

DESCHUTES COUNTY DOCUMENT SUMMARY

(NOTE: This form is required to be submitted with ALL contracts and other agreements, regardless of whether the document is to be on a Board agenda or can be signed by the County Administrator or Department Director. If the document is to be on a Board agenda, the Agenda Request Form is also required. If this form is not included with the document, the document will be returned to the Department. Please submit documents to the Board Secretary for tracking purposes, and not directly to Legal Counsel, the County Administrator or the Commissioners. In addition to submitting this form with your documents, please submit this form electronically to the Board Secretary.)

Please complete all sections **above** the Official Review line.

Date: January 24, 2022

Department: Health Services, Behavioral Health

Contractor/Supplier/Consultant Name: Telecare Mental Health Services of Oregon, Inc.

Contractor Contact: Daniel Beckerman **Contractor Phone #:** 510-337-7950

Type of Document: Personal Services Contract

Goods and/or Services: Telecare Mental Health Services of Oregon, Inc. provides 24-hour secure residential treatment facilities for individuals with mental or emotional disorders who have been hospitalized and need services to avoid further hospitalization because they are a danger to themselves or others.

Background & History: Telecare provides 24-hour Secure Residential Treatment Facility services for up to sixteen (16) residents that have been jointly approved by County and Telecare. The purpose of secured residential treatment services is to stabilize resident’s psychiatric symptoms, improve independent living skills, and then discharge the resident into an appropriate and safe level of community services of less intensity as clinically appropriate.

Telecare will receive up to a total maximum amount for any allowable expenses allocated by the Oregon Health Authority (OHA). Funds allocated to County by OHA will be paid to Telecare in accordance with a budget approved by OHA.

Agreement Starting Date: January 1, 2022 **Ending Date:** December 31, 2022

Annual Value or Total Payment: Maximum compensation is \$235,000.

Insurance Certificate Received (check box)
Insurance Expiration Date: July 1, 2022

Check all that apply:

- RFP, Solicitation or Bid Process
- Informal quotes (<\$150K)
- Exempt from RFP, Solicitation or Bid Process (specify – see DCC §2.37) DCC 2.37.050, Paragraph M; 2.37.070, Paragraph B 14

Funding Source: Oregon Health Authority

Pass Through Project Codes: 50/50 Split – HSADLTINT-HS23010G; HSADLTINT-HS2280G

Included in current budget? Yes No
If **No**, has budget amendment been submitted? Yes No

Is this a Grant Agreement providing revenue to the County? Yes No

Special conditions attached to this grant:

Deadlines for reporting to the grantor:

If a new FTE will be hired with grant funds, confirm that Personnel has been notified that it is a grant-funded position so that this will be noted in the offer letter: Yes No

Contact information for the person responsible for grant compliance: Name:
Phone #:

Departmental Contact and Title:
Phone #:

Deputy Director Approval:

Department Director Approval:

Signature: Janice Garceau
Janice Garceau (Feb 1, 2022 09:04 PST)
Email: janice.garceau@deschutes.org
Title: Behavioral Health Director
Company: Deschutes County Health Services

Signature: Erik Kropp
Erik Kropp (Feb 2, 2022 09:38 PST)
Email: erik.kropp@deschutes.org
Title: Interim Health Services Director
Company: Deschutes County

Distribution of Document: Grace Justice Evans, Health Services Department.

Official Review:

County Signature Required (check one): BOCC Department Director (if <\$50K)
 Administrator (if >\$50K but <\$150K; if >\$150K, BOCC Order No. _____)

Legal Review _____ Date _____

Document Number 2022-017