WHATCOM COUNTY CONTRACT INFORMATION SHEET

Originating Department:			85 Health			
Division/Program: (i.e. Dept. Division and Program)			8560 Communicable Disease / 856010 Communicable Disease Admin			
Contract or Grant Administrator:			Cindy Hollinsworth			
Contractor's / Agency Name:			Northwest Workforce Council			
la this a New Centres	t? If not is this on Amond	mont or Dono	val to an Eviating Cont	ra at 2		
	Is this a New Contract? If not, is this an Amendment or Renewal to an Existing Contract? Yes No ✓ If Amendment or Renewal, (per WCC 3.08.100 (a)) Original Contract #:					Yes ⊠ No □
Yes 🗌 🛛 No 🖂	If Amenament or Ren	ewai, (per vvc	-C 3.08.100 (a)) Orig	inal Contract #:		202010119
Does contract require	Council Approval? Yes	No 🗆	If No, include WC	C:		
	Council Approved Date:		(Exclusions see: What	-0038416	06.010.3	08 090 and 3 08 100)
					.00.010, 0.	
Is this a grant agreem						
Yes 🖂 🛛 No 🗆] If yes, grantor age	ency contract n	iumber(s):	(CFDA#:	
Is this contract grant f	unded?					
Yes No		County grant of	ontract number(s):			
		Journy grant G				
Is this contract the res	sult of a RFP or Bid process?			Contract	Cost	
Yes 🗌 🛛 No 🖸	If yes, RFP and Bid numb	er(s):		Center:		627500
Is this agreement exc	luded from E V/orify?	D 🛛 Yes (☐ If no, include Atta	achmont D Contr	actor Do	claration form
Is this agreement exc	iuded from E-venity?				actor De	
If YES, indicate exclusi						
Professional ser	vices agreement for certified/lic	censed profes	sional.			
Contract work is f	or less than \$100,000.			ommercial off the		
Contract work is f	or less than 120 days.		☐ Work related subcontract less than \$25,000.			
Interlocal Agreem	ent (between Governments).		Public Works -	Local Agency/Fe	ederally F	Funded FHWA.
Contract Amount (sum	of original contract amount and	Council appr	oval required for: all prope	erty leases, contrac	cts or bid	awards exceeding \$40,000,
any prior amendments	-					ase greater than \$10,000 or
any prior amonamento	,	10% of contr	act amount, whichever is	greater, except w	hen:	-
			ing an option contained in			
			ntract is for design, construction, r-o-w acquisition, prof. services, or other capital costs			
Varies depending on n	umber of participants. Not to		ed by council in a capital b	budget appropriatio	on ordinar	ICe.
exceed \$495,000.			ward is for supplies.	"B" of the Budget (Ordinance	2
			pment is included in Exhibit "B" of the Budget Ordinance tract is for manufacturer's technical support and hardware maintenance of electronic			
			s and/or technical support			
			ary software currently use			CO D S H DO DO DE A
Summary of Scope: T	his contract provides reimbursen	nent for employ	yment of eligible disaste	er relief and hum	anitarian	assistance program
participants certified by	the Northwest Workforce Cound	cil.				
Term of Contract:	19 Months		Expiration Date:	05/31/202	2	
	1. Prepared by:	JT			Date:	10/20/2021
Contract Routing:	2. Health Budget Approval	KR/JG			Date:	11/01/2021
	3. Attorney signoff:	RB			Date:	11/03/2021
	4. AS Finance reviewed:	M Caldwell			Date:	11/1/21
	5. IT reviewed (if IT related):				Date:	
	6. Contractor signed:				Date:	
	7. Executive Contract Review:	Sm			Date:	11/24/2021
	8. Council approved (if necessary): AB202	21-662		Date:	11/23/2021
	9. Executive signed:				Date:	11/24/2021
	10. Original to Council:				Date:	

WHATCOM COUNTY Health Department



MEMORANDUM

TO:	Satpal Sidhu, County Executive
FROM:	Erika Lautenbach, Director
RE:	Northwest Workforce Council – Disaster Relief Employment Contract Amendment #4
DATE:	November 24, 2021

Attached is a contract amendment between Whatcom County and Northwest Workforce Council for your review and signature.

Background and Purpose

Northwest Workforce Council (NWC) provides disaster relief and humanitarian assistance employment to minimize the employment and economic impact of the COVID-19 pandemic. NWC certifies eligibility for services under the Workforce Innovation and Opportunity Act COVID-19 Disaster Recovery Subsidized Employment Program and the Health Department temporarily employs eligible participants for various COVID-related positions including Nurses, Case/Contact Investigators, and testing site support staff. NWC will reimburse Whatcom County for the total cost of wages and fringe benefits per participant, for up to eleven positions. This amendment extends the contract through 05/31/2022, increases the maximum reimbursement for all eleven positions from \$330,000 to \$495,000 and increases the overall funding per position from \$30,000 to \$45,000.

Funding Amount and Source

NWC will reimburse Whatcom County for the total cost of wages and fringe benefits for up to eleven participants, at a rate of up to \$45,000 per participant, for a total contract amount not to exceed \$495,000. These funds are included in the 2021-2022 budgets. Council approval is required as additional funding exceeds 10% of the approved budget.

Please contact Cindy Hollinsworth, Communicable Disease & Epidemiology Manager at 360-778-6160 (<u>CHollins@co.whatcom.wa.us</u>) or Kathleen Roy, Assistant Director at 360-778-6007 (<u>KRoy@co.whatcom.wa.us</u>) if you have any questions regarding this agreement.

509 Girard Street Bellingham, WA 98225-4005 360.778.6000 | FAX 360.778.6001 WhatcomCountyHealth WhatcomCoHealth



1500 North State Street Bellingham, WA 98225-4551 360.778.6100 | FAX 360.778.6101 www.whatcomcounty.us/health

Whatcom County Contract Number:

202010119 - 4

WHATCOM COUNTY CONTRACT AMENDMENT

PARTIES: Whatcom County Whatcom County Health Department 509 Girard Street Bellingham, WA 98225

AND CONTRACTOR: Northwest Workforce Council PO Box 2009 Bellingham, WA 98227

CONTRACT PERIODS:

Original:	10/28/2020 – 06/30/2021
Amendment #1:	10/28/2020 – 06/30/2021
Amendment #2:	10/28/2020 – 12/31/2021
Amendment #3:	07/22/2021 – 12/31/2021
Amendment #4:	10/15/2021 – 05/31/2022

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

DESCRIPTION OF AMENDMENT:

- 1. Revise Terms and Conditions Reimbursement/Pay Schedule, as follows:
 - a. The NWC agrees to reimburse the Employer the total cost of each Participant's wage and fringe benefit during the contract performance period for up to eleven positions, in an amount not to exceed \$495,000.
 - b. The parties have agreed that the total compensation payable to the Employer, for satisfactorily accomplishing the work set forth in the related Whatcom County job descriptions, will not exceed \$45,000 per position.
- 2. Funding for the total contract period (10/28/2020 05/31/2022) is not to exceed \$495,000.
- 3. All other terms and conditions remain unchanged.
- 4. The effective start date of the amendment is 10/15/2021.

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.

DEPARTMENT HEAD APPROVAL:	11/24/2021			
Erika Lautenbac	Date			
APPROVAL AS TO FORM: Koya Bukingham	11/24/2021			
Royce Buckingham, Pro	secuting Attorney	Date		
FOR THE CONTRACTOR:				
DocuSigned by: Alex Losmides	Alex Kosmides, Deputy Director	11/24/2021 		
Contractor Signature	Print Name and Title	Date		
FOR WHATCOM COUNTY:				

Docusigned by: Satpal Singh Sidhu 19207018866453	11/24/2021
Satpal Singh Sidhu, County Executive	Date

CONTRACTOR INFORMATION:

Northwest Workforce Council Alex Kosmides, Deputy Director 360-676-3207 <u>Akosmides@workforcenorthwest.org</u>