



# INTERLOCAL AGREEMENT

## MENTAL HEALTH BLOCK GRANT (MHBG)

GCBH Agreement Number  
**KITTITAS-MHBG-06/07-03**

New Agreement  
 Amendment No. **03**

This Agreement is made and entered into by, and between Greater Columbia Behavioral Health, hereinafter referred to as "GCBH" and the Member Government/Agency identified below, hereinafter referred to as the "Contractor."

RSN/PHP NAME Greater Columbia Behavioral Health		
RSN/PHP ADDRESS 101 N. Edison Street Kennewick, WA 99336		RSN/PHP CONTACT NAME Mary Todd
RSN/PHP CONTACT TELEPHONE (509) 735-8681/1-800-795-9296	RSN/PHP CONTACT FAX (509) 783-4165	RSN/PHP CONTACT E-MAIL <a href="mailto:maryt@gcbh.org">maryt@gcbh.org</a>

CONTRACTOR NAME Kittitas County	
CONTRACTOR CONTACT NAME Rick Weaver, President / CEO	CONTRACTOR CONTACT ADDRESS Central Washington Comprehensive Mental Health 402 S 4 <sup>th</sup> Ave Yakima, WA 98902

CONTRACTOR CONTACT TELEPHONE (509) 574-4024	CONTRACTOR CONTACT FAX (509) 575-4811	CONTRACTOR CONTACT E-MAIL <a href="mailto:rweaver@cwcmh.org">rweaver@cwcmh.org</a>
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IS THE CONTRACTOR A SUBRECIPIENT FOR PURPOSES OF THIS AGREEMENT? <p style="text-align: center;">Yes</p>	CFDA NUMBERS (Federal Block Grant) 93.958
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AMENDMENT START DATE	END DATE	FUNDING	TOTAL CONTRACT
April 01, 2007	September 30, 2007	Mental Health Block Grant: 10/01/06 - 09/30/07	27,024

**COMPLETE THIS SECTION BELOW ONLY IF THIS IS AN AMENDMENT ADDING OR SUBTRACTING FUNDING.**

PRIOR FUNDING	AMOUNT OF INCREASE OR DECREASE	TOTAL FUNDING
\$		\$

ATTACHMENTS: When the box(s) below are marked with a check ( ✓ ) or an X, the following exhibits are attached to and incorporated into this Agreement by reference:

By their signatures on the attached signature page, the parties agree to the terms and conditions of this Agreement and all documents attached or incorporated by reference.

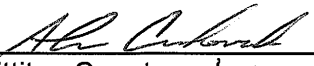
**IN WITNESS WHEREOF, the parties below have executed this Agreement:**

**GREATER COLUMBIA BEHAVIORAL HEALTH**

  
\_\_\_\_\_  
Chair, GCBH Board of Directors

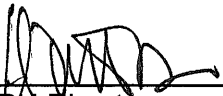
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**CONTRACTOR**

  
\_\_\_\_\_  
Kittitas County 4-17-07


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**Approved as to Content:**

  
\_\_\_\_\_  
GCBH Director

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**Approved as to Form:**

  
\_\_\_\_\_  
GCBH Legal Counsel

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**Content and Form Prepared By:**

  
\_\_\_\_\_  
GCBH Contracts Coordinator

This Contract between the Greater Columbia Behavioral Health (GCBH) and the Contractor is hereby amended as follows:

1. Replace Section 5, MHBG Service Table, by replacing Kittitas County's plan to read as follows:

MHBG Service Table- <u>GCRSN</u>					
Criterion	Goal	Definitions	Funding	Activity	Expected Outcomes
<b>Kittitas County</b>					
1	7	<p><u>Criterion 1:</u> Comprehensive Community-Based Mental Health Plan</p> <p><u>Goal 7:</u> Increase the number consumers who are engaged in employment activities or attending school</p>	<b>\$4,625</b>	<p><u>Peer Counselor:</u></p> <p>CWCMH will employ one (1) Peer Counselor in Kittitas County for provision of Peer Counseling services.</p>	<p>Estimated hourly wage: <u>8.71</u></p> <p>Estimated total number of service hours provided in contract period: <u>300</u></p>
Reasonableness of Cost: A. Hourly rate is calculated to be <u>\$8.71</u> , which is considered w/in market range.					
1	2	<p><u>Criterion 1:</u> Comprehensive Community-Based Mental Health Plan</p> <p><u>Goal 2:</u> Decrease percentage of persons who are re-admitted to inpatient setting within 30 days of discharge</p>	<b>\$6,473</b>	<p><u>Medication Management/Stabilization:</u></p> <p>Provide medication Management/monitoring medication, and/or Case Management services to non-Medicaid adults at risk for frequent hospitalizations.</p> <p>Provide stabilization services (i.e. short term face to face assistance with life skills training, and understanding of medication effects, and/or room and board) to non-Medicaid adults at risk for frequent hospitalizations</p>	<p>Estimated total number of service hours provided in contract period: <u>76.25</u></p>

Reasonableness of Cost: A. Hourly rate is calculated to be <u>\$85.00</u> , which is considered w/in market range.					
5	3	<u>Criterion 5:</u> Management Systems  <u>Goal 3:</u> Facilitate growth of Recovery-Oriented Service System	<b>\$5,213</b>	<u>Recovery and Resiliency Training:</u>  Funding for provision of recovery and resiliency training in Kittitas County.	Number of staff trained: <u>20</u>  Number of consumers trained: <u>25</u>  Number of family members trained: <u>15</u>
Reasonableness of Cost: E. Other: This is the estimated cost for training.					
1	9	<u>Criterion 1:</u> Comprehensive Community-Based Mental Health Plan  <u>Goal 9:</u> Increase the number of social and natural supports reported by consumers	<b>\$4,213</b>	<u>Consumer Advocacy:</u>  Funding for provision of education and advocacy services to consumers in Kittitas County by a consumer advocate.	Estimated number of consumers and their families served in contract period: <u>10</u>
Reasonableness of Cost: E. Other: It is estimated that the consumer advocate will spend 11% of her time providing advocacy and education to consumers and their families.					
1	10	<u>Criterion 1:</u> Comprehensive Community-Based Mental Health Plan  <u>Goal 10:</u> Increase Family stabilization and living conditions	<b>\$6,500</b>	<u>NAMI Education:</u>  Support NAMI activities through funding to develop training and support for consumers and their families.	Estimated number of trainings to be provided in contract period: <u>6</u>
Reasonableness of Cost: E. Other: Costs for NAMI members to attend state wide trainings will be reimbursed with receipts. Additional funds will be used to support education materials for the Kittitas NAMI organization.					
<b>Total to Kittitas</b>			<b>\$27,024</b>		

**All other terms and conditions of this Contract remain in full force and effect.**