

**WHATCOM COUNTY  
CONTRACT INFORMATION SHEET**

Whatcom County Contract Number:  
202206019 – 2

Originating Department:	85 Health
Division/Program: (i.e. Dept. Division and Program)	8550 Human Services / 855040 Housing Program
Contract or Grant Administrator:	Barbara Johnson-Vinna
Contractor's / Agency Name:	Opportunity Council

Is this a New Contract?	If not, is this an Amendment or Renewal to an Existing Contract?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If Amendment or Renewal, (per WCC 3.08.100 (a)) Original Contract #:	202206019	

Does contract require Council Approval?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	If No, include WCC:
Already approved? Council Approved Date:	(Exclusions see: Whatcom County Codes 3.06.010, 3.08.090 and 3.08.100)		

Is this a grant agreement?	If yes, grantor agency contract number(s):	CFDA#:
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		

Is this contract grant funded?	If yes, Whatcom County grant contract number(s):	202107011
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		

Is this contract the result of a RFP or Bid process?	If yes, RFP and Bid number(s):	Sole Source	Contract Cost Center:	122600
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				

Is this agreement excluded from E-Verify?	No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/>
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If YES, indicate exclusion(s) below:

<input type="checkbox"/> Professional services agreement for certified/licensed professional.	<input type="checkbox"/> Contract for Commercial off the shelf items (COTS).
<input type="checkbox"/> Contract work is for less than \$100,000.	<input type="checkbox"/> Work related subcontract less than \$25,000.
<input type="checkbox"/> Contract work is for less than 120 days.	<input type="checkbox"/> Public Works - Local Agency/Federally Funded FHWA.
<input type="checkbox"/> Interlocal Agreement (between Governments).	

Contract Amount:(sum of original contract amount and any prior amendments):	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> <ol style="list-style-type: none"> <li>Exercising an option contained in a contract previously approved by the council.</li> <li>Contract is for design, construction, r-o-w acquisition, prof. services, or other capital costs approved by council in a capital budget appropriation ordinance.</li> <li>Bid or award is for supplies.</li> <li>Equipment is included in Exhibit "B" of the Budget Ordinance</li> <li>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>
\$ 2,654,144	
This Amendment Amount:	
\$ 157,120	
Total Amended Amount:	
\$ 2,811,264	

Summary of Scope: This contract funds programmatic and administrative services associated with the operation of the Housing and Essential Needs (HEN) Program and the distribution of rental and utility assistance subsidies to eligible participants.

Term of Contract:	1 Year	Expiration Date:	06/30/2023
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Contract Routing:	1. Prepared by:	JT	Date:	02/02/2023
	2. Health Budget Approval	KR/JG	Date:	02/17/2023
	3. Attorney signoff:	RB	Date:	02/17/2023
	4. AS Finance reviewed:	A Martin	Date:	02/21/2023
	5. IT reviewed (if IT related):		Date:	
	6. Contractor signed:		Date:	
	7. Contractor Program Manager:			
	8. Executive Contract Review:		Date:	
	9. Council approved (if necessary):	AB2023-154	Date:	
	10. Executive signed:		Date:	
	11. Original to Council:		Date:	

**WHATCOM COUNTY CONTRACT AMENDMENT  
HOUSING & ESSENTIAL NEEDS**

**PARTIES:**

**Whatcom County  
Whatcom County Health Department  
509 Girard Street  
Bellingham, WA 98225**

**AND CONTRACTOR:  
Opportunity Council  
1111 Cornwall Avenue  
Bellingham, WA 98225**

**CONTRACT PERIODS:**

**Original: 07/01/2022 – 06/30/2023  
Amendment #1: 11/23/2022 – 06/30/2023  
Amendment #2: 03/01/2023 – 06/30/2023**

**THE CONTRACT IDENTIFIED HEREIN, INCLUDING ANY PREVIOUS AMENDMENTS THERETO, IS HEREBY AMENDED AS SET FORTH IN THE DESCRIPTION OF THE AMENDMENT BELOW BY MUTUAL CONSENT OF ALL PARTIES HERETO**

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**DESCRIPTION OF AMENDMENT:**

1. Amend Exhibit A – Scope of Work, to add new HEN Foundational Community Services (FCS) Program funding, outcome, and reporting requirements for HEN-eligible, FCS enrollees. This new funding creates a bridge period of rent assistance for households enrolled in FCS, prioritizing households enrolled in FCS and Supportive Employment, who no longer have a HEN referral from DSHS due to increased income or other changes in eligibility. HEN-FCS funding also requires specific guidelines provided by WA State Department of Commerce are met, which include allowable expenses, eligibility requirements, prioritization of households, and HMIS and housing stability requirements.
2. Amend Exhibit B – Compensation, to increase funding by \$157,120 to support a bridge period of rent assistance for households enrolled in FCS.
3. Funding for the total contract period (07/01/2022 – 06/30/2023) is not to exceed \$2,811,264.
4. All other terms and conditions remain unchanged.
5. The effective start date of the amendment is 03/01/2023.

ALL OTHER TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND ANY PREVIOUS AMENDMENTS THERETO REMAIN IN FULL FORCE AND EFFECT. ALL PARTIES IDENTIFIED AS AFFECTED BY THIS AMENDMENT HEREBY ACKNOWLEDGE AND ACCEPT THE TERMS AND CONDITIONS OF THIS AMENDMENT. Each signatory below to this Contract warrants that he/she is the authorized agent of the respective party; and that he/she has the authority to enter into the contract and bind the party thereto.

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APPROVAL AS TO PROGRAM: \_\_\_\_\_  
Ann Beck, Community Services Manager Date

DEPARTMENT HEAD APPROVAL: \_\_\_\_\_  
Erika Lautenbach, Health Department Director Date

APPROVAL AS TO FORM: \_\_\_\_\_  
Royce Buckingham, Senior Civil Deputy Prosecutor Date

FOR THE CONTRACTOR:

Greg Winter, Executive Director		
Contractor Signature	Print Name and Title	Date

FOR WHATCOM COUNTY:

_____ Satpal Singh Sidhu, County Executive	_____ Date
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**CONTRACTOR INFORMATION:**

**Opportunity Council**  
1111 Cornwall Avenue  
Bellingham, WA 98225  
[Greg.Winter@oppco.org](mailto:Greg.Winter@oppco.org)

**EXHIBIT "A" – Amendment #2**  
**(SCOPE OF WORK)**

**I. Background**

The Housing and Essential Needs (HEN) is one of three programs created by Engrossed Senate House Bill 2082 which terminated the Disability Lifeline (DL) Program. HEN funds are part of Washington State Department of Commerce (Commerce) Consolidated Homeless Grant (CHG) and are intended to provide rental assistance, case management, utility assistance and essential needs for Medical Care Services recipients whose eligibility is determined by the Department of Social and Health Services (DSHS). The Opportunity Council's Whatcom Homeless Service Center (WHSC) serves as the coordinated entry for Whatcom County residents experiencing homelessness. The Community Services Division of the Opportunity Council oversees and administers housing case management and related programs. Community Services administers HEN rental and utility assistance, case management services for the HEN Program and the purchasing and distribution of Essential Needs products for HEN-eligible clients. Opportunity Council manages the Homeless Management Information Services (HMIS) for the County and is responsible for the HMIS requirements of the HEN Program. People eligible to receive HEN rental and utility assistance and Essential Needs items, will be served as long as funding is available and within the designated program requirements.

**II. Project Description and Design**

Housing and Essential Needs funds are limited to providing rental and utility assistance, case management and essential needs items for Washington Apple Health (Medicaid) recipients who are experiencing homelessness, or at substantial risk of becoming homeless, and whose eligibility is determined by DSHS. The HEN Program is not intended to provide long term support for households, nor will it be able to address all the financial and supportive service needs of households that affect housing stability, nor will it be able to serve all those who are eligible. Opportunity Council's Community Services Division serves as the administrative entity for HEN rental and utility assistance, case management services, and the purchasing and distribution of essential needs products and transportation assistance, for eligible individuals. Community Services will staff the HEN program with program operations and case management staff that are funded by the Contract, and are responsible for program implementation. Community Services will receive HEN referrals from the WHSC for homeless households. HEN referrals for households at-risk of homelessness will be referred by DSHS directly to the Opportunity Council's Community Resource Center, and subsequently to Community Services HEN Program.

Per State law, HEN eligibility now includes Aged, Blind, or Disabled (ABD) recipients, and those who DSHS has determined to be incapacitated due to substance use. HEN providers are expected to prioritize those who are HEN-eligible, and experiencing unsheltered homelessness or currently fleeing violence, and have the greatest need (CHG Guidelines, 9.4.2). Guidance from Commerce on prioritization of HEN-eligible clients indicates the following factors must be used to determine greatest need to include, but not be limited to: unsheltered homelessness and length of time homeless. Additional guidance on prioritization is available in the Washington State Coordinated Entry Guidelines (October 2021) Section 6.2 and within the Consolidated Homeless Grant guidelines.

**III. Statement of Work**

**A. HEN Rental & Utility Assistance, Case Management and Foundational Community Support (FCS) Services**

The Contractor will be responsible for programmatic and administrative services associated with the operation of the HEN Program. Programmatic and administrative services include all activities necessary to operate Community Services in accordance with the requirements set forth in the Administrative Requirements and Guidelines for the CHG as more fully described in Section IV: Special Conditions, below.

The Contractor will:

1. Commit to efforts to reducing and ending homelessness in Whatcom County by:
  - a. Prioritizing unsheltered homeless households and households currently fleeing violence (as per CHG Guidelines).
  - b. Assessing each household's housing needs and facilitating housing stability with the goal of obtaining or maintaining permanent housing (as per CHG Guidelines).
  - c. Employing a progressive engagement service model.
2. Provide direct services to individuals as follows:

- a. For non-FCS clients, eligibility is noted in the DSHS Benefits Verification System (BVS).
- b. For FCS clients, eligible households include HEN households who no longer have a HEN Referral from DSHS. This includes:
  - i. Households who are currently receiving HEN rent assistance;
  - ii. Homeless and at risk of homelessness households who:
    - a. Received a HEN Referral within the last six months, but were not able to identify permanent housing; OR
    - b. Received rent assistance in the past, but exited the program within the last six months; AND
  - iii. Households enrolled in FCS. FCS households enrolled in the Supportive Employment should be prioritized.
  - iv. Household income is at or below 80% Area Median Income.
3. Document client eligibility in client files.
4. Authorize and issue rental and utility assistance subsidies in a timely manner.
5. Track and report rental and utility assistance subsidies.
6. Support households in obtaining or maintaining permanent housing. This may include payment of eviction, attorney, or collections fees for previous rental damages, or move in kits. Funding for these expenses must be paid directly to a third party on behalf of the household and noted in a household's housing stability plan. For FCS eligible clients, the Contractor must work with households on a housing stability plan to secure affordable permanent housing with the knowledge that FCS funding expires on 06/30/2023.
7. Coordinate with existing housing providers and landlords to identify and secure permanent housing placements for clients.
8. Cultivate and maintain relationships with local landlords who agree to participate in the program.
9. Make client referrals for Essential Needs Services, housing and other community resources.
10. Coordinate with the Community Service Office of DSHS regarding client service delivery.
11. Comply with HMIS requirements including data entry and reporting responsibilities.
12. Commit to reporting complete quality data that is timely, truthful and accurate (as per CHG/HEN Guidelines, HEN FCS Guidelines and HMIS User Agreement).
13. Ensure compliance with State confidentiality laws and regulations.
14. Complete all other activities identified by Whatcom County and Commerce as necessary to implement and manage the rental and utility assistance portion of the HEN Program.
15. Have written and available Applicant Denial and Grievance and Termination and Grievance policies and/or procedures for the HEN FCS Program.

#### **B. Essential Needs and Move-in Supplies Assistance**

The Opportunity Council, will be responsible for administration and distribution of essential needs products, to include personal health and hygiene items, cleaning supplies, move-in supplies, or bus passes, and will accordingly:

1. Purchase and distribute essential needs products and move-in supplies to clients eligible for the Housing and Essential Needs (HEN) program.
2. Document client eligibility using DSHS Benefits Verification system.

3. Have written and available Applicant Denial and Grievance and Termination and Grievance policies and/or procedures.
4. Maintain an inventory tracking and tracking of client usage system.
5. Submit an annual HEN Essential Needs Report at the end of each state fiscal year to Whatcom County for submission to Commerce.

### **C. Flexible Funding**

The Opportunity Council will be responsible for administration and provision of Flexible Funding according to Whatcom County and the CHG Guidelines as follows:

Flexible Funding is the provision of goods or payments of expenses not included in other allowable expense categories, which directly help a household to obtain or maintain permanent housing, or meet essential household needs. Flexible Funding purchases require prior approval by the Contract Manager. Documentation of client eligibility and reason for the item purchased are required. Flexible Funding payments are required to be paid to a third party and require documentation for the purpose in the housing stability plan for the client. Note that for the purposes of this contract, Flexible Funding will exclude essential needs items, which are covered under the essential needs assistance budget.

### **IV. Special Conditions**

The Contractor will comply with program requirements, policies and procedures contained in the “Department of Commerce Guidelines for Consolidated Homeless Grant” hereafter referred to as CHG Guidelines located at: <http://www.commerce.wa.gov/serving-communities/homelessness/consolidated-homeless-grant/>. Changes to the CHG Guidelines may be made without contract amendment. The CHG Guidelines will be updated periodically in compliance with changing State requirements. Whenever a revised edition of the CHG Guidelines is available, the County will provide an email notification. The Contractor must inform the County if grant funds are spent on ineligible households or expenses.

### **V. Program Outcomes**

During this contract period, the Contractor is expected to meet the following outcomes:

- A. The Contractor will provide assistance to all HEN eligible households that seek assistance during the contract term provided that HEN rent and utility assistance funds are available. Based on the previous 12-month period, the program is expected to serve at least 182 households between 7/1/2022 – 6/30/2023.
- B. The Contractor will provide assistance to at least 250 HEN-eligible households through the purchase and distribution of essential needs items and cleaning and move-in supplies as the budget for this purpose so allows.
- C. The Contractor will provide assistance for at least 10 households eligible for the HEN Foundational Community Support program with rent assistance and case management between 3/1/23-6/30/23.
- D. Out of a total of at least 10 HEN households served with HEN FCS funding, at least 8 households will attain housing stability by the end of this funding 6/30/23.

### **VI. Reporting Requirements**

System-wide performance measures and benchmarks specific to intervention type (HMIS project type), are outlined in the table found at the link below. CHG Grantees must meet or demonstrate progress towards established performance measure targets by meeting the indicated benchmarks, upon lifting of the temporary suspension of this requirement by Commerce due to COVID-19. Temporary Changes and Suspensions to CHG due to COVID-19 may apply, as indicated at <https://www.commerce.wa.gov/wp-content/uploads/2020/11/hau-ce-performance-chg-temporary-changes-v6.pdf>.

Updates to the CHG System-Wide Mandatory Performance Measures table will be provided periodically by Commerce. Updates will be posted on the Whatcom County Health Department website which can be accessed at: <http://whatcomcounty.us/910/Housing-Program>. Additionally, the Opportunity Council will receive written notification from the County upon notification of updates from Commerce.

The Contractor will submit the following reports on a monthly basis to the County:

- A. Number of HEN eligible households assisted during the current month and how many have been assisted year to date.
- B. Average amount of subsidy per HEN household.
- C. Number of HEN eligible households declined.
- D. Projects falling under the following intervention types and funded by the Consolidated Homeless Grant (CHG), which includes HEN, will be expected to meet or demonstrate progress towards system-wide performance measures as set by the Washington State Department of Commerce.
- E. Number of HEN FCS eligible households assisted with case management and rental assistance during the current month, and how many have been assisted year to date, with HEN FCS Prevention and HEN FCS Rapid Rehousing from 3/1/23-6/30/23.
- F. Number of HEN FCS eligible households who maintained or achieved housing stability by 6/30/23.

Reporting for purchase and distribution of essential needs requires:

- A. The Contractor will submit an Essential Needs Report to the County, at which time it is due as required by Consolidated Homeless Grant guidelines, that identifies the number of people that received Essential Needs products and services each month. The report must answer this question: How many people did you serve with Essential Needs this month? Duplication of people is expected and will be acceptable.

Whatcom County Health Department may update reporting templates or formats during the contract period, and will provide advance notice of new reporting requirements prior to the start of the reporting quarter.

**EXHIBIT "B" – Amendment #2**  
(COMPENSATION)

**I. Budget and Funding**

The source of funding for this contract, in an amount not to exceed \$2,811,264, is from the Washington State Department of Commerce, Consolidated Homeless Grant. Commerce and the State of Washington are not liable for claims or damages arising from Subcontractor's performance of the contract. The budget for this contract is as follows:

<b>HEN PROGRAM BUDGET</b>		
<b>Cost Description*</b>	<b>Documents Required with Each Invoice</b>	<b>Budget</b>
Personnel (HMIS, Case Managers, Coordinated Entry, Support)	Expanded General Ledger (GL) report for the period billed	\$454,086
50% Fringe Benefit Rate	Expanded GL report based on federally approved fringe rate	\$227,043
Direct Program Supplies – Office Space, Telephone, Insurance	Expanded GL report for the period billed	\$25,000
Mileage	Mileage log to include: name of staff member, date of travel, starting point and destination of travel, number of miles traveled. Mileage will be reimbursed at the GSA rate (per <a href="http://www.gsa.gov">www.gsa.gov</a> ).	\$7,688
Travel/Training	Include name of traveler, date, start & end point, and purpose. Receipts required for transportation costs, registration fees, etc. Lodging and meal costs follow federal guidelines ( <a href="http://www.gsa.gov">www.gsa.gov</a> ). Receipts for meals are not required.	\$7,119
<b>Rent Payments and Other Allowable Expenses</b>		
Rent Payments – Includes: Monthly rent and any combination of first and last month's rent and security deposits; Utilities, Arrears and Late Fees; Pro-rated Rent; Hotel/Motel expenses; Lot Rent for RV's & Manufactured Homes for HEN enrolled; Rental Arrears; Late Fees Prior to HEN Enrollment; Permanent Housing Support Expenses (must be paid directly to a third party) for eviction costs/damages to previous units, all in accordance with CHG Guidelines Section 5.1.	Expanded GL with Client ID, payee, amount	\$1,514,673
Landlord Incentives (excludes volunteer incentives), Security Deposits and Landlord Admin. Required Fees		\$65,000
Utility Payments, Arrears (not included with rent), application fees, background/credit check fees, utility deposits (excluding cable), and costs of urinalysis for drug testing of household members if necessary/required for rental housing – in accordance with CHG Guidelines Section 5.1.2.	Expanded GL report for the period billed	\$63,500
Flexible Funding in accordance with CHG Guidelines Section 5.3.3 – Includes goods or payments of expenses not included in other allowable expense categories, which directly help a household to obtain or maintain permanent housing or meet essential household needs. Must be paid directly to a 3 <sup>rd</sup> party and noted in the household's housing stability plan. Excludes essential needs items covered under the essential needs assistance budget below.	Expanded GL with Client ID, payee, amount and documentation of County Contract Administrator's approval.	\$15,000
<b>SUBTOTAL</b>		<b>\$2,379,109</b>
Indirect Costs – 7%**		\$166,537
<b>TOTAL</b>		<b>\$2,545,646</b>



ESSENTIAL NEEDS ASSISTANCE BUDGET		
Cost Description	Documents Required Each Invoice	Budget
Personnel	Expanded GL report for the period billed	\$30,000
Hygiene Product, Cleaning and Move-in Supplies, and Transportation Assistance	GL Detail and Receipts	\$71,000
Insurance/Supplies/Mortgage/Rent		\$400
<b>SUBTOTAL</b>		<b>\$101,400</b>
Indirect Costs – 7% **		\$7,098
<b>Essential Needs TOTAL</b>		<b>\$108,498</b>
FOUNDATIONAL COMMUNITY SUPPORT(FCS) BUDGET (03/01/2023 – 06/30/2023)		
Cost Description	Documents Required Each Invoice	Budget
Personnel	Expanded GL report for the period billed	\$20,168
Rental Assistance (includes Prevention)	Expanded GL with Client ID, payee, amount	\$126,673
<b>SUBTOTAL</b>		<b>\$146,841</b>
Indirect Costs – 7% **		\$10,279
<b>FCS TOTAL</b>		<b>\$157,120</b>
<b>TOTAL CONTRACT AMOUNT</b>		<b>\$2,811,264</b>

\*The Contractor may transfer funds among budget line items in an amount up to 10% of the total budget. Changes to a line item budget that exceed 10% must be approved in writing by the County.

\*\*In no instance shall the indirect cost exceed 7% or fringe benefit rate exceed the current federally approved rate. All allocated direct costs must be based on approved cost allocation plan.

## II. Invoicing

- The Contractor shall submit itemized invoices up to two times per month in a format approved by the County. Invoices should be received no later than the 15<sup>th</sup> of each month for the previous month expenditures. Invoices submitted for payment must include the documentation specified in the tables above.
- Invoices and all invoice-related communication should be sent to [HL-BusinessOffice@co.whatcom.wa.us](mailto:HL-BusinessOffice@co.whatcom.wa.us).
- End of year rent and utility assistance payments will be invoiced and reimbursed based on the date of the rent or utility assistance check issuance.
- Payment by the County will be considered timely if it is made within 30 days of the receipt and acceptance of billing information from the Contractor. The County may withhold payment of an invoice if the Contractor submits it more than 30 days after the expiration of this Contract.
- Invoices must include the following statement, with an authorized signature and date:  
**I certify that the materials have been furnished, the services rendered, or the labor performed as described on this invoice.**
- Duplication of Billed Costs or Payments for Services: The Contractor shall not bill the Health Department for services performed or provided under this contract, and the Health Department shall not pay the Contractor, if the Contractor has been or will be paid by any other source, including grants, for those costs used to perform or provide the services in this contract. The Contractor is responsible for any audit exceptions or disallowed amounts paid as a result of this contract.