Whatcom County Contract Number: 202203007 – 1

WHATCOM COUNTY CONTRACT INFORMATION SHEET

Originating Department:			85 Health					
Division/Program: (i.e. Dept. Division and Program)			8530 Community Health / 853020 Healthy Children & Families					
Contract or Grant Administrator:			Kathryn DeFilippo / Judy Ziels					
Contractor's / Agency	Opportunity Council							
Is this a New Contract Yes \(\scale \) No \(\scale \)	to an Existing Contract? Yes ☑ No ☐ 3.08.100 (a)) Original Contract #: 202203007							
Does contract require Council Approval? Yes ⊠ No □ If No, include WCC:								
Already approved? ((Exclusions see: Whatcom County Codes 3.06.010, 3.08.090 and 3.08.100)							
Is this a grant agreen		ncy contract nun	nber(s):		CFD	A#:		
Is this contract grant funded? Yes ☑ No ☐ If yes, Whatcom County grant contract number(s): 202204035								
Is this contract the re Yes ⊠ No [sult of a RFP or Bid process? If yes, RFP and Bid numbe	r(s): 21-5	9		Contract Cos Center:		621200	
Is this agreement excluded from E-Verify? No ⊠ Yes □								
If YES, indicate exclusion(s) below: ☐ Professional services agreement for certified/licensed professional. ☐ Contract work is for less than \$100,000. ☐ Contract work is for less than 120 days. ☐ Work related subcontract less than \$25,000.								
☐ Interlocal Agreen	☐ Public Works - Local Agency/Federally Funded FHWA.							
any prior amendments \$ 77,797 This Amendment Amo \$ 207,350 Total Amended Amount \$ 285,147	ount:	and professiona 10% of contract 1. Exercising 2. Contract is approved b 3. Bid or awa 4. Equipment 5. Contract is systems ar proprietary	I service contract a amount, whicheve an option containe for design, constr by council in a cap rd is for supplies. it is included in Ext for manufacturer ad/or technical sup- software currently	amendmen er is greater ed in a cont uction, r-o-v ital budget a hibit "B" of t s technical so y used by W	ts that have an it; except when a ract previously a wacquisition, proappropriation or appropriation or appropriation and hard of tware maintena whatcom County	increas inprove of, servidinance nance dware dware from	maintenance of electronic om the developer of	
Summary of Scope: T	his contract provides funding for h	ealth, resource	and service navi	gation to p	parents and chi	Idren	prenatal to five years.	
Term of Contract:	16 Months		Expiration Date	e:	07/31/2023			
Onetro at Day (1)	Prepared by:	JT					06/13/2022	
Contract Routing:	2. Health Budget Approval	KR/JG			Da		06/28/2022	
	Attorney signoff:	RB					06/30/2022	
	4. AS Finance reviewed:	bbennett			Da		07/22/2022	
	5. IT reviewed (if IT related):					ite:		
	6. Contractor Program Review:				Da	ite:		
	7. Executive Contract Review:				Da	ite:		
	8. Council approved (if necessary):	AB2022	-424		Da	ite:		
	9. Executive signed:				Da	ite:		
	10. Original to Council:				Da	ite:		

202203007 - 1

WHATCOM COUNTY CONTRACT AMENDMENT

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: 03/01/2022 – 08/31/2022 Amendment #1: 09/01/2022 – 07/31/2023

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

DESCRIPTION OF AMENDMENT:

- 1. Extend the duration and other terms of this contract for 10 months.
- 2. Amend Exhibit A Scope of Work, to include the remainder of the services to be provided through the extended contract period.
- 3. Amend Exhibit B Compensation, to increase funding by \$207,350 to support services performed during the extended contract period.
- 4. Funding for the total contract period (03/01/2022 07/31/2023) is not to exceed \$285,147.
- 5. All other terms and conditions remain unchanged.
- 6. The effective start date of the amendment is 09/01/2022.

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:		
Ann Be	Date	
DEPARTMENT HEAD APPROVAL: Erika L	Date	
APPROVAL AS TO FORM:Royce Bucking	ham, Senior Civil Deputy Prosecutor	Date
FOR THE CONTRACTOR:		
	Greg Winter, Executive Director	ı
Contractor Signature	Print Name and Title	Date
FOR WHATCOM COUNTY:		
Satpal Singh Sidhu, County Executive		Date

CONTRACTOR INFORMATION:

Opportunity Council
1111 Cornwall Avenue
Bellingham, WA 98225
Greg.Winter@oppco.org

EXHIBIT "A" – Amendment #1

(SCOPE OF WORK)

I. Background

The first five years of life are crucial to building a strong foundation. Children learn and grow in relation to the world around them. Supporting safe, stable, nurturing, and loving relationships are foundational for healthy development. All children benefit from an organized system of community resources to help them thrive, like health care, quality early learning experiences, healthy nutrition, and parent support. When these systems are coordinated, it provides ongoing successful outcomes for children's health and well-being.

A local needs assessment identified that families seek a range of services and Whatcom County's systems are challenging to navigate. Both families and providers indicate that having a dedicated service navigation system has been very beneficial for families with a child that has a disability. Survey respondents advocated for increased supports for multi-language families, non-English speaking families, migrant families, and families from diverse backgrounds as well as increased access to service navigation through expanded hours and the availability of multiple communication pathways.

During the duration of this contract, the Opportunity Council will develop expanded navigation and resource referral services that can be seamlessly accessed by families with children prenatal to age five, alongside the Single Entry Access to Services (SEAS) system for children with special needs. It will also work with community collaborators to make sure the pace of expansion implementation assures quality service overall.

The parties will also review planned changes and expansions within this Scope of Services against current best practices in technology security, with legal standards on handling Personal Identifiable Information (PII) and HIPAA-sensitive content, as well as Opportunity Council's Early Learning And Family Services system integrity considerations, ahead of all final operating decisions.

II. Timeline for Work

- A. Activities to be included during the <u>first three months</u> of this contract are:
 - 1. Planning for perinatal mental health intake and referral
 - 2. Recruitment for new supervisor and new navigator
 - 3. Training for perinatal mental health screening and referral
 - 4. Begin conducting intakes and referrals for perinatal mental health concerns
 - 5. Participation in local Help Me Grow planning meetings
 - 6. Planning to increase capacity for real-time response, e-mail and text referrals
- B. Activities to be included during the <u>second three months</u> of this contract are:
 - Continuing to conduct intakes and referrals for perinatal mental health concerns
 - 2. Continuing to participate in local Help Me Grow planning meetings
 - Increased capacity for real-time navigator response
 - 4. Capacity for receiving and responding to e-mail and text referrals
 - 5. Planning for intake and referral of home visiting services
 - 6. Development of a 12-month implementation plan to become a Coordinated Access Point as defined by the Help Me Grow model fidelity guidelines.
- C. The remainder of the start-up activities to be completed by the end of the contract period are:
 - 1. Planning for and provision of intake and referral services for home visiting services for families with children prenatal to age five.

- 2. Planning for and provision of comprehensive resource referral for pregnant and parenting families with children up to age five.
- 3. Demonstrate progress in following the implementation plan to become a Help Me Grow Coordinated Access Point.
- 4. Continued partnership with the Whatcom Resource Information Collaborative to operationalize a collaborative, up-to-date resource list for families with young children.

III. Program Requirements

- A. Ensure that qualified staff members are available to respond to referrals and provide navigation services. Desired qualifications include:
 - 1. Program Supervisor
 - a. A Bachelor's degree in human services (or related discipline).
 - b. An understanding of the local social and health services system.
 - c. Experience supporting and supervising staff.
 - d. A strong history of working in collaboration with community partners.

Service Navigator

- a. Experience working with families of young children.
- b. An understanding of the local social and health services system.
- c. A background in child development preferred, but not required if in possession of other information and referral relevant experience.
- d. The ability to communicate effectively (ideally, in both English and Spanish).
- e. Experience working with people from various cultural, socioeconomic, and educational backgrounds
- B. Work with community partners (specifically, perinatal mental health task force) to develop and implement a training plan for effective intake and referral to services which may include motivational interviewing training, trauma informed care, cultural competencies, and screening and referral best practices.
- C. Notify the County in the event of a change in personnel or in the hours that the referral line is available to the public.
- D. Maintain up to date policies and procedures to ensure quality and consistency of services provided.
- E. Once staffing is in place, answer calls and texts in real time, when possible. Ensure response to families, on average, within one business day.
- F. Ensure barrier-free access to assistance is offered including in-person assistance if requested, language access for those speaking a language other than English, or access to another technology for those with speech and hearing impairments.
- G. Meet with County partners quarterly, to ensure continuity and quality of services.
- H. Maintain effective working relationships with health and social service providers and other referral sources.
- Protect and maintain all confidential information against unauthorized use, access, disclosure, modification, or loss.
- J. Ensure ongoing assessment and quality improvement of program services.
- K. Ensure that personnel providing care navigation have a current background check, free of disqualifying convictions through the Department of Social and Health Services (DSHS) or the Department of Children, Youth and Families (DCYF).

IV. Statement of Work

Once staff are in place and trained, the Contractor will:

A. Provide health and service navigation to ensure the effective and timely connection of parents and children prenatal to five years to perinatal mental health and home visiting services. The breadth of issues covered by navigators and the start of services for each content area will be phased in according to the timeline presented above, unless changes are mutually agreed to in writing by the parties. Navigation services will include:

1. Intake:

- a. Health and service navigation is family-led, identifies and promotes family protective factors, encourages relational health, addresses family needs, and provides a strength-based intake for family service-based and support needs.
- b. Health and service navigation intake protocols will be tailored as needed to connect families to perinatal mental health services and home visiting services.
- c. Service Navigators will follow up with families and providers, ensuring a closed-loop referral, ensuring connections were made, and inquiring if any additional needs arose for initial expanded service navigation. As the SEAS service model expands over time, in collaboration with the Health Department, the parties will refine which level of calls require a formal intake with the associated follow-up protocols and which do not.

2. Communication:

- a. Health and service navigation that is culturally and linguistically adaptive.
- b. Resources will be provided in a variety of languages to accommodate non-native and non-English speakers.
- c. Translation services will be available.
- d. Service Navigators provide a warm hand-off to connect families to trusted services and additional supports.

Capacity:

- a. Service Navigators will have the ability to take referrals and provide information and navigation from a variety of services.
- b. Referrals may be made through fax, phone, email, or text (add email and text capacity by 05/31/2022). Full referral service may require additional, more secure and documentable means beyond the original contact mechanism.
- c. Contact with families will be through the method preferred by the family (fax, phone, email or text).
- d. Service Navigators may partner with the State to ensure SEAS has the most current information for families, e.g., SNAP, Medicaid/Apple Health, etc.
- e. Service Navigators will be supported with appropriate training to provide developmental screening and screening for perinatal mental health conditions.

B. Expand Access to Service Navigation

The current SEAS is staffed 9:00 am – 5:00 pm, Monday through Friday, access to health and service navigation will be available during expanded hours mutually agreed to by the parties with multiple options for connecting, including text or web-based platforms and increasing real-time access to service navigation for families.

C. Develop a Help Me Grow Coordinated Access Point

Washington State has identified Help Me Grow (HMG) as a model for an interconnected relational framework for strengthening the network around providers and families through coordinated care. HMG is a dependable

interconnected framework that puts families first, ensuring resources and supports are accessible to every child and family. The HMG model leverages existing resources to promote cross-sector collaboration to build an effective continuum of care.

The Coordinated Access Point is a pivotal part of the Help Me Grow model. The Contractor will collaborate with other local entities, including the Whatcom County Health Department and the Whatcom Perinatal Mental Health Task Force, to support the expansion of HMG and its fidelity to the core components of the model, including continuous quality assurance and staff support with a focus on the Coordinated Access Point. An implementation plan for becoming the Coordinated Access Point according to the HMG model will be developed by August 31, 2022 Specific tasks to be included in the implementation plan include:

- 1. Assessing programmatic outcomes to ensure that the program is reaching those impacted by inequitable systems and adjust services, as needed.
- 2. Ensuring connection and coordination with local, regional and statewide efforts to coordinate resources for families.
- 3. Partnering with community organizations, HMG action team, local coalitions to promote HMG and partners to improve referral linkage.
- 4. Managing partnerships to support optimal resources linkage for families through outreach, facilitating trainings, and support of other points of entry for families for resource navigation.
- 5. Engaging community partners and families to provide ongoing quality improvement of effectiveness, needs, and opportunities to improve.
- 6. Preparing, tracking, and sharing qualitative and quantitative data with local and statewide partners.
- D. Conduct Outreach and Engagement Activities
 - 1. Promote the expansion of SEAS through the use of printed materials, social media campaigns, peer agency education and personal outreach.
 - 2. Coordinate with the outreach activities of Help Me Grow partners to ensure consistency of messaging.

V. Reporting Requirements

Provide a monthly service data report in a format approved by the County. Report will be submitted monthly with invoice for services and must include the following:

- A. Referral source(s)
- B. Age(s) of child/children
- C. Primary concern(s)
- D. Referral outcome(s)

EXHIBIT "B" (COMPENSATION)

I. <u>Budget and Source of Funding</u>: The source of funding for this contract, in an amount not to exceed \$285,147, is general funds and funding from the City of Bellingham. The budget for this contract is as follows:

*Cost Description	Documents Required with Each Invoice	Budget
Supervisor (1 FTE)		\$172,117
Service Navigator (.6 FTE)		\$66,157
Communications & Technology	GL Detail	\$8,801
Printing & Duplicating	GL Detail	\$2,069
Office Equipment & Supplies		\$775
Postage		\$463
Mileage	Mileage Log to include: name of staff member, date of travel, starting point and end point of destination of travel, number of miles traveled, federal reimbursement rate (per www.gsa.gov) and a brief description of the purpose of travel	\$1,158
Travel/Training – Lodging and meal costs for training are not to exceed the U.S. GSA Domestic Per Diem Rates (www.gsa.gov), specific to location	Ground transportation, coach airfare and ferries will be reimbursed at cost when accompanied by receipts. Reimbursement requests for allowable travel must include name of staff member, dates of travel, starting point and destination, brief description of purpose. Receipts for registration fees or other documentation of professional training expenses. Receipts for meals are not required.	\$3,056
	SUBTOTAL	\$254,596
**Indirect Costs @ 12%		\$30,551
	TOTAL	\$285,147

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

II.Invoicing

- 1. The Contractor shall submit invoices to HL-BusinessOffice@co.whatcom.wa.us.
- 2. The Contractor shall submit itemized invoices on a monthly basis in a format approved by the County. Monthly invoices must be submitted by the 15th of the month following the month of service. Invoices submitted for payment must include the items identified in the table above.
- 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. <u>Duplication of Billed Costs or Payments for Service:</u> 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.

^{**}Indirect costs shall not exceed the federally approved rate.