

**WHATCOM COUNTY  
CONTRACT INFORMATION SHEET**

Whatcom County Contract Number:  
202206015 – 1

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

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 #:	202206015	

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):
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

Is this contract the result of a RFP or Bid process?	Sole Source	Contract Cost Center:	129100
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If yes, RFP and Bid number(s):		

Is this agreement excluded from E-Verify?	No <input type="checkbox"/>	Yes <input checked="" 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 checked="" 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> 1. Exercising an option contained in a contract previously approved by the council. 2. Contract is for design, construction, r-o-w acquisition, prof. services, or other capital costs approved by council in a capital budget appropriation ordinance. 3. Bid or award is for supplies. 4. Equipment is included in Exhibit "B" of the Budget Ordinance 5. 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.
\$ 57,145	
This Amendment Amount:	
\$ 63,000	
Total Amended Amount:	
\$ \$120,145	

Summary of Scope: This contract provides funding for Lydia Place to operate Heart House, a permanent supportive housing facility with 11 units intended to serve mothers with children experiencing homelessness and integrated with an on-site licensed childcare facility.

Term of Contract:	1 Year	Expiration Date:	12/31/2023
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Contract Routing:	1. Prepared by:	JT	Date:	9/23/2022
	2. Health Budget Approval	KR/JG	Date:	10/31/2022
	3. Attorney signoff:	RB	Date:	11/09/2022
	4. AS Finance reviewed:	Bbennett	Date:	11/14/2022
	5. IT reviewed (if IT related):		Date:	
	6. Contractor Review:		Date:	12/7/2022
	7. Executive Contract Review:		Date:	12/8/2022
	8. Council approved (if necessary):	AB2022-676	Date:	12/06/2022
	9. Executive signed:		Date:	12/9/2022
	10. Original to Council:		Date:	



**MEMORANDUM**

**TO:** Satpal Sidhu, County Executive

**FROM:** Erika Lautenbach, Director

**RE:** Lydia Place – Heart House Operations Contract Amendment #1

**DATE:** December 7, 2022

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Attached is a contract amendment between Whatcom County and Lydia Place for your review and signature.

▪ **Background and Purpose**

This contract provides operational funding, mainly personnel and related costs, for Lydia Place’s permanent supportive housing program known as Heart House. Heart House is an 11-unit housing facility that provides housing to families with children exiting homelessness and includes an on-site and licensed childcare facility. Families will be referred to the facility through the Whatcom Homeless Service Center and will be prioritized based on their vulnerability and barriers to independent housing. Heart House will provide a supportive environment with services to help families heal from past trauma, overcome behavioral health challenges and achieve healthy outcomes for parents and children alike. This amendment extends the contract for an additional year, increases funding to reflect an annual budget, adds new reporting requirements, and updates the County’s Contract Administrator.

▪ **Funding Amount and Source**

Funding for this contract, in an amount not to exceed \$63,000 is provided by HB 1406 (Affordable & Supportive Housing – Sales & Use Tax) Funds. These funds are included in the 2023 budget. Council approval is required as the additional funding provided by this amendment exceeds 10% of the budget authorized by Council on 06/07/2022.

Please contact Ann Beck, Community Services Manager at 360-778-6055 ([ABeck@co.whatcom.wa.us](mailto:ABeck@co.whatcom.wa.us)) or Kathleen Roy, Assistant Director at 360-778-6007 ([KRoy@co.whatcom.wa.us](mailto:KRoy@co.whatcom.wa.us)), if you have any questions or concerns regarding this request.



Whatcom County Contract Number:

202206015 – 1

**WHATCOM COUNTY CONTRACT AMENDMENT  
HEART HOUSE – PERMANENT SUPPORTIVE HOUSING**

**PARTIES:**

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

**AND CONTRACTOR:  
Lydia Place  
PO Box 28487  
Bellingham, WA 98228**

**CONTRACT PERIODS:**

**Original: 06/01/2022 – 12/31/2022  
Amendment #1: 01/01/2023 – 12/31/2023**

**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. Extend the duration and other terms of this contract for 1 year, as per the original contract “General Terms, Section 10.2, Extension”.
2. Amend the original contract “General Terms, Section 37.1, Administration of Contract” and “General Terms, Section 37.2, Notice” to replace the County Contract Administrator, as follows:  
Whatcom County Health Department  
Barbara Johnson-Vinna, Program Specialist  
509 Girard Street  
Bellingham, WA 98225  
360-778-6046  
[BJJohnso@co.whatcom.wa.us](mailto:BJJohnso@co.whatcom.wa.us)
3. Amend Exhibit A – Scope of Work to update reporting requirements.
4. Amend Exhibit B – Compensation to reflect the 2023 budget.
5. Funding for this contract period (01/01/2023 – 12/31/2023) is not to exceed \$63,000.
6. Funding for the total contract period (06/01/2022 – 12/31/2023) is not to exceed \$120,145.
7. All other terms and conditions remain unchanged.
8. The effective start date of the amendment is 01/01/2023.

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.

APPROVAL AS TO PROGRAM: DocuSigned by:  
Ann Beck 12/7/2022  
2B365BB0422344A  
Ann Beck, Community Services Manager Date

DEPARTMENT HEAD APPROVAL: Erika Lautenbach 12/02/2022  
Erika Lautenbach, Health Department Director Date

APPROVAL AS TO FORM: DocuSigned by:  
Royce Buckingham 12/7/2022  
4EE6DDDD0642404  
Royce Buckingham, Senior Civil Deputy Prosecutor Date

FOR THE CONTRACTOR:

<small>DocuSigned by:</small> <u>Emily O'Connor</u> <small>5B8D6ECB89746E</small>	Emily O'Connor, Executive Director	12/8/2022
Contractor Signature	Print Name and Title	Date

FOR WHATCOM COUNTY:

DocuSigned by:  
Satpal Singh Sidhu 12/9/2022  
4192C7C18B664E3  
Satpal Singh Sidhu, County Executive Date

CONTRACTOR INFORMATION:

**Lydia Place**  
PO Box 28487  
Bellingham, WA 98228

**EXHIBIT "A" – Amendment #1**  
(SCOPE OF WORK)

**I. Background**

As outlined in the Whatcom County Strategic Plan to End Homelessness, the housing service continuum for Whatcom County community members relies on a range of interventions to deliver appropriate services based on the assessed needs of households experiencing homelessness. One such strategy, *permanent supportive housing (PSH)*, has not been provided with sufficient capacity to meet the need for households that include children experiencing homelessness. The shortage of PSH units for this population has led to a large and growing backlog of unserved families; as of January 2022, the number of Whatcom County households eligible and waiting for this type of service was at least 68, as reported by the Whatcom Homeless Service Center. The long wait for placement in PSH units increases the amount of time these families spend without safe and stable housing and prolongs their exposure to the harms associated with homelessness, which have been shown to correlate with future homelessness and other adverse health impacts for those children. The goal of this project is to decrease family homelessness immediately and reduce corresponding episodes of new homelessness in future generations.

This contract, supported by HB 1406 funding, will help fund operations for these new units of supportive housing as allowed by RCW 82.14.540.

**II. Definitions**

Permanent Supportive Housing (PSH)	A long-term evidence-based best practice housing solution for vulnerable families with persistent challenges to stable housing. This intervention offers rental assistance as well as case management to support long-term stability and increase wellbeing of the household.
Coordinated Entry	A coordinated entry system assesses households in need of housing services to determine each household's urgency of need as well as the intervention type that would be most appropriate. The coordinated entry system refers households to fill project vacancies as they occur. The system links individual households with partner agencies who provide the direct services for those clients.

**III. Statement of Work**

The Contractor will:

- a. Provide safe and reliable housing for 11 households. Each household will include children experiencing homelessness and be referred by the Whatcom Homeless Service Center's Coordinated Entry referral system.
- b. Provide case management for individual households who will be residing at Heart House to remove barriers to housing stability and improve health and wellbeing for those families. This will include creating housing stability plans to help manage conflict, creating budgets to promote financial well-being and working to resolve debt and/or credit challenges that could make future independent tenancy more likely.
- c. Provide supportive services that facilitate and encourage connections to external community resources including, but not limited to, assistance through Washington State Department of Social and Health Services, medical insurance coverage, behavioral health treatment services, enrollment in childcare for children between one and five years of age, occupational support, and other community engagement activities, as appropriate.

#### **IV. Program Requirements**

- a. Households will only be admitted to the housing units based on referrals from Whatcom County's Coordinated Entry lead agencies. Vulnerable families who are experiencing homelessness will be prioritized.
- b. Ensure that residents understand their rights to file grievances with the Whatcom County Health Department and the Whatcom Homeless Service Center and are provided full access to a grievance filing process.
- c. Provide training to all staff that includes Trauma Informed Care, Cultural Humility, motivational interviewing, and basic first aid.
- d. All households will participate in the Washington State Homeless Management Information System (HMIS). Anonymous participation is acceptable.
- e. As landlord and property manager, Lydia Place will comply with all requirements of Washington State's Landlord Tenant Act laws.
- f. Discharge summaries, including exit destinations for exiting households, will be provided to Whatcom County Health Department within two weeks following the end of each operational quarter.

#### **V. Program Outcomes**

- a. Vacancies will be filled within a month from the previous household's exit date.
- b. Fewer than 10% of household exits will occur before the household has either achieved a minimum of 12 months of housing stability at Heart House or identified an alternative housing arrangement that provides long-term support to the family.

#### **VI. Reporting Requirements**

Current quarterly reporting templates for permanent supportive housing programs may be accessed at: <https://www.whatcomcounty.us/DocumentCenter/View/69030/Permanent-Supportive-Housing-Contract-Quarterly-Report-Template-Fillable-8-22>. Contractors will be notified via email of updates to quarterly reporting templates. Quarterly reports are due on April 15<sup>th</sup>, July 15<sup>th</sup>, October 15<sup>th</sup>, and January 15<sup>th</sup>. 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.

Reports will include:

- a. Number of household units of capacity at the facility.
- b. Number of occupied units on the last day of the quarter.
- c. Number of new admissions during the quarter.
- d. Total number of households that exited the facility and the living situation they exited to.

Additionally, the County is required to report HMIS project expenditures to the Washington State Department of Commerce for their annual report submitted to the Washington State Legislature. When requested, the Contractor shall provide the County with the necessary expenditure information in a timely manner.

**Exhibit B – Amendment #1**  
(COMPENSATION)

**Source of Funding and Budget:** The source of funding for this contract, in an amount not to exceed \$63,000 is HB 1406 – Affordable & Supportive Housing Funds. The budget for this contract is as follows:

*Cost Description	Documents Required with Invoices	Budget
Case Management and Program Management Staff	Approved Composite Billing Rate Worksheet for each staff member and timesheets for the period.	\$52,273
Mileage	Mileage log to include: name of staff member, date of travel, starting point and destination of travel, number of miles traveled, federal reimbursement rate (per <a href="http://www.gsa.gov">www.gsa.gov</a> ) and a brief description of the purpose of travel.	\$1,000
Supplies & Postage	GL Detail; invoices or receipts	\$2,000
Utilities & Phone		\$1,000
Professional Services		\$1,000
<b>SUBTOTAL</b>		<b>\$57,273</b>
Indirect costs at 10% of subtotal		\$5,727
<b>TOTAL BUDGET:</b>		<b>\$63,000</b>

\*Changes to the line item budget that exceed 10% of the line item amount must be approved in writing by the County.

\*\*Under no circumstances shall indirect costs exceed the amount indicated above.

**Invoicing:**

1. The Contractor shall submit itemized invoices on a monthly basis in a format approved by the County. Monthly invoices must be submitted by the 15<sup>th</sup> of the month, following the month of service. Invoices submitted for payment must include the items identified in the table above.
2. The Contractor shall submit invoices to [HL-BusinessOffice@co.whatcom.wa.us](mailto:HL-BusinessOffice@co.whatcom.wa.us).
3. Payment by the County will be considered timely if it is made within 30 days of the receipt and acceptance of billing information from Contractor. The county may withhold payment of an invoice if the Contractor submits it more than 30 days after the expiration of this contract.
4. 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.**
5. Duplication of Billed Costs or Payments for Service: The Contractor shall not bill the County for services performed or provided under this contract, and the County 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.