

Modification A to Contract #21-124

This contract modification is between RACINE COUNTY HUMAN SERVICES DEPARTMENT whose business address is 1717 Taylor Avenue, Racine, Wisconsin 53403 and Provider The Oconomowoc Developmental Training Center of WI LLC, d/b/a Genesee Lake School, whose principal business address is 36100 Genesee Lake Road, Oconomowoc, Wisconsin 53066.

The modification to this agreement will be in effect from May 1, 2021 to December 31, 2021. The Provider agrees to abide by all of the terms of the original agreement dated January 1, 2021 through December 31, 2021 with addition of the following:

**The Oconomowoc Developmental Training Center of WI LLC, d/b/a Genesee Lake School added a new location. This new RCC is located at 545 Kossow Road, Waukesha, WI 53186.**

Any modifications to the total amount allocated for provision of the services outlined in this contract are indicated on the attached Budget Sheet (Attachment A).

In accordance with the Contract Administration Manual of Racine County, (Section III. A.1. Contract Modification and Extension), the approval for this change is executed by the Human Services Department Director, Finance Director, Corporation Counsel and County Board Chairperson with signatures affixed.

(signed) <u>Victoria Ramb-Glider</u> <small>Victoria Ramb-Glider (Dec 16, 2021 14:15 CST)</small>	<u>Dec 16, 2021</u> Date
Provider's Authorized Representative	
(signed) <u>[Signature]</u> <small>Hope [Signature] (Dec 16, 2021 14:07 CST)</small>	<u>Dec 16, 2021</u> Date
Racine County Human Services Director	
(signed) <u>[Signature]</u>	<u>12-16-2021</u> Date
Racine County Executive	
(signed) <u>[Signature]</u>	<u>12-20-2021</u> Date
Racine County Corporation Counsel	
(signed) <u>[Signature]</u>	<u>12/20/2021</u> Date
Racine County Finance Director	
(signed) <u>[Signature]</u>	<u>12/28/2021</u> Date
Racine County Clerk	
(signed) _____	_____ Date
Racine County Board Chairperson	

PROGRAM DESCRIPTION

Residential Care Center

A. Plan for Service

1. The Provider will prepare a treatment plan delineating goals and objectives for the child and family in accordance with the service request received from the Human Services Department.
  - a. The treatment plan for children placed will be submitted to the Racine County Human Services Department within 30 days of placement.
  - b. The Provider will prepare reports on the child and family's progress in the treatment at intervals of 6 months.
2. Provider Responsibilities:
  - a. The Provider shall notify the Purchaser of any planned or unplanned absences, unless outlined in the treatment plan.
  - b. The Provider shall consult with the Purchaser when they are holding space for a child.
  - c. The Provider will notify the Purchaser at least 30 days prior to the discharge of the child. However, we reserve the right to discharge immediately in extreme circumstances (i.e. psychiatric meltdown, significant danger to self or others, etc.). The post-discharge planning process will include Purchaser representation.
  - d. The Provider is responsible for timely treatment plans in accordance with the above.
3. Purchaser Responsibilities:
  - a. To supply the Provider a complete social history on the client/family including medical, school, and background information, a recent psychological, a clear statement of the problems initiating placement and a clear statement of the agency's goals for both the child and family at time of placement.
  - b. In absence of a court order, at least 30 days notice of intent to remove the child is to be given to the Provider. Whenever possible, a tentative discharge date shall be set during formation of the treatment plan.
  - c. To give the Provider continuous and timely feedback on the acceptability of the treatment plan.
  - d. To monitor parent involvement and encourage through Court, if necessary, active involvement by parents in the treatment plan.
  - e. To fulfill all responsibilities as developed in the treatment plan for successful completion of this plan.
  - f. To identify for the Provider possible visiting and post-discharge resources.
4. The Purchaser and Provider agree that the treatment plan shall be reviewed jointly at the intervals of 3 months. Staffing for this purpose will be initiated by the Provider with Purchaser attending on at least a semiannual basis.

B. Services:

1. It is understood this fee includes:
  - a. Room and board
  - b. Clothing allowance

- c. Personal allowance
  - d. Psychiatric and psychological consultation and/or therapy
  - e. On grounds and/or off grounds educational services
  - f. Therapeutic services to the family – not to include transportation and in-home services
  - g. Other/special needs as delineated in treatment plan
2. No payment will be made unless a signed authorization has been approved by the Human Services Department. That authorization must reflect the signature of the Youth & Family Services Division Manager, or designee.
3. Special Consideration:
- a. The Provider shall request prior approval for reimbursement from Purchaser for any individual expense not negotiated at the signing of this Contract.
  - b. In the event the child is absent from the facility, the Purchaser agrees to pay the regular rate for a period not exceeding 30 consecutive days or 30 days in a calendar month to reserve the space for the child. Absence may be planned or unplanned; however, the Purchaser and Provider must agree to billing for holding space within 1 working day of the child's absence. No payment for holding space shall be approved without prior agreement.

Monies collected by the Provider on behalf of a client from any other source will be treated as an adjustment to the cost and will be deducted from the monthly contracted amount.

C. Health Care

- 1. The Purchaser will obtain the child's health history and parental consent form at the point of placement.
- 2. The Provider is responsible for the annual physical, semiannual dental and routine medical care.

D. Legal Papers

The Purchaser will provide copies of orders of custody, guardianship, or of judicial determination authorizing the placement.

**Case Manager or Designee Face-to-Face Contact Information**

The Federal Child and Family Services Improvement Act of 2006 created a new threshold for minimum case worker contact with children and juveniles placed in out-of-home care (OHC) by the State (County). Children and juveniles placed in out-of-home care that are under the placement and care responsibility of the county each and every full calendar month they are placed in out-of-home care.

The focus of the visit must be on safety, permanence and well-being of the child or juvenile. Contacts must be of substance and duration, sufficient to address goals of the case plan and permanency plan. If a case worker designee is making the contact for the Racine County Human Services Department (RCHSD) Case Manager, the designee must have a copy of any safety plan, permanency plan and case plan prior to the face-to-face contact. They must also be aware of what to look for when assessing safety, progress and well-being for that particular child.

The contact must be documented in eWISACWIS within 30 days of the face-to-face contact occurring, regardless of whether the visit was conducted by the RCHSD Case Manager or his or her designee. The

documentation must contain the following:

- The date, time and duration of the contact
- The participants involved
- The location of the visit
- The type of contact
- The purpose of the contact
- A summary of the results of the contact

It is the RCHSD Case Manager's responsibility to obtain the above information from the designee in cases where a designee is making the face-to-face contact. It is also the responsibility of the RCHSD Case Manager to input that information into eWISACWIS within 30 days of the face-to-face contact occurring.

As a result of the above, any designee of Provider agency making the face-to-face contact for the RCHSD Case Manager must provide the above required information to the Racine County Case Manager within 21 days of the contact occurring. This can be done via e-mail, fax, or mail.

### PROGRAM REPORTING AND EVALUATION

Outcome	Methodology For Determining Whether Outcome Is Achieved	Completion Date
1. 80% of the Racine County youth will meet the goals and objectives specified on their treatment plans.	Contract Agency Treatment Records	12/31/21
2. 75% of the clients will not have any new contacts with the Juvenile Justice System while receiving services and for one year after discharge.	HSD Records	12/31/21
3. 90% of the clients will not be placed in a more restrictive living arrangement during their placement and within six months of discharge.	HSD Records	12/31/21

An Evaluation Outcome Report for Outcome #1 must be provided to the Youth & Family Division Manager and Racine County HSD Contract Compliance Monitor by 2/1/2022.

**XII. COST AND SERVICES TO BE PROVIDED**

- A. Provider and Purchaser understand and agree that the eligibility of individuals to receive the services purchased under this agreement will be determined by the Purchaser.
- B. Purchaser agrees to pay Provider for the actual services rendered by Provider and authorized by Purchaser at the contracted amount.
- C. The total amount to be paid to Provider by Purchaser for programs and services as specified in this section will not exceed the total contracted dollar amount.

Account #	Program	Total	Units	Unit Rate	Method of Payment
	Regular CCI Program	As Authorized	As Authorized	\$465.17	Daily
	Genesee lake School - Intensive	As Authorized	As Authorized	\$534.04	Daily
	Kossow - Intensive	As Authorized	As Authorized	\$533.15	Daily
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*Jenni Mattia*

Dec 16, 2021

Approved by HSD Fiscal Manager \_\_\_\_\_

*Victoria Raml-Glider*  
Victoria Raml-Glider (Dec 16, 2021 14:15 CST)

Dec 16, 2021

Approved by Contracted Agency \_\_\_\_\_

Signature: *Obed Medina*  
Obed Medina (Dec 16, 2021 13:17 CST)

Email: obed.medina@racinecounty.com











# ODTC dba Genesee Lake School #21-124-01 RCC Mod A Combined.


Final Audit Report


2021-12-16


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By:	Dannetta Payne (Dannetta.Payne@racinecounty.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAM-vXbfYQSODH_paXtEcX628iuCMCFcW


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