

**FIRST AMENDMENT TO FEDERAL TITLE III E FAMILY CAREGIVER SERVICES CONTRACT  
BETWEEN NAPA/SOLANO AREA AGENCY ON AGING (PSA 28) AND NORTH COAST  
OPPORTUNITIES, INC.**

This First Amendment is made on March 31, 2020, between the NAPA/SOLANO AREA AGENCY ON AGING (PSA 28) and NORTH COAST OPPORTUNITIES, INC. ("Contractor").

1. Recitals

- A. The parties entered into a contract dated 7/1/2019 (the "Contract"), in which Contractor agreed to provide family caregiver caring for the elderly services.
- B. The County now needs to increase the budget and units of specific services to be performed.
- C. This First Amendment represents an increase of \$42,764 of the Contract.
- D. The parties agree to amend the Contract as set forth below.

2. Agreement

A. Amount of Contract

Section D is deleted in its entirety and replaced with:

Maximum funds available for the following programs:

<b>Approved by Napa/Solano Area Agency on Aging Oversight Board on</b>			
<b>Federal Grantor</b>	U. S. Department of Health and Human Services		
<b>Pass Through Grantor:</b>			
<b>Older American Act Title:</b>	Federal Title III E Family Caregiver		
<b>Service</b>	<b>Agency on Aging Contract No.</b>	<b>Funding Period</b>	<b>Grant Amount</b>
<u>Title III E</u> Caregiver Support, \$127,764: Caregiver Assessment, 95 units, 50 unduplicated clients; Caregiver Support Group, 75 units, 18 unduplicated clients; Caregiver Training, 120 units, 50 unduplicated clients; Caregiver Respite Services, 2,000 units, 60 unduplicated clients.	AP-1920-16	July 1, 2019 – June 30, 2020	\$127,764

B. Scope of Work

- 1. Subsections II(1)(i)-(ii) of Exhibit A (Contractor Requirements – Respite Care) are deleted in their entirety and replaced with:
  - i. Serve not less than 2,000 units of service during the contract period.
  - ii. Serve not less than 60 unduplicated clients during the contract period.

2. Subsections II(2)(i)-(ii) of Exhibit A (Contractor Requirements – Caregiver Assessment) are deleted in their entirety and replaced with:

- i. Conduct not less than 95 units of service during the contract period.
- ii. Track unduplicated client counts by characteristic, ADLs/IADLs. Serve not less than 50 unduplicated number clients.

C. Budget

Exhibits B-1 and B-2 are deleted in their entirety and replaced with the Budget attached to and incorporated by this reference as Exhibit B-1-1 and B-2-1.

3. Effectiveness of Contract

Except as set forth in this First Amendment, all other terms and conditions specified in the Contract remain in full force and effect.

COUNTY OF SOLANO, a Political  
Subdivision of the State of California

NORTH COAST OPPORTUNITIES, INC.

By \_\_\_\_\_  
Birgitta E. Corsello  
County Administrator

By Patty Bruder   
Patty Bruder  
Executive Director

APPROVED AS TO FORM

APPROVED AS TO CONTENT

By Daniel Wolk   
County Counsel

By Gerald Huber   
Gerald R. Huber, Director  
Health and Social Services Department

**Exhibit B-1-1  
Funding Summary**

<b>Contractor:</b>	<b>NCO DBA Redwood Care Givers</b>	<b>Revision #:</b>	<b>0</b>
<b>Funding Title/Description</b>	<b>Service Type</b>	<b>Ct Amt(\$)*</b>	<b>**Service Units</b>
IIIE-Family Caregivers	Support Services	\$54,373	
IIIE-Family Caregivers	Respite Care	\$73,391	
<b>Contract Total</b>	<i>Asterisks (*) in this column denote priority services</i>	<b>\$127,764</b>	

\*Contract Amount (Ct Amt) represents Federal/State/Local funding only – does not include contractor match.

\*\*Consolidated Service Units Entry Optional for Exhibit B - See Exhibit A, Scope of Work, for Service Unit Detail.

<b>Exhibit B-2-1 Budget Detail</b>		
<b>Vendor Budget #:</b>	VB1	
<b>Vendor/Contractor:</b>	NCO DBA Redwood Care Givers	
<b>Funding Title:</b>	IIIE	
<b>Title Description:</b>	Family Caregivers	
<b>Service Type:</b>	Support Services	
<b>BUDGETED COSTS</b>		
<b>Cost Category</b>	<b>Cash/In-Kind</b>	<b>Budgeted Costs Amount (\$)</b>
Personnel	CASH	\$32,211
Volunteers	IN-KIND	\$0
Staff Travel	CASH	\$2,560
Staff Travel	IN-KIND	\$0
Staff Training	CASH	\$5,732
Staff Training	IN-KIND	\$0
Other Costs	CASH	\$26,834
Other Costs	IN-KIND	\$0
Total Direct Costs	CASH	\$67,337
Total Direct Costs	IN-KIND	\$0
Indirect Costs	CASH	\$5,522
Indirect Costs	IN-KIND	\$0
Total Costs - Direct/Indirect	CASH	\$72,859
Total Costs - Direct/Indirect	IN-KIND	\$0
<b>Total Costs Cash and In-Kind</b>	<b>Cash + In-Kind</b>	<b>\$72,859</b>
<b>BUDGETED FUNDING</b>		
<b>Funding Category</b>	<b>Cash/In-Kind</b>	<b>Budgeted Funding Amount</b>
Required Matching Contributions	CASH	\$18,486
Required Matching Contributions	IN-KIND	\$0
Federal Funding	CASH	\$54,373
Total Funding	CASH	\$72,859
Total Funding	IN-KIND	\$0
<b>Total Funding Cash and In-Kind</b>	<b>Cash + In-Kind</b>	<b>\$72,859</b>

<b>Exhibit B-2-1 Budget Detail</b>		
<b>Vendor Budget #:</b>	VB2	
<b>Vendor/Contractor:</b>	NCO DBA Redwood Care Givers	
<b>Funding Title:</b>	IIIE	
<b>Title Description:</b>	Family Caregivers	
<b>Service Type:</b>	Respite Care	
<b>BUDGETED COSTS</b>		
<b>Cost Category</b>	<b>Cash/In-Kind</b>	<b>Budgeted Costs Amount (\$)</b>
Personnel	CASH	\$11,742
Volunteers	IN-KIND	\$0
Staff Travel	CASH	\$500
Staff Travel	IN-KIND	\$0
Other Costs	CASH	\$84,279
Other Costs	IN-KIND	\$0
Total Direct Costs	CASH	\$96,521
Total Direct Costs	IN-KIND	\$0
Indirect Costs	CASH	\$1,825
Indirect Costs	IN-KIND	\$0
Total Costs - Direct/Indirect	CASH	\$98,346
Total Costs - Direct/Indirect	IN-KIND	\$0
<b>Total Costs Cash and In-Kind</b>	<b>Cash + In-Kind</b>	<b>\$98,346</b>
<b>BUDGETED FUNDING</b>		
<b>Funding Category</b>	<b>Cash/In-Kind</b>	<b>Budgeted Funding Amount</b>
Required Matching Contributions	CASH	\$24,955
Required Matching Contributions	IN-KIND	\$0
Federal Funding	CASH	\$73,391
Total Funding	CASH	\$98,346
Total Funding	IN-KIND	\$0
<b>Total Funding Cash and In-Kind</b>	<b>Cash + In-Kind</b>	<b>\$98,346</b>