the State of Washington, with its principal offices at 614 Division Street, Port Orchard, Washington 98366, hereinafter "SBH-ASO", and Kitsap Mental Health Services hereinafter "CONTRACTOR."

In consideration of the mutual benefits and covenants contained herein, the parties agree that their Contract, numbered as Kitsap County Contract No. KC-136-20 and executed on May 11, 2020, shall be amended as follows:

Page 1 shall be amended as follows:

- **Contract end date is extended from 6/30/2022 to 6/30/2023. The contract period is January 1, 2020 to June 30, 2023.**
 - **Contract amount is increased by \$253,940 from \$426,040 to \$679,980.**
 - **Attachment C: Budget is deleted and replaced as attached.**
 - **Attachment C-4 : Deliverables table for 7/1/22-6/30/23 is attached.**
5. If this Contract Amendment extends the expiration date of the Contract, then the Contractor shall provide an updated certificate of insurance evidencing that any required insurance coverages are in effect through the new contract expiration date. The Contractor shall submit the certificate of insurance to:
- Program Lead, Salish Behavioral Health Organization
Kitsap County Department of Human Services
614 Division Street, MS-23
Port Orchard, WA 98366.
- Upon receipt, the Human Services Department will ensure submission of all insurance documentation to the Risk Management Division, Kitsap County Department of Administrative Services.
6. Except as expressly provided in this Contract Amendment, all other terms and conditions of the original Contract, and any subsequent amendments, addenda or modifications thereto, remain in full force and effect.

This amendment shall be effective July 1, 2022.

SALISH BEHAVIORAL HEALTH ORGANIZATION, By KITSAP COUNTY BOARD OF COMMISSIONERS, Its Administrative Entity

E.E. Wolfe
EDWARD E. WOLFE, Chair

Charlotte Garrido
CHARLOTTE GARRIDO, Commissioner

Robert Gelder
ROBERT GELDER, Commissioner

CONTRACTOR: Kitsap Mental Health Services

DocuSigned by:
Monica Bernard
F0120480654047D...

Name: Monica Bernard
Title: Chief Executive Officer

10/27/2022

DATE

ATTEST:
Dana Daniels
Dana Daniels, Clerk of the Board

11/14/2022
DATE



ATTACHMENT C: BUDGET

Budget Summary			
Contractor:	<u>Kitsap Mental Health Services HARPS</u>		
Contract No:	KC-136-20 E		
Contract Period:	1/1/2020-6/30/2023		
HARPS Subsidies			
	Previous Budget	Changes this Amendment	Current Budget
Budget Period: 1/1/20-6/30/20			
HARPS Team	81,020	0	81,020
Budget Total	81,020	0	81,020
Budget Period: 7/1/20-6/30/21			
HARPS Team	171,640	0	171,640
Budget Total	171,640	0	171,640
Budget Period: 3/1/2021-6/30/2021			
HARPS SABG Support	2,500	0	2,500
Budget Period: 7/1/2021-6/30/2022			
HARPS Team	170,880	0	170,880
Budget Total	170,880	0	170,880
Budget Period 7/1/2022-3/14/2023			
HARPS SUD Peer (K5393-1)	0	80,000	80,000
Budget Period: 7/1/2022-6/30/2023			
HARPS Team (K6181)	0	171,440	170,880
Budget Period: 9/1/2022-6/30/2023			
HARPS SABG Support (K5393-2)	0	2500	2,500
Budget Total	0	253,940	253,940
Contract Total	426,040	253,940	679,980

Revenue Source: Health Care Authority Contract K5393 [KC-302-20]; K6181 [KC-385-22]; K5393-1; K5393-2
 Billed according to HARPS deliverables table.

Funded with Mental Health Block Grant Funds CFDA 93.958

Attachment C-4 : Deliverables table for HARPS Service Team July 1, 2022 - June 30, 2023

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Goal	Task	Performance Measure	Due Date*	Payment	Total
1	At least two (2) FTE from the HARPS team attend a HCA facilitated training event on the SAMHSA model Evidence-Based Practice of Permanent Supportive Housing (EBH PSH)	Sign in sheet verifying program staff attended the HCA facilitated EBP PSH Training Event	by 6/30/2023	1 payment of \$5,000 for EBP PSH Training	\$5,000
2	Document HARPS Landlord Outreach and Engagement Activities in monthly HARPS Participant Excel Log using the Landlord Outreach Tab submitted to the HCA through the FTP site, or an alternative acceptable secured email transmission no later than the 15th of following month.	At least 5 landlord/property manager contacts documented in the Landlord Outreach Tab of the Monthly HARPS Participant Excel Log Report the submitted to HCA and approved by the Program Manager.	Due by the 15th of each following month	12 months (assuming full staffing and start of services 7/1/2022) @ \$4,610 per report received and approved	\$55,300
3	Document and submit monthly HARPS Participant Excel log report detailing HARPS enrolled participants that receive services and/or subsidies using Exhibit A, Monthly HARPS Participant Excel Log 7.1.2022. Monthly and aggregate information is needed on HARPS subsidies. Monthly HARPS Participant Excel report of number of individuals enrolled, actively receiving supportive housing supportive services, housed and number of individuals achieving 6 months of housing retention. (Retention may consist of moving into different dwellings but continually housed). Payment will be pro-rated for unfilled positions based upon 4 FTE.	Monthly HARPS Participant Excel Log Report submitted to HCA via secure process and approved by the Program Manager	Due by the 15th of each following month	12 months (assuming full staffing and start of services 7/1/2022) @ \$4,610 per HARPS monthly participant Excel log received. per monthly HARPS participant Excel log received	\$55,300
4	Hire an additional CPC with experience in recovery from substance use disorder as a 4th member of the HARPS Team	Submit letter of hire to HCA HARPS Program Manager	Upon hire	\$20,000	\$20,000

5	Provide a Copy of Letter of peer certification by Division of Behavioral Health and Recovery for the newly hired CPC.	Letter of certification confirming individual successfully completed peer certification and testing sent to HCA HARPS Program Manager	Upon hire	\$20,000	\$20,000
6	The additional SUD CPC from the HARPS team will attend a HCA facilitated training event on the SAMHSA model Evidence-Based Practice of Permanent Supportive Housing (EBH PSH)	Sign in sheet verifying program staff attended the HCA facilitated EBP PSH Training Event sent to HCA HARPS Program Manager	By 3/14/2023	1 payment of \$20,000 for EBP PSH Training	\$20,000
7	The additional SUD CPC will complete the four (4) PSH Training Modules on Pathways to Housing website under Peer Training tab and send the certificates of completion to the HCA HARPS Program Manager.	Certificates of Completion sent to HCA HARPS Program Manager from pathwaystohousing.wa.gov	By 3/14/2023	1 payment of 20,000 for completion of 4 modules	\$20,000
8	<p>1. Describe staff development activities for reporting period (including orientation and training). Indicate:</p> <p>2. Any other project activities or events, including meetings with local Continuums of Care, Coordinated Entry Programs, Peer Bridgers, housing, and housing services providers meetings.</p> <p>3. Date(s)/duration of the training or meeting</p> <p>4. Subject of the training or meeting</p> <p>5. Discuss value/impact on the project</p> <p>6. 1 participant success story</p>	<p>Quarter 1 , July-September, report due October 10th</p> <p>Quarter 2, October-December, report due January 10th</p> <p>Quarter 3, January-March, report due April 10th</p> <p>Quarter 4, April-June, report due July 10th</p>	Quarterly report submitted as indicated to the SBH-ASO Housing contact	4 quarterly reports at 13,960 per report	\$55,840

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