**Sierra County**  
**Board of Supervisors’**  
**Agenda Transmittal & Record of Proceedings**  

**MEETING DATE:** June 18, 2019  
**TYPE OF AGENDA ITEM:** ☑ Consent  

**DEPARTMENT:** Behavioral Health  
**APPROVING PARTY:** Lea Salas, Administrative Director  
**PHONE NUMBER:** (530) 993-6746

<table>
<thead>
<tr>
<th><strong>AGENDA ITEM:</strong></th>
<th>Amendment to Professional Services Agreement 2019-031 between Barbara Coffman, MFT and County of Sierra</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SUPPORTIVE DOCUMENTS ATTACHED:</strong></td>
<td>☑ Memo ☑ Resolution ☑ Agreement ☐ Other</td>
</tr>
</tbody>
</table>

**BACKGROUND INFORMATION:**  
Please see attached memo

**FUNDING SOURCE:** 0515670  
**GENERAL FUND IMPACT:** No General Fund Impact  
**OTHER FUND:** 5671  
**AMOUNT:** $29,120.00 Annually

| **ARE ADDITIONAL PERSONNEL REQUIRED?** | ☐ Yes, --  -- | ☑ No |
| **IS THIS ITEM ALLOCATED IN THE BUDGET?** | ☑ Yes ☐ No |
| **IS A BUDGET TRANSFER REQUIRED?** | ☐ Yes ☑ No |

**SPACE BELOW FOR CLERK’S USE**

<table>
<thead>
<tr>
<th><strong>BOARD ACTION:</strong></th>
<th>☐ Approved  ☐ Approved as amended  ☐ Adopted  ☐ Adopted as amended  ☐ Denied  ☐ Other  ☐ No Action Taken</th>
</tr>
</thead>
</table>
| ☐ Set public hearing For: _______________________________ | Resolution 2019- ____________  
 Agreement 2019- ____________  
 Ordinance ____________  
 Vote:  
  Ayes:  
  Noes:  
  Abstain:  
  Absent:  
  ☐ By Consensus |
| ☐ Direction to: _______________________________ | |
| ☐ Referred to: _______________________________ | |
| ☐ Continued to: _______________________________ | |
| ☐ Authorization given to: _______________________________ | |

**COMMENTS:**

| ☐ | ☐ |

**CLERK TO THE BOARD** ___________________________ **DATE** ___________________________
Memorandum

To: Sierra County Board of Supervisors
From: Lea Salas, Administrative Director
Reference: Agenda Item
Date of memo: June 7, 2019
Date of Board Meeting: June 18, 2019

Requested Action: Amendment to Professional Services Agreement 2019-031 between Barbara Coffman, MFT and County of Sierra

Mandated by: what authority?

Funding

<table>
<thead>
<tr>
<th>Budgeted?</th>
<th>Yes X</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue</td>
<td>$29,120.00</td>
<td>MHSA</td>
</tr>
<tr>
<td>Expenses</td>
<td>$29,120.00</td>
<td>MHSA</td>
</tr>
<tr>
<td>Difference</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

Background Information: This amendment increases the hours for this contractor to be available to see clients. This contract will be used as needed to meet the Network Adequacy Certification requirements set forth by state and federal mandates.

Potential Issues to consider: None

Alternatives or Impacts of disapproval: Sierra County would not meet the requirements for Network Adequacy Certification set forth by State and Federal Mandates.
AGREEMENT NO. ____________________  
(Amendment to Agreement No. 2019-031)

AMENDMENT  
TO  
AGREEMENT FOR  
PROFESSIONAL SERVICES

The following is an amendment to that certain Agreement No. 2019-031 (“Agreement”) with an effective date of May 1, 2019, by and between the County of Sierra, a political subdivision of the State of California (“the COUNTY”) and Barbara Coffman, MFT (“the CONTRACTOR”).

1. Attachment B of the Agreement, B.1 shall be amended to read:

B.1 BASE CONTRACT FEE. COUNTY shall pay CONTRACTOR a contract fee of seventy dollars ($70.00) per hour. CONTRACTOR shall provide COUNTY with a maximum not to exceed one hundred forty four (144) hours per contract period for fiscal year (2018/19) and one thousand two hundred seventy two (1272) hours per contract period for fiscal year (2019/20). CONTRACTOR shall submit requests for payment (“Invoice”) on a monthly basis, invoicing for all work completed and delivered to the Auditor. Invoice shall be substantially in the form of the invoice attached hereto as Attachment E. Payment shall be made within sixty (60) days after the invoice is approved by the County Contract Administrator. In no event shall total compensation paid to CONTRACTOR under this Provision B.1 exceed ninety-nine thousand one hundred twenty dollars ($99,120.00) without an amendment to this Agreement approved by the Sierra County Board of Supervisors.

2. Attachment B of the Agreement, B.6 shall be amended to read:

MAXIMUM CONTRACT AMOUNT. The maximum amount payable to CONTRACTOR under this Agreement shall not exceed the following:

<table>
<thead>
<tr>
<th>Provision</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>B.1</td>
<td>Base Contract Fee</td>
<td>$ 99,120.00</td>
</tr>
<tr>
<td>B.2</td>
<td>Mileage</td>
<td>$ N/A</td>
</tr>
<tr>
<td>B.3</td>
<td>Travel Costs</td>
<td>$ N/A</td>
</tr>
<tr>
<td>B.4</td>
<td>Authorization Required</td>
<td>$ -0-</td>
</tr>
<tr>
<td>B.5</td>
<td>Special Circumstances</td>
<td>$ 1,000.00</td>
</tr>
<tr>
<td>TOTAL</td>
<td>MAXIMUM CONTRACT AMOUNT</td>
<td>$ 100,120.00</td>
</tr>
</tbody>
</table>

3. All other terms and conditions of the Agreement are to remain the same.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the date set forth above.
COUNTY OF SIERRA

__________________________________________________________
PAUL ROEN
Chairman, Board of Supervisors

ATTEST:

__________________________________________________________
HEATHER FOSTER
Clerk of the Board

“CONTRACTOR”

__________________________________________________________
BARBARA COFFMAN, MFT

APPROVED AS TO FORM:

__________________________________________________________
DAVID PRENTICE
County Counsel