

**FIRST AMENDMENT TO AND ASSIGNMENT OF GRANT AGREEMENT WITH
NEVADA CLINICAL SERVICES, INC.**

This First Amendment to and Assignment of the Grant Agreement and Notice of Grant Award (“First Amendment and Assignment”) is entered into effective March 1, 2022 (the “Effective Date”) by and among Nevada Clinical Services, Inc. (“NCS”), the Washoe County Human Services Agency (“Assignor”), and the Washoe County Sheriff’s Office (“Assignee”).

RECITALS

WHEREAS, NCS and Assignor entered into the Grant Agreement and Notice of Grant Award effective July 1, 2021, also referenced as NCS Contract Number 206454 (“Grant”), to provide mobile outreach safety team services (“Services”);

WHEREAS, Assignor wishes to assign the Grant to Assignee and Assignee wishes to accept the assignment of the Grant as of the Effective Date of this First Amendment and Assignment;

WHEREAS, NCS wishes to consent to the assignment of the Grant from Assignor to Assignee; and

WHEREAS, NCS and Assignee desire to amend the Grant to incorporate an amended and restated scope of work effective as of the Effective Date;

NOW, THEREFORE, for and in consideration of the promises and the mutual covenants herein contained, the receipt and adequacy of which are for all purposes acknowledged and confessed herein, the Parties hereby agree as follows:

- I. Assignment. Assignor hereby assigns, grants, and conveys, without limitation, to Assignee all of Assignor’s right, title and interest in and to the Grant as of the Effective Date of this First Amendment and Assignment.
- II. Assumption. Commencing as of the Effective Date, Assignee hereby assumes and agrees to perform and keep all promises, covenants, conditions, obligations, and agreements of Assignor under the Grant.
- III. Consent to Assignment; Release of Assignor. NCS hereby consents to the assignment of the Grant by Assignor to Assignee and releases Assignor as a party to the Grant.
- IV. Section B – Description of Services, Scope of Work, and Deliverables shall be replaced in its entirety with the amended and restated Section B, appended hereto.
- V. Except as amended herein, all other terms and conditions of the Grant shall remain in full force and effect subject to the terms of the Grant.
- VI. This First Amendment and Assignment may be executed in one or more counterparts, and each of them shall be deemed to be one and the same instrument upon execution of all counterparts.

Signature page follows.

IN WITNESS WHEREOF, the Parties hereto have caused this First Amendment and Assignment to be signed and intend to be legally bound thereby as of the Effective Date.

NCS

Authorized Signature

Print Name

Title

Date

ASSIGNOR

Washoe County Human Services Agency

Authorized Signature

Print Name

Title

Date

ASSIGNEE

Washoe County Sheriff's Office

Authorized Signature

Print Name

Title

Date

SECTION B

Description of Services, Scope of Work and Deliverables

This project was developed to create an intervention team to work with law enforcement professionals and operated at a local level. The Washoe County Mobile Outreach Safety Team (MOST) was created, and this scope of work represents the goals and objectives of this team. MOST provides crisis intervention and stabilization to those impacted individuals in Washoe County with a mental health condition included a Severe Mental Illness (SMI), substance use disorder (SUD) and/or who are in behavioral health crisis.

Individuals may have been in crisis and/or require immediate intervention and evaluation by clinically trained professionals in collaboration with law enforcement. This program includes outreach, field crisis interventions and coordinates assessments, referrals and connection with local providers as indicated by assessment at the time of crisis intervention. While there are times when intervention and stabilization may occur at other facilities (such as a crisis call center), the goal of this team is to respond to the most significant and serious situations, generally with law enforcement, requiring a higher level of behavioral health expertise anywhere in the targeted community. Referrals and well checks are also included in services.

MOST clinicians are Mental Health Counselors IIs as described by Washoe County Job Classification 600006153, requiring "A master's degree from an accredited college or university in social work, marriage and family therapy, counseling, psychology or closely related field AND licensure in the State of Nevada to practice as a Licensed Clinical Social Worker, a Marriage and Family Therapist or a Clinical Professional Counselor". Team members are supervised currently by a Mental Health Counselor Supervisor (1), as described by Washoe County Job Classification 600006154, requiring " a master's degree from accredited college or university in social work, marriage and family therapy, counseling, psychology or closely related field AND licensure in the State of Nevada to practice as a Licensed Clinical Social Worker, a Marriage and Family Therapist or a Clinical Professional Counselor AND three years of full-time experience performing clinical case work". There is currently one Case Worker III, as described in Washoe County Job Classification 60006143, requiring "A bachelor's degree from an accredited college or university in social work, criminal justice, psychology, sociology, or a closely related field AND two years of professional level experience providing casework/ counseling or placement services, or working with individuals or families in a community-based, case management role; OR license to practice Social Work in the State of Nevada or eligibility for licensure in the State of Nevada AND two years of full-time experience performing professional social work. A master's degree in social work may substitute for one year of experience."

This scope of work does not prohibit the addition of mental health counselors or case workers to the team, should need be demonstrated and funds be made available. This scope may also be revised, with consultation and coordination between all parties.

MOST services offering community-based intervention to individuals in need wherever they are; including at home, work, or anywhere else in the community where the person is experiencing a mental health crisis. For safety and optimal engagement, teams should be put in place to support emergency department and justice system diversion. Emergency medical services (EMS) should be aware and partner with the MOST team as warranted.

Minimum Expectations to Operate a Mobile Crisis Team services must at a minimum:

1. Include a licensed and/or credentialed clinician capable to assessing the needs of individuals within the region of operation;
2. Respond where the person is (home, work, park, etc.); and

3. Connect individuals to facility-based care as needed through warm hand-offs and coordinating transportation when and only if situations warrant.

Problem Statement: In Washoe County, there exists a population that suffers with behavioral health issues which encompasses mental health and substance use disorder and substance abuse. This population is often involved with law enforcement and ultimately and inappropriately sent to jail, emergency rooms and/or mental health facilities. Law Enforcement, partnered with a team of clinicians can help to reduce repetitive calls from these individuals which include those with serious mental illness (SMI) and, mitigate unnecessary and inappropriate placement through intervention and referral/outreach activities

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Goal 1: To divert individuals experiencing behavioral health issues and other crises from unnecessary admissions into the criminal justice system, emergency rooms, and inpatient psychiatric facilities.

Outcome Objective 1a: Increase the percentage of individuals who have received MOST intervention services in Washoe County that are diverted from unnecessary admissions into the criminal justice system, emergency rooms, and inpatient psychiatric facilities from 53 % in fiscal year 2021 to at least 75% by June 30, 2023.

Activities including Evidence-based Programs	Date due by	Documentation
1. MOST mental health counselors will partner with law enforcement officers, in response to a call or referral in Washoe County. MOST mental health counselors may ride with at least one law enforcement officer for multiple shifts according to law enforcement schedules and protocol.	Monthly	Logs of ride-a-longs, Number of calls responded to and demographic and disposition data of each call.
2. MOST mental health counselors and/or MOST case manager(s) will attempt to make contact with individuals in response to law enforcement and community calls or referrals per agency and law enforcement policy and procedures in Washoe County.	Monthly	Number of individuals in which contact was made each month. List of individuals contacted to include at a minimum first name, last name, and date of birth when the information is available.
1. De-Escalation and Resolution: The MOST team will provide de-escalation and resolution services in response to calls or referrals as well as when participating with Crisis Intervention Negotiation Teams.	Monthly	Number and percent of individuals during each month who have been diverted from unnecessary admissions into the criminal justice system, emergency rooms, and psychiatric facilities.
2. MOST teams will refer contacted clients to local services such as VA, shelters, and other community resources as needed.		Call dispositions
3. MOST teams will transport clients as necessary out of the area of crisis or to local services.		Call dispositions

4. Field Assessment: A field assessment tool and implementation schedule will be created in collaboration with State staff and implemented when agreed upon.	12/31/2021	Developed assessment tool.
Outcome Objective 1b: By June 30, 2023, at least 80% percent of the individuals experiencing behavioral health crises, identified through law enforcement/dispatch/referrals will receive care coordination and outreach services.		
Activities including Evidence-based Programs	Date due by	Documentation
1. The MOST will link individuals in crisis to all necessary medical and behavioral health services that can help resolve the situation and prevent future crises. These services may include crisis stabilization or acute inpatient hospitalization and treatment in the community (e.g., community mental health clinics, in-home therapy, family support services, crisis respite services, and therapeutic mentoring)	Monthly	Documented dispositions
2. Crisis Planning and Follow-Up MOST team will engage the individual in a crisis planning process, resulting in the creation or update of a range of planning tools including a safety plan.	Reviewed at least quarterly	Developed safety plans and other tools
3. MOST staff will offer outreach and referral services to individuals with behavioral health needs	Monthly	- Number of individuals who were referred to behavioral health programs and other community-based services and supports. - Number and percent of individuals with behavioral health needs who received outreach services/referrals.
Evaluation: Using collected data in Avatar, compare the ending numbers and percentages with those reported on June 30, 2021. This goal will be monitor with quarterly reports in the interim.		

Goal 2: To provide community outreach activities to inform potential partner referral agencies, behavioral health providers, and social service providers about MOST and to encourage collaboration between MOST and the partners.		
Outcome Objective 2a: By June 30, 2023 increase the number of agencies referring to MOST by at least 25% from a baseline to be collected between July 1, 2021 to June 30, 2022.		
Activities including Evidence-based Programs	Date due by	Documentation
1. The number of community agencies who make referrals to MOST will be collected between July 1, 2021 and June 30, 2022. *Transition to WCSO occurred on January 5 th and baseline will reflect covering a new jurisdiction in Washoe County area compared to previous of Reno/Sparks jurisdictions.	June 30, 2022	List of agencies who have made at least one referral within the fiscal year.
2. MOST will provide information and marketing materials at a minimum of three community events, facilitating more understanding of the MOST program by referral agencies, behavioral health providers and social service providers within Washoe County.	Yearly	• Date, title, location, and target audience of the community event • Information and marketing materials provided. • Number of follow up contacts with partners. • Media copy; agendas; promotional documents •
3. MOST will provide information to at least 15 community partners. This could include participation in community town hall events.	Yearly	Presentation logs, meeting minutes when available, copy of distributed materials.
4. Utilize Open Beds in order to receive referrals	By 12/31/21	Documented Open Bed Referrals
Evaluation: The number of agencies making referrals to the MOST program will be tracked. The total number of agencies making referrals between July 1, 2021 and June 30, 2023 will be compared to the baseline collected in the previous fiscal year.		

Goal 3: To ensure MOST members receive relevant and appropriate training in order to effectively provide services for the target population.

Outcome Objective 3a: By June 30, 2023, all of the MOST mental health counselors will receive continued training on evidence-based practices or best practices related to crisis intervention. Training topics may include any of the following: crisis intervention strategies and techniques, trauma-informed responses; motivational interviewing; de-escalation techniques; coping skills; psychotropic medications to treat mental health disorders; pharmacotherapeutic agents to treat substance use disorders; short-term interventions for individuals with mental health disorders; short-term interventions for individuals with substance-related disorders, and related clinical intervention techniques.

Activities including Evidence-based Programs	Date due by	Documentation
1. MOST management and staff will research evidence-based practices and/or best practices in delivering crisis intervention services and find appropriate training opportunities.	Ongoing	List of evidence-based practices and trainings
2. MOST members will be trained by in-service or professional trainers. The trainings will be in-person or by webinar or other on-line sources and may be in-state or out-of-state.	Ongoing	- Total number and percentage of individuals trained will be tracked in the standardized database. - Training attendance logs/records
3. The MOST program will assist Law Enforcement in identifying current best practices for crisis intervention as requested by law enforcement agencies and/or as identified by MOST staff.	Ongoing	Participate in Crisis Intervention Trainings (CIT) and other identified trainings as appropriate.

Evaluation: Quarterly Reports

Evaluation Plan: By December 31, 2022, an evaluation plan will be developed in collaboration with state staff to meet the needs of both Washoe County and the State. The plan will detail standard data collection as applicable, how the listed goals and objectives will be measured, and how the goals and objectives in this scope of work will be integrated into the larger state-wide efforts to report on crisis intervention modalities and programs.