



## WHATCOM COUNTY CONTRACT INFORMATION SHEET

Originating Department:		85 Health	
Division/Program: (i.e. Dept. Division and Program)		8550 Human Services / 855020 Mental Health	
Contract or Grant Administrator:		Anne Deacon	
Contractor's / Agency Name:		City of Bellingham	
Is this a New Contract? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	If not, is this an Amendment or Renewal to an Existing Contract? If Amendment or Renewal, (per WCC 3.08.100 (a)) Original Contract #:		Yes <input type="checkbox"/> No <input type="checkbox"/>
Does contract require Council Approval?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	If No, include WCC: (see Whatcom County Codes 3.06.010, 3.08.090 and 3.08.100)	
Is this a grant agreement? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If yes, grantor agency contract number(s):		CFDA#:
Is this contract grant funded? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If yes, Whatcom County grant contract number(s):		
Is this contract the result of a RFP or Bid process? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If yes, RFP and Bid number(s):		Contract Cost Center:
Is this agreement excluded from E-Verify?	No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>	If no, include Attachment D Contractor Declaration form.	
If YES, indicate exclusion(s) below:			
<input type="checkbox"/> Professional services agreement for certified/licensed professional.			
<input type="checkbox"/> Contract work is for less than \$100,000.		<input type="checkbox"/> Contract for Commercial off the shelf items (COTS).	
<input type="checkbox"/> Contract work is for less than 120 days.		<input type="checkbox"/> Work related subcontract less than \$25,000.	
<input checked="" type="checkbox"/> Interlocal Agreement (between Governments).		<input type="checkbox"/> Public Works - Local Agency/Federally Funded FHWA.	
Contract Amount:(sum of original contract amount and any prior amendments): \$ 140,000		Council approval required for; all property leases, contracts or bid awards <b>exceeding \$40,000</b> , and professional service contract amendments that have an increase greater than \$10,000 or 10% of contract amount, whichever is greater, <b>except when</b> :	
This Amendment Amount: \$			
Total Amended Amount: \$			
<ol style="list-style-type: none"> <li>1. Exercising an option contained in a contract previously approved by the council.</li> <li>2. Contract is for design, construction, r-o-w acquisition, professional services, or other capital costs approved by council in a capital budget appropriation ordinance.</li> <li>3. Bid or award is for supplies or equipment included approved in the budget.</li> <li>4. Contract is for manufacturer's technical support and hardware maintenance of electronic systems and/or technical support and software maintenance from the developer of proprietary software currently used by Whatcom County.</li> </ol>			
Summary of Scope: The purpose of this agreement is to establish Whatcom County as the administrator of the Whatcom GRACE Program.			
Term of Contract: 2 Years		Expiration Date: 12/31/2020	
Contract Routing:	1. Prepared by:	JT	Date: 12/14/2018
	2. Attorney signoff:	RB	Date: 01/04/2019
	3. AS Finance reviewed:		Date: 2/25/19
	4. IT reviewed (if IT related):		Date:
	5. Contractor signed:		Date:
	6. Submitted to Exec.:		Date: 2-26-19
	7. Council approved (if necessary):		Date:
	8. Executive signed:		Date:
	9. Original to Council:		Date:

**INTERLOCAL AGREEMENT  
BETWEEN WHATCOM COUNTY AND THE CITY OF BELLINGHAM  
REGARDING CREATION OF A GROUND-LEVEL RESPONSE AND COORDINATION  
(GRACE) PROGRAM**

This Interlocal Agreement (the "Agreement") is made and entered into this day by and between Whatcom County (the "County") and the City of Bellingham (the "City"), collectively referred to as the "Parties".

**WHEREAS**, the Parties have historically provided a variety of services to assist individuals with poor health, behavioral health disorders and/or unstable housing or homelessness; and

**WHEREAS**, the Parties have identified that intensive care, emergency care, behavioral health, criminal justice, and other services have been disproportionately and inefficiently utilized by a recognizable group of high-risk and high-need individuals; and,

**WHEREAS**, the Parties and other service providers have determined that coordination and development of targeted resources to serve high-need individuals will result in better care of these individuals and more efficient use of limited resources; and

**WHEREAS**, this approach will result in reduced calls to first responders, emergency room visits for medical treatment, arrests, and jail admissions, which are an expensive and inefficient means of improving the health, well-being and stability of these individuals; and

**WHEREAS**, this coordinated and targeted approach is being called the Ground-Level Response and Coordinated Engagement (GRACE) Program; and

**WHEREAS**, it is anticipated that GRACE (the "Program") will improve public safety, reduce use and costs of emergency and criminal justice systems and improve the health and well-being of individuals with complex needs; and

**WHEREAS**, in addition to the Parties, other service providers, including PeaceHealth Medical Center, area municipalities, tribal nations, and the North Sound Behavioral Health Organization (BHO), are also participating community partners in the Program; and

**WHEREAS**, coordinated administration is required to develop policies and procedures, direct services, and monitor the successes of the Program; and

**WHEREAS**, multiple funding sources, including those of the City and County, will be required to procure services to operate GRACE;

**NOW, THEREFORE**, it is agreed by and between the Parties as follows:

1. **ADMINISTRATION.** The Parties designate the County as the administrator pursuant to this Agreement. Administrative duties include: (1) overseeing the Request for Proposals process which led to the selection of and contracting with SeaMar; and (2) monitoring the contract with SeaMar. Under the terms of that contract, SeaMar is responsible for employing and providing leadership to Program Staff and operating the Program to meet the overall goals as set forth by exhibits to this Agreement. The County shall monitor SeaMar's performance and share results with the City, upon request. The County shall provide the City with a copy of the contract, as amended over time, between the County and SeaMar.

2. **SERVICES.** The services to be provided under this Agreement are outlined in an Agreement between Whatcom County and SeaMar as **Exhibit A – Scope of Work hereto which is attached hereto incorporated herein**, which may be amended from time to time by and between Whatcom County and SeaMar.

3. **FINANCIAL COMMITMENTS.**

- A. Each Party will include a line item in their respective 2019-2021 budgets to support the Program, as shown in **Exhibit B – Financial Commitments, which is attached hereto and incorporated herein**. The terms of Exhibit B are contingent upon annual budget approval by the County and City and may be altered by agreement.
- B. The Parties agree to commit to a three-year coordinated approach to intensive services funding.
- C. Funding for the last quarter of 2018 was provided by the North Sound Behavioral Organization (BHO), PeaceHealth and Whatcom County. In addition, BHO funding is expected to cover most City and County expenses for the first six months of 2019 and BHO resources shall be exhausted prior to billing the City.
- D. The securing of additional State or grant funding to support the Program shall result in a commensurate proportionate reduction in the Parties' contributions.
- E. The Parties recognize that the program is made up primarily of personnel and anticipate cost of living adjustments and wage increases over time, therefore, the total amounts outlined in Exhibit B may be increased accordingly.

4. **APPOINTMENT OF EXECUTIVE COMMITTEE.** Each Party will appoint one or more representatives to serve as a member of an executive committee (the "Committee"), which will serve in an advisory capacity to the County by providing guidance on goals and objectives and defining the expected outcomes of the Program.

5. **STAFF.** The Mayor and County Executive will designate staff to serve on the Executive Committee.

6. **INVOICES.** The County shall submit a quarterly invoice to the City, which will include a breakdown of personnel costs and direct costs. A report summarizing services performed and outcomes (as determined by the Executive Committee) shall be attached to said invoice.

7. **EFFECTIVE DATE AND TERM.** The Agreement shall be effective beginning January 1, 2019 and shall continue in full force and effect until December 31, 2021, unless extended by mutual written agreement of both Parties or terminated in accordance with Section 8 of this Agreement.

8. **TERMINATION OF AGREEMENT/REDUCTION IN FUNDING.**

- A. Should either Party believe the other has failed to perform, or is likely to be unable to substantially perform, all or a material part of its obligations under this Agreement, it shall deliver written notice to that effect to the other, specifying the alleged default and giving the other Party a timeline to cure such default. If the default is not remedied to the satisfaction of the non-defaulting party, this Agreement may be terminated upon seven (7) days written notice (delivered by certified mail).
- B. In the event of termination, the County shall be paid an amount, at the discretion of the Project Manager, which takes into account actual costs incurred in performing the services to the date of termination, the amount of work originally required which was satisfactorily completed to the date of termination, the cost to the City of completing the work itself or of employing another firm to complete it

and the inconvenience and time which may be required to do so, along with any other factors which affect the value to the City of the project work which has been performed to the date of termination. In no event shall the County receive an amount based on unperformed services or other work.

On the giving of notice of termination by either Party, the County shall immediately begin winding down its services in anticipation of the termination.

- C. In the event that funding is withdrawn, reduced or limited in any way after the effective date of this Agreement due to budgetary constraints of either Party and prior to its normal completion, the Parties may summarily terminate the Agreement as to the funds withdrawn, reduced or limited notwithstanding any other termination provisions of this Agreement. If the level of funding withdrawn, reduced or limited is so great that the County deems that the continuation of the services covered by this Agreement is no longer in the best interest of the City or County, the County may summarily terminate this Agreement in whole notwithstanding any other termination of this Agreement. Termination under this Section shall be effective upon receipt or written notice thereof.

**9. NEW PARTIES.** The Parties may allow additional public agencies (as the term is defined in RCW 39.34.020) to become parties to this Agreement subject to such terms and conditions as they unanimously agree.

**10. SURVIVABILITY.** All covenants, promises and performance which are not fully performed as of the date of termination shall survive termination as binding obligations.

**11. PROJECT MANAGERS:** Samya Lutz shall be the Project Manager for the City and Anne Deacon shall be the Project Manager for the County.

**12. NOTICES:** All notices, demands, requests, consents, and approvals which may or are required to be given by any Party, shall be in writing and shall be deemed to have been duly given if delivered personally, sent by email, sent by a nationally recognized overnight delivery service, or if deposited in the United States mail and sent by registered or certified mail, return receipt requested, postage prepaid to:

The County: Anne Deacon, Human Services Manager  
Whatcom County Health Department  
509 Girard Street  
Bellingham, WA 98225

The City: Samya Lutz, Housing & Services Program Manager  
City of Bellingham PCDD  
210 Lottie Street  
Bellingham, WA 98225

or to such other address as the foregoing parties hereto may from time-to-time designate in writing and deliver in a like manner. All notices shall be deemed complete upon factual receipt or refusal of the intended recipient to accept delivery. Facsimile transmission of any signed, original document and retransmission of any signed facsimile transmission shall be the same as delivery of an original document.

**13. AMENDMENT.** No modification, termination or amendment of this Agreement may be made except by written agreement signed by all parties, except as provided herein.

**14. WAIVER.** No failure by any of the foregoing parties to insist upon the strict performance of any covenant, duty, agreement, or condition of this Agreement or to exercise any right or remedy consequent upon a breach thereof, shall constitute a waiver of any such breach or any other covenant, agreement, term, or condition.

15. **NEUTRAL AUTHORSHIP.** Each of the provisions of this Agreement has been reviewed and negotiated, and represents the combined work product of all parties hereto. No presumption or other rules of construction which would interpret the provisions of this Agreement in favor of or against the party preparing the same shall be applicable in connection with the construction or interpretation of any of the provisions of this Agreement.

16. **PUBLIC RECORDS ACT.** All records received by any Party, pursuant to this Agreement shall be a public record and therefore subject to the Public Records Act.

17. **ENTIRE AGREEMENT.** The entire agreement between the parties hereto is contained in this Agreement, and this Agreement supersedes all of their previous understandings and agreements, written and oral, with respect to this transaction. This Agreement may be amended only by written instrument executed by the parties subsequent to the date hereof.

**IN WITNESS WHEREOF,** the parties have executed this Agreement as of the day and year first above written.

EXECUTED THIS \_\_\_\_\_ day of \_\_\_\_\_, 2019.

[signature pages follow]

CITY OF BELLINGHAM

By: [Signature]  
Kelli Linville, Mayor

Date: 2/8/19

Attest: [Signature]  
Finance Director

Approved as to Form.  
[Signature]  
Office of City Attorney

[Signature]  
Rick M. Sepler, AICP  
Planning & Community Development Director

STATE OF WASHINGTON )  
  )  
COUNTY OF WHATCOM )

ss.

I certify that I know or have satisfactory evidence that Kelli Linville is the person who appeared before me, and said person acknowledged she signed this instrument on oath stated she was authorized to execute the instrument and acknowledged it as the Mayor of the CITY OF BELLINGHAM to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated: 2/8/19

[Signature]  
Signature of Notary Public  
Elizabeth J. Coogan  
Name Printed  
Notary Public  
Title  
My Appointment Expires: 4/9/20



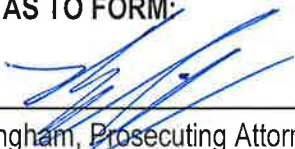
EXECUTED THIS \_\_\_\_\_ day of \_\_\_\_\_, 2019.

WHATCOM COUNTY

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Jack Louws  
County Executive


APPROVED AS TO FORM:

  
\_\_\_\_\_  
Royce Buckingham, Prosecuting Attorney      2-7-19  
Date

APPROVED AS TO PROGRAM:

  
\_\_\_\_\_  
Anne Deacon, Human Services Manager      2/21/19  
Date

APPROVED AS TO DEPARTMENT:

  
\_\_\_\_\_  
Regina Delahunt, Director      2/22/19  
Date

**Exhibit "A"**  
(SCOPE OF WORK)

**I. Background**

Individuals with complex needs are often challenged with poor health, behavioral health disorders, and/or unstable housing or homelessness. As a result, some individuals will frequently require emergency responses from law enforcement or Emergency Medical Services (EMS). Crisis interventions are ineffective in resolving an individual's persistent challenges. These individuals become "familiar faces" to first responder systems and require substantial support to change the pattern of excessive and inappropriate use. A thoughtful intervention plan that includes multiple service providers who coordinate their efforts can help prevent or reduce unnecessary calls to First Responders.

Whatcom GRACE (Ground-level Response And Coordinated Engagement) is a program designed to provide intensive care coordination services to individuals who frequently use the crisis system and law enforcement responses in ineffective ways. Care coordination activities are coupled with other necessary services from relevant service providers to create comprehensive intervention and care plans. The overarching GRACE program goals are to reduce First Responder calls, Emergency Department visits, arrests, and jail admissions while improving the health, well-being and stability of these individuals.

The general goals of the GRACE program are: 1) increased public safety, 2) reduced use and costs of emergency and criminal justice systems, and 3) improved health and well-being of individuals with complex needs.

GRACE community partners include, but are not necessarily limited to: the Whatcom County Health Department, law enforcement agencies, Emergency Medical Services (EMS), PeaceHealth Medical Center, the Whatcom County jail, municipalities, tribal nations, North Sound Behavioral Health Organization (BHO), and the Whatcom Alliance for Health Advancement (WAHA).

The purpose of this contract is to fund an agency to act as the Hub in a "hub and spoke" model, with the above-mentioned community partners serving as the "spokes". The Hub agency will facilitate the development of shared care/intervention plans and provide care coordination services to an identified population of "familiar faces" in collaboration with "spoke" partners. See the attached Exhibit D, "Whatcom GRACE Design Considerations and Principles" for general program guidelines.

**II. Definitions**

Hub: The agency/contractor that identifies program participants, and facilitates and/or provides client engagement, intervention planning, care coordination, and program quality assurance for GRACE. The Hub will provide leadership to the community and its partners in its primary responsibility for administration of the county-wide GRACE program.

Executive Committee: Representatives from the funding entities, acting in an advisory capacity to the county and the Hub/contractor, providing guidance on goals and objectives, and expected outcomes of the GRACE program.

Familiar Faces: Individuals who use crisis systems frequently and ineffectively, often without meeting their unique, complex needs.

Leadership Team: An identified group of community leaders acting in an advisory capacity to the County and the Hub/Contractor on policies of the GRACE program.



Pathways Model: This is an evidence-based model which defines care coordination as delivering services outside of the typical boundaries of health care systems. A “pathway” is a standardized process through which at-risk individuals are identified and their needs are defined and addressed.

Program Team: An identified group of community service providers, comprised largely of “spoke” organizations at the program level acting in an advisory capacity to the County and the Contractor/Hub on GRACE practices and procedures.

Spokes: Spokes are the organizations that provide services to GRACE clients and coordinate care, to include behavioral health treatment, housing and other social services, and medical care.

### III. Statement of Work

#### A. Program Services

The Contractor will serve as the Hub for the GRACE program. The role of the Hub is to facilitate comprehensive care coordination among spoke agencies that are providing services to GRACE clients, provide direct care coordination, facilitate the development of shared care/intervention plans, and report on identified performance and outcome measures.

Specific responsibilities of the Hub include:

1. Recruit and hire qualified staff to operate the GRACE Hub, in collaboration with the County and other funders to the extent possible and allowed by Contractor personnel policies
2. Develop policies and procedures, in collaboration with the county, that will inform and guide the GRACE program activities and expectations
  - A. Policies and procedures will include guidance on client eligibility, referrals, types of services provided, shared care/intervention plans, spoke expectations and commitment of participation, data collection and tracking, and use of client flex funds/motivational incentives
  - B. Educate the spoke agencies on GRACE policies and procedures and their expected role as GRACE partners
3. Assume a primary leadership role for the GRACE program in collaboration with the County
4. Make final determination on the status of an individual as a GRACE program client, in consultation with the County and other GRACE program funders during initial start-up phase
5. Participate in meetings with the Executive Committee as necessary
6. Convene and facilitate meetings of the Leadership and Program Teams as necessary, and in collaboration with the County
7. Work closely with County and other funders to establish metrics for GRACE program outcome measures
8. Educate community about the GRACE program in collaboration with the County
9. Keep County and other GRACE program funders updated on program implementation progress during first year of operation, on a schedule agreed upon between the County and Contractor
10. Ensure consistent, accurate and effective communication with multiple, diverse stakeholders as appropriate

11. Plan for and transition the WAHA Intensive Case Management program Care Coordinators' caseloads, as appropriate
12. Convene and facilitate meetings with spoke agencies focused on development, implementation, and oversight of shared care/intervention plans for individual clients of the GRACE program as necessary
13. Ensure quality shared care/intervention plans are created to meet the complex needs of GRACE clients to the greatest extent possible
14. Engage with prospective GRACE clients and encourage participation in the GRACE program
15. Facilitate and provide care coordination services to GRACE clients as needed
16. Screen and assess or arrange for assessments of GRACE clients as appropriate in an effort to develop and implement shared care/intervention plans that are responsive to identified needs
17. Monitor caseloads to ensure delivery of adequate care coordination services and make or recommend adjustments as appropriate
18. Maintain engagement and care coordination efforts with GRACE program clients and prospective clients despite their reticence for help, to the extent appropriate
19. Work with spoke agencies to create new and/or innovative strategies where existing processes or policies are inflexible or ineffective to meet the needs of the GRACE clients
20. Arrange transportation or provide transportation for GRACE clients for necessary appointments as appropriate
21. Provide services out of office and on-site whenever possible to best achieve the goals of the clients' shared care/intervention plans
22. Provide medication evaluations and ongoing medication monitoring when indicated, and in off-site locations when necessary
23. Work closely with law enforcement and EMS agencies to coordinate outreach activities to GRACE clients, to include teaming with these agencies during client contacts when appropriate
24. Ensure appropriate staff training and supervision related to the complex challenges of GRACE clients, to include criminogenic risk factors
25. Work with County to identify topics of training to offer to spoke agencies and the community that will support the goals and activities of the GRACE program
26. Participate with the County in the Data Across Sectors for Health (DASH) technical assistance grant focused on multi-sector collaboration and data sharing
27. Work with County to establish/agree upon a client data base and a reporting and communication mechanism, considering the needs for dynamic information exchange with multiple community partners
28. Comply with 42 CFR Part 2, HIPAA rules, as well as state confidentiality rules
29. Work with County to identify and implement billing for client services to Medicaid and other payers as eligible and appropriate
30. Work with the County and the North Sound Accountable Community of Health (NS ACH), if the GRACE program is chosen as a pilot transformation project, to provide all required information and to promote the GRACE program
31. Work with the County and the NS ACH in implementing use of the Pathways model if the GRACE program clients are an identified target population for this transformation project

32. Work closely with the County to ensure that start-up costs are sufficiently funded and request timely reviews of program operation expenses.

#### B. Service Eligibility

The target population of the GRACE Program consists of individuals (“familiar faces”) who have frequent contact with law enforcement and emergency response systems, high use of acute care health services including behavioral health, and challenges maintaining safe and affordable housing. As a result of their frequent contacts, familiar faces make inefficient use of public resources in an attempt to meet their needs. A high percentage of the target population is Medicaid eligible or enrolled. GRACE clients may include all ages, and are not excluded because of age alone.

The Contractor will accept referrals for program admission consideration from law enforcement, EMS agencies, PeaceHealth Medical Center, Whatcom County jail, and treatment or service provider agencies. The Contractor will utilize the GRACE Executive Committee and Leadership Team as advisory bodies to assist in developing policies for prioritizing admissions to the GRACE program.

The Contractor shall coordinate with the County and Whatcom Alliance for Health Advancement (WAHA) in the disposition of all active cases currently served by the WAHA Intensive Case Management (ICM) program.

### IV. Program Requirements

#### A. Staffing

The contractor will provide staffing sufficient to operate the GRACE program Hub. Adequate capacity for operations must include program management and supervision, accounting and performance management, care coordination, community engagement, client programming facilitation, and collaboration with the Leadership and Program teams.

Hub operations and care coordination will be provided by a multidisciplinary team of behavioral health and healthcare professionals. The Contractor shall ensure that GRACE program staff have the demonstrated ability to work with complex individuals who experience acute symptoms and lifestyle patterns that are disruptive to their health and well-being. Requirements for GRACE Hub program staff follow:

1. Recruit, hire, and employ program staff to provide Program Management, Administrative support, Care Coordination, and Community Health Worker capacity. Staff capacity to deliver medication evaluations, prescribing, monitoring, and consultation shall also be included in the staffing model.
  - a. Program Management shall be provided by a staff member, up to full-time, with the demonstrated history and qualifications to manage a comprehensive program involving multiple community partners and complex clients.
  - b. Care Coordination services shall be provided by no less than three (3) full-time staff members qualified to work with highly complex individuals, with specialized training in behavioral health. The County prefers that these Care Coordination staff hold a Master's degree or higher in a behavioral health, or other relevant field. Waiver of any of the educational or professional requirements requires approval by the County and will be considered as requested by the Contractor.

- c. Community Health Worker services shall be provided by no less than one (1) full-time staff member with experience and education working with individuals with complex needs is strongly preferred.
- d. No less than four (4) staff members must carry a full caseload of approximately 20 GRACE clients each, for a total of 80 GRACE clients at any given time. Program start-up will focus on building caseloads as each staff member is hired.
- e. Administrative support for the program shall not exceed the equivalent of one (1) full-time staff member, yet can be provided with less than one full-time equivalent (FTE).
- f. Medication evaluations, prescribing, monitoring and consultation shall be provided by staff members qualified in the state of Washington to provide these services. Services will be offered as necessary and available, and within program budgetary restrictions. No more than a half FTE will be dedicated to medication evaluations, prescribing, and medication monitoring.

The Contractor will also fulfill the following requirements:

1. Provide administrative support sufficient to sustain the GRACE program functions
2. Provide office space, furniture and equipment sufficient to support the GRACE Hub, co-locating with law enforcement, EMS, etc. as appropriate
3. Provide administrative and clinical supervision of program direct service staff
4. Work with County to modify program as necessary in response to potential changes relative to the NS ACH transformation projects, Medicaid billing opportunities, information exchange, or data collection and reporting
5. Work with County to review GRACE budget as needed to ensure adequate funding support for costs when/if program modifications are made
6. Develop Memorandums of Understanding (MOUs) with EMS to delineate roles and responsibilities of coordination and collaborative efforts on behalf of GRACE clients, to be reviewed annually
7. Develop MOUs with Law Enforcement agencies to clarify roles and partnership between GRACE Care Coordination staff and law enforcement officers, to be reviewed annually
8. Develop MOUs with Spoke agencies to clarify roles and responsibilities, to be reviewed annually
9. Ensure that MOUs are fully executed within 90 days of contract start date; MOUs can be templated to an extent for ease and consistency in use

## V. Reporting Requirements

The Contractor shall work in collaboration with the County and the Leadership Team to identify specific metrics for GRACE program outcomes. Expected program overarching outcomes include:

1. Reduction in jail admissions/reduction in jail bed day utilization
2. Reduction in law enforcement responses
3. Reduction in EMS responses
4. Reduction in Emergency Department visits
5. Improved health conditions of GRACE clients

The general outcomes expected of the GRACE program also include reducing the incidence of familiar faces using multiple systems inefficiently while promoting healthy behaviors among GRACE clients. As the program evolves, the Contractor in collaboration with the County and the Leadership Team will review monthly utilization data collected and then begin to set specific metrics.

The Contractor will collect baseline data on clients newly admitted to the GRACE program to include historical utilization of First Responder systems and the Emergency Department. On a monthly basis, data will be collected by individual GRACE client on current utilization of these services. The Hub organization will work closely with the County to design a reporting tool, and then submit a monthly report which will include the following data:

1. Arrests
2. Jail admissions
3. Jail bed day stays
4. First Responder calls for assistance (law enforcement and EMS)
5. Emergency Department visits.

**Exhibit "B"**  
**(FINANCIAL COMMITMENTS)**

**I. Budget**

The expenses related to the Program will be borne as much as possible by sources other than the City and County, such as the North Sound Behavioral Health Organization, PeaceHealth, Medicaid and other health care cost reimbursement agencies. These other funding sources are not expected to cover the full cost of Program, and so the County and City have both committed funds as follows, with the understanding that these funds will be used on a proportional basis only to the extent that other funding is not available:

Whatcom County: up to \$295,000 per calendar year, contingent upon annual budget approval.

City of Bellingham: up to \$140,000 per calendar year, contingent upon annual budget approval.

The annual budget for this work is anticipated as follows:

<b>Sources</b>	<b>Program Delivery (Personnel, Direct &amp; Indirect Costs)</b>
<b>County (up to)</b>	<b>\$ 295,000</b>
<b>City of Bellingham (up to)</b>	<b>\$ 140,000</b>
<b>Other (at least)</b>	<b>\$ 46,250</b>
<b>TOTAL</b>	<b>\$ 481,250</b>

Whatcom County will send a quarterly invoice and statement to the City outlining cost outlays, including the City and County shares, and reimbursements through other sources. Neither the City nor County will cover any costs paid through other sources, including grants or reimbursements.