

**SUBAWARD AGREEMENT AMENDED COVERSHEET
 MENTAL HEALTH SERVICES PROJECT – BALDWIN**

Entity Name AltaPointe Health Systems, Inc.		Unique Entity Identifier XK7QGLWMWGF6	Project Number for This Agreement 01003-112-230117-0026
Entity Address Street Address: 5750 A Southland Drive, Mobile AL 36693 Mailing Address: 5750 A Southland Drive, Mobile AL 36693		Entity Point of Contact Krista Thronson and Megan Griggs	Point of Contact Email Address kthronson@altapointe.org mgriggs@altapointe.org
County Federal Award Identification Number (FAIN) SLFRP1235	Federal Award Date May 20, 2021	Period of Performance Start and End Date 04/04/2023 - 02/28/2026	Initial Budget Period Start and End Date 04/04/2023 - 09/30/23
Value of Federal Funds Obligated to the agency by this agreement \$695,346	Total Amount of Federal Funds Obligated to the Entity \$15,779,327.16	Total Amount of the Federal Award Committed to the entity by the County Up to \$695,346	
Federal Award Project Description: This project is to be carried out by the Subrecipient on behalf of the County to provide outpatient mental health services and support to citizens and residents of the County, and to provide mental health and other support services for individuals who are experiencing homelessness within the County.		Place of Performance Address Street Address: 5750 A Southland Drive, Mobile AL 36693	
Federal Awarding Agency: DEPARTMENT OF THE TREASURY	Pass-Through Entity: Baldwin County, AL	Awarding Official Name and Contact Information: Billie Jo Underwood, Chair Baldwin County Commission	
Assistance Listing CFDA Number and Name 21.027 - Coronavirus State and Local Fiscal Recovery Funds			Identification of Whether the Award is for Research and Development No
Indirect Cost Rate for the Federal Award Uniform Guidance de minimis rate of 10% of modified total direct costs	Award Payment Method DIRECT DISTRIBUTION	What is the entity's status? SUBRECIPIENT	Type of Contract GRANT: REIMBURSEABLE

**AMENDED SUBAWARD AGREEMENT
BETWEEN
BALDWIN COUNTY, ALABAMA
AND
ALTAPOINTE HEALTH SYSTEMS, INC.
FOR**

**American Rescue Plan Act Subrecipient Grant Funding
to Support the Delivery of Mental Health Services and Services for Individuals Experiencing
Homelessness**

THIS AMENDED AGREEMENT ("Amendment") entered this 15th day of October 2024, is by and between Baldwin County, Alabama (the "County") and the AltaPointe Health Systems (the "Subrecipient"), a public non-profit corporation duly formed pursuant to Chapter 51 of Title 22, Code of Alabama 1975, (collectively, the "Parties").

WHEREAS, the County has received a Coronavirus State and Local Fiscal Recovery Fund ("SLFRF") award under the American Rescue Plan Act ("ARPA funds") from the U.S. Department of the Treasury ("Treasury"); and

WHEREAS, the Parties have entered into a subrecipient agreement dated April 4, 2023, ("Agreement") to engage the Subrecipient to assist the County in carrying out an ARPA funded project on its behalf via a subaward of a portion of its ARPA funds, and in particular a project to provide outpatient mental health services and support to citizens and residents of the County, and to provide mental health and other support services for individuals within the County who are experiencing homelessness (the "project"); and

WHEREAS, the period of performance of the Agreement is set to terminate on December 31, 2024; and

WHEREAS, due to a delay in achieving full staffing for the Project, the Subrecipient has requested additional time to expend all of the funds obligated in the Agreement and to purchase additional supplies for use in furtherance of the project using cost savings realized; and

WHEREAS, the County is amenable to the request made by the Subrecipient.

NOW, THEREFORE, it is agreed by the Parties to amend the Agreement as follows:

Section I.C., Levels of Accomplishment – Scope of Work and Performance Measures, shall be amended to add the following sentence:

Effective October 1, 2024, the Scope of Work shall be reflected as provided in Attachment B-1, which is hereby adopted and incorporated as if set forth herein.

Section I.D, Period of Performance and Budget Period, is to be amended to reflect the following:

D. Period of Performance and Budget Period

1. The period of performance for this Agreement shall begin on the date of the execution of this Agreement by both parties, and is expected to end on or before February 28, 2026. The terms of this Agreement and the provisions herein shall be extended to cover any additional time period during which the Subrecipient remains responsible for carrying out the approved activities; provided, however, that the period of performance for all activities related to this subaward must conform with the period of performance for the County's ARPA SLFRF award, as outlined by Treasury including, but not limited to:
 - a. All funds obligated by December 31, 2024;
 - b. All funds spent by December 31, 2026;
 - c. Project costs incurred prior to March 3, 2021, are ineligible;
 - d. For projects started prior to March 3, 2021, project costs are eligible if costs were incurred after March 3, 2021.

2. The County budget periods associated with this project are:
 - a. April 4, 2023, through September 30, 2023;
 - b. October 1, 2023, through September 30, 2024;
 - c. October 1, 2024, through September 30, 2025;
 - d. October 1, 2025, through February 28, 2026.

Section IX, ADMINISTRATIVE REQUIREMENTS, shall be amended to add the following section:

C. Procurement

Subrecipient is responsible for compliance with any and all required procurement requirements for the purchase of any goods or supplies for this project consistent with Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, codified as 2 C.F.R. §§ 200.318 through 200.324.

All other terms and conditions shall remain in full force and effect.

Project No.: 01003-112-230117-0026
Subaward No.: ARPA-0013

ALN: 21.027
County FAIN No.: SLFRP1794

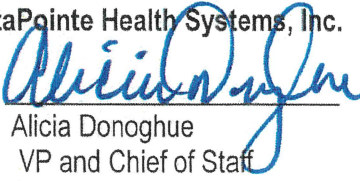
IN WITNESS WHEREOF, the County and Subrecipient have indicated their acceptance of the terms of this Amendment by their signatures below on the dates indicated.

Baldwin County, Alabama

By: _____
Billie Jo Underwood
Chair, Baldwin County Commission

Date: _____

AltaPointe Health Systems, Inc.

By: 
Alicia Donoghue
VP and Chief of Staff

Date: _____

Attest: _____
Roger Rendleman, County Administrator

ATTACHMENT B-1: SCOPE OF WORK

I. Subrecipient Point of Contact and Key Personnel

A. Point of Contact:

Megan Griggs, mgriggs@altapointe.org, 251-662-7304
Krista Thronson, kthronson@altapointe.org, 251-929-5453

B. Key Personnel

Krista Thronson - Probate Court Liaison and Program Coordinator
Michael Braddock - Assisted Outpatient Treatment Case Manager
Dailey Mason - Assisted Outpatient Treatment Therapist
Alyssa Boyd - Assisted Outpatient Treatment RN
Three additional case manager/therapist/nursing positions to fill the vacancies from the original Assisted Outpatient Treatment Team.

II. Project Description and Scope

The project to be funded through this Agreement consists of rebuilding the capacity of the Subrecipient's Assisted Outpatient Treatment Team ("AOTT") and expanding the services provided by the for Subrecipient to assist individuals experiencing a mental health crisis and stand up a mental health outreach services program for individuals in the County who are living with a serious mental illness while unsheltered, as well as support for law enforcement personnel. The scope of services to be provided in conjunction with each component of the project are set forth in more detail below, along with goals and deliverables for each component.

A. Rebuilding the Capacity of the Subrecipient's Assisted Outpatient Treatment Team

1. Scope of Services

The scope of services to be provided with funds available through this Agreement include the hiring of qualified staff to replace vacant positions on the Recipient's AOTT that have not been filled since the end funding previously available through a grant from the Substance Abuse and Mental Health Services Administration ("SAMHSA").

The purpose of the AOTT is to provide structural and support services for individuals that have been committed to outpatient mental health treatment by the probate court via a civil commitment process (hereafter, "program participants"). Individuals committed to this kind of outpatient treatment typically have a history of multiple hospitalizations, frequent encounters with law enforcement and arrests, frequent emergency room visits for psychiatric or substance use disorder reasons, a history of non-compliance with traditional mental health treatment, difficulty maintaining physical health, strained family relationships, and deficits in basic living skills and other social determinants of health. From 2016 to 2020, when fully staffed the AOTT program was successful in significantly reducing hospitalizations, reducing arrests, connecting people to treatment, and

providing the support they needed to become more independent and engaged in their own recovery.

ARPA funding will be used to build the AOTT out to this same staffing capacity so that it is able once again to provide extended hours and weekend coverage to ensure the ready availability services to program participants. It is anticipated that funding available through this Agreement will allow the delivery of services provided through the AOTT during extended hours to approximately 55 individuals annually.

2. *Goals and Deliverables for Rebuilding AOTT Staffing Capacity*

The goals for this portion of the project are as follows:

- To reduce the incidence and duration of psychiatric hospitalizations for program participants by 60% and to reduce non-emergent emergency room visits by 85% over the period of performance of the Agreement.
- To reduce the interactions by program participants with the criminal justice system and maintain treatment in the least restrictive environment by reducing participant contact with law enforcement by 70%, reducing the number of days spent in jail by program participants by 60% and reduce the number of use-of-force incidents by law enforcement with these individuals by 70%.
- To increase consistent participant compliance with outpatient treatment to 90% while in program and 75-80% for the following twelve (12) months through access to services such as supportive employment, educational opportunities, and supported housing.

B. *Expanding Crisis Response Services*

1. *Scope of Services*

ARPA funds provided pursuant to this Agreement will be used to expand crisis response service currently for individuals – whether committed to outpatient mental health care treatment or not – who are experiencing a mental health crisis. Funding will enable the Subrecipient to stand up a dedicated crisis response team whose case managers, therapists, or nurses will respond to the location of an individual in crisis within the County. Currently, individuals needing access to these services in a crisis situation must instead be transported to an outpatient clinic or to Mobile to access the Behavioral Health Crisis Center located there.

ARPA funds provided pursuant to this Agreement will be used to purchase iPads preloaded with MyCare software, which is to be provided to law enforcement officers in the County. This technology will allow for immediate crisis intervention resources for law enforcement in handling calls for individuals in the community in crisis. This software also provides for the immediate availability of free, confidential mental health assistance to law enforcement officers in need of such assistance.

It is anticipated that the crisis services facilitated with ARPA funding available through this Agreement will provide services to 500 individuals on an annual basis, to include providing in person, telehealth, and telephone crisis response and follow up, as well as supporting law

enforcement when responding to situations involving individuals experiencing a mental health crisis.

2. *Crisis Response Goals and Deliverables*

The goals for this program are as follows:

- To connect 100% of individuals in crisis with assistance within 60 minutes or less, including and evaluation of risk for harm to self or others in order to triage the person to the most appropriate services given their individual needs.
- To connect 100% of individuals to the most appropriate long-term services or resources to prevent future crises.
- To provide law enforcement with access to a clinician for individuals in crisis and reduce the number of arrests of individuals with mental illness for nonviolent, nonsexual, petty crimes by 50% by diverting them to the appropriate mental health and substance use services.
- To provide law enforcement with access to a clinician to reduce instances of self-harm or suicide for law enforcement personnel.

C. *Expanding Services to Include Homeless Mental Health Outreach Services*

1. *Scope of Services*

Based on current data for Baldwin county, on an annual basis approximately forty (40) individuals are living with a serious mental illness while unsheltered for periods of time ranging from one (1) day to up to one (1) year. Services made possible as a result of funding through this Agreement will be modeled on the Projects for Assistance in Transition from Homelessness (PATH) program designed by SAMHSA. The PATH model focuses on helping individuals through outreach, screening and diagnostic treatment, habilitation and rehabilitation, community mental health, substance use disorder treatment, referrals for primary healthcare, job training, educational services, and housing. Case managers will work with individuals to engage affected individuals in treatment. Services will also include providing assistance in accessing services for coordinated transition from homelessness to being housed and for finding a shelter.

Homeless Mental Health Outreach Services Goals and Deliverables

The goals for this program are as follows:

- To locate individuals with mental illness who are living unsheltered in Baldwin county and assist 100% of participants with access to mental health and substance use disorder services.
- To assist all unsheltered individuals with access to shelters or housing, including completion of coordinated entry applications.
- To provide management and follow up services to 100% of enrolled individuals over the course of the year, including assistance with transportation to mental health and health care appointments, linkage to resources and supports, and basic living skills education.

III. *Project implementation Estimated Timeline*

The implementation of the full-scale operation of the project as described in the scope of services for each of its components will be contingent upon hiring additional staff to provide these expanded services.

Rebuilding AOTT Capacity: It is expected that the recruiting, hiring, and training process for the staff needed to rebuild the capacity of the AOTT will take approximately three months from the date of the execution of this Agreement.

Crisis Response Services: Based on the estimated time needed to recruit, hire and train qualified staff, it is expected that the crisis response component of the project will be partially functional within three (3) months and fully functional within six (6) months of the date of the execution of this Agreement. The provision of IPads to law enforcement personnel is expected to be provided within six (6) months of the date of execution of the Amendment.

The PATH program: Based on the estimated time need to recruit, hire and train qualified staff, it is expected that the PATH program component of the project will be operational within three (3) months of the date of execution of this Agreement.

IV. Reporting

Reporting for each component of the project will be compiled and submitted quarterly in a digital format within five (5) working days of the close of the calendar quarter. For each component of the project reported data will include activities :

- The number of individuals enrolled/served by each project component (individuals served by services provided through multiple components of the project should only be accounted for once in reporting);
- The number of calls/requests for service, and the source of the calls/requests, and the response time for each call/request;
- Service outcomes, to include data evidencing linkage to treatment, frequency of hospitalizations, duration of any hospitalizations, diversions from arrests, diversions from law enforcement interaction, diversions from emergency departments, the number of individuals housed, and other relevant outcome measures.
- The number of fully staffed extended hours of AOTT services made available with funding provided pursuant to this Agreement.

Reporting data will be maintained on a daily basis and can be requested at any time. Personally identifiable information will be redacted prior to the release of such data.