

**WHATCOM COUNTY
CONTRACT INFORMATION SHEET**

Whatcom County Contract Number:
201811023 - 4

Originating Department:	85 Health
Division/Program: (i.e. Dept. Division and Program)	8550 Human Services / 855060 Substance Abuse Program
Contract or Grant Administrator:	Jackie Mitchell
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 #:	201811023	

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):	201909026
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):	Contract Cost Center:	675600
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			

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 checked="" 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 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):	Council approval required for; all property leases, contracts or bid awards exceeding \$40,000 , and professional service contract amendments that have an increase greater than \$10,000 or 10% of contract amount, whichever is greater, except when: <ol style="list-style-type: none"> 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.
\$ 223,159	
This Amendment Amount:	
\$ 15,000	
Total Amended Amount:	
\$ 238,159	

Summary of Scope: This contract provides up to six months of rental assistance for people with co-occurring or substance use disorders.

Term of Contract:	1 Year	Expiration Date:	06/30/2021
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Contract Routing:	1. Prepared by:	JT	Date:	03/10/2021
	2. Health Budget Approval	KR	Date:	04/19/2021
	3. Attorney signoff:	RB	Date:	04/19/2021
	4. AS Finance reviewed:	M Caldwell	Date:	4/20/21
	5. IT reviewed (if IT related):		Date:	
	6. Contractor signed:		Date:	
	7. Submitted to Exec.:		Date:	
	8. Council approved (if necessary):	AB2021-	Date:	
	9. Executive signed:		Date:	
	10. Original to Council:		Date:	

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: 01/01/2019 – 06/30/2019

Amendment #1: 07/01/2019 – 06/30/2020

Amendment #2: 07/01/2020 – 06/30/2021

Amendment #3: 07/01/2020 – 06/30/2021

Amendment #4: 04/01/2021 – 06/30/2021

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. Amend Exhibit A – Scope of Work, to include a definition of the Blake Decision law suit and CJTA eligibility requirements that have been revised as a result of that suit. This amendment also includes a quarterly reporting schedule and reimbursement of motel stays and damages or repairs. A revised Exhibit A is attached.
2. Amend Exhibit B – Compensation, to increase funding by \$15,000; revised Exhibit B is attached.
3. Funding for this contract period (07/01/2020 – 06/30/2021) is not to exceed \$84,843.
4. Funding for the total contract period (01/01/2019 – 06/30/2021) is not to exceed \$238,159.
5. All other terms and conditions remain unchanged.
6. The effective start date of the amendment is 04/01/2021.

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.

APPROVAL AS TO PROGRAM: _____
Anne Deacon, Human Services Manager Date

DEPARTMENT HEAD APPROVAL: _____
Erika Lautenbach, Health Department Director Date

APPROVAL AS TO FORM: _____
Royce Buckingham, Prosecuting Attorney Date

FOR THE CONTRACTOR:

Greg Winter, Executive Director		
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"
SCOPE OF WORK – Amendment #4

I. Background

The purpose of this contract is to provide up to six months of rental assistance for people with substance use disorders (SUDs) who are in the criminal justice system. Whatcom County lacks housing assistance options for people with SUD who have criminal charges who are homeless and discharging from institutions, or who need a viable clean and sober living environment in order to initiate or maintain recovery.

The consequence of limited access to housing leaves people with SUDs at risk of relapsing and recycling through homelessness and the criminal justice system. This contract will provide people with SUDs (including people with co-occurring mental health disorders) access to rental assistance for up to six months.

II. Definitions

“Blake Decision” – The Washington Supreme Court made a recent ruling in the case of **State v. Blake** (Shannon B.), No. 96873-0. The decision struck down a major law in Washington which criminalized drug possession. The decision will impact many people who have been charged with a simple felony drug charge in the past and the present, and could result in those individuals not receiving services for which they would have been eligible had the charge remained in place.

Criminal Justice Treatment Account (CJTA) – A fund designated by state law to treat certain non-violent drug offenders who have an SUD that if not treated is likely to result in addiction or is already addiction. Eligibility for CJTA is further described in the contract.

Co-Occurring Disorder (COD) — In this contract, COD is used to indicate a instances where both mental health disorder and substance use disorders

Diagnostic and Statistical Manual 5 (DSM5) – The current standard manual used for the classification of and diagnosis of mental disorders.

Serious Mental Illness (SMI) — The term “serious mental illness” consists of DSM-5 diagnosed conditions such as bipolar disorder, schizophrenia, and schizoaffective disorder.

Recovery – A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. (SAMHSA)

Release of Information (ROI) – This is written form for client consent to share information with other people or entities who are involved with the client’s care. ROIs are required by federal regulations such as 42 Part 2 CFR and by Health Insurance and Portability Act (HIPAA) and are designed to protect client confidentiality. (See the following links for more information: <https://www.ecfr.gov/cgi-bin/text-idx?rgn=div5&node=42:1.0.1.1.2> and <https://www.hhs.gov/hipaa/index.html>)

Substance Use Disorder (SUD) – A diagnostic classification in the DSM-5 which combines substance abuse and addiction into a single disorder (or set of disorders) which is measured along a continuum from mild to severe depending on symptoms.

Rental Assistance—Funding provided to support rental needs for individuals served on this contract.

Substance Abuse and Mental Health Administration (SAMHSA) – A federal organization that provides funding, key policy decisions, oversight, data and information related to substance abuse and mental health issues and services.

III. Statement of Work

The Contractor will accept referrals from therapeutic court programs, GRACE Care Coordinators, SUD case managers, and treatment providers for people who have been identified as eligible for housing assistance under CJTA criteria noted below.

Individuals qualify for housing under CJTA if they meet the following conditions:

1. Have a charge filed upon them by a prosecuting attorney in Washington State or a charge which was vacated or expunged due to the Washington Supreme Court Blake Decision.
2. Are a Whatcom County resident.
3. Have a substance use disorder which could worsen if not treated
4. Have completed a course of SUD treatment and need housing for up to six months (A waiver is required for extensions beyond six months) or require housing prior to treatment for the purposes of coordinating care.
5. Must be enrolled in an ongoing outpatient, case management or care coordination program throughout the course of their housing stay.
6. Qualify for income eligibility at or below 220% of Federal Poverty Level, if not on Medicaid.

The Contractor will prioritize referrals in the following order:

- A. Drug Court participants or Mental Health Court members;
- B. Ground Level Response and Coordinated Engagement (GRACE) members, Law Enforcement And Diversion (LEAD) Whatcom Community Detox or SUD treatment providers' clients or other care coordination/case management programs as approved by the Contract Administrator.

Referral Process:

The Contractor may receive referrals for individuals who are screened and assessed by the referent as eligible for CJTA. The Contractor shall work with the County and with referents on a screening form and a referral procedure. The Contractor shall ensure that each referent has a copy of the screening and eligibility criteria, and that referents submit documented eligibility and a release of information to the Contractor.

In addition, the Contractor shall participate in meetings designed to improve each of the following: the referral system, communication between community partners, and discharge procedures. The Contractor will secure brief Memorandums of Agreements (MOA) with referents which outline the referral requirements and any procedures necessary to ensuring a smooth referral process.

IV. Program Requirements

Allowable Expenses –Rental Assistance – The Contractor shall issue rental assistance based on the following:

1. Monthly rent and utilities and any combination of first and last months' rent for up to six (6) months.
 - a. The Contractor may grant a waiver for up to three months at a time, for up to six more months in total. The Contractor will work with the County to ensure criteria are in place for waiver standardization.
 - b. Rent may only be paid one (1) month at a time, although rental arrears, pro-rated rent and last month's may be included with the first month's payment.
2. Security deposits and utility deposits for a household moving into a new unit.
3. CJTA rental assistance may be used for move-in costs including, but not limited to, deposits and first month's

rent associated with housing, including project- or tenant-based housing.

4. Application fees, background and credit check fees for rental housing.
5. Lot rent for RV or manufactured home.
6. If approved by the Contract Administrator, the following may also be provided under this contract:
 - i. Hotel/Motel vouchers.
 - ii. Payment for damages and necessary repairs to hotel/motel rooms or property.

V. Discharge

Once the participant has departed from housing, regardless of the reason, the Contractor will secure a completed discharge form from the referent/case manager. The discharge form serves as a communication tool to help manage rental assistance resources and will contain basic information for tracking outcomes. This form will be developed by the Contractor in partnership with the County within 60 days of the contract execution.

VI. Outcomes & Reporting Requirements

The Contractor will submit a quarterly CJTA Programmatic Treatment Report to the State Health Care Authority Secure File Transfer (SFT) system on the 15th of the month following the end of the quarter. Other instructions are discussed in Exhibit D – Washington State Health Care Authority Data Use, Security, and Confidentiality Requirements.

The following quarterly schedule shows the dates the Treatment Report is due:

1st quarter, July 1-September 30- submitted by October 15th

2nd quarter, October 1-December 1 – submitted by January 15th

3rd quarter, January 1-March 31 – submitted by April 15th

4th quarter, April 1-June 30 – submitted by July 15th

**EXHIBIT “B” – Amendment #4
(COMPENSATION)**

I. **Budget and Source of Funding:** The source of funding for this contract, in the amount not to exceed \$84,843 is the Criminal Justice Treatment Account passed through the Washington State Health Care Authority. The budget for this contract is as follows:

Cost Description	Documents Required Each Invoice	Budget
Rental Assistance—CJTA	Expanded GL Report for the period plus documentation including client ID, payee, and amount of payment. For Rental Assistance-Rent Subsidy, itemize payee for-profit / non-profit status	\$72,283
Coordinated Entry Staff time	Expanded GL Report for the period	\$3,220
Supplies, printing	Expanded GL Report for the period	\$250
Subtotal		\$75,753
Indirect Costs @ 12% (per current cost allocation plan)		\$9,090
TOTAL		\$84,843

The contractor may transfer funds among budget line items in an amount up to 10% of the total budget; however, administration cannot exceed the current approved indirect cost allocation rate. Changes to the line item budget that exceed 10% of the contract amount must be approved in writing by the County.

II. **Invoicing**

1. The Contractor shall submit itemized invoices on a monthly/quarterly basis in a format approved by the County. Monthly invoices must be submitted by the 15th of the month following the month of services. Invoices submitted for payment must include the items identified in the table above.
2. The Contractor shall submit invoices to (include contract/PO #) 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.