WHATCOM COUNTY CONTRACT INFORMATION SHEET

Whatcom County Contract Number: 202001014 – 2

Originating Department:				85 Health							
Division/Program: (i.e. Dept. Division and Program)					8550 Human Services / 855040 Housing						
Contract or Grant Administrator:					Chris D'Onofrio						
Contractor's / Agency Name:					Northwest Youth Services						
											No 🗆
Is this a New Contract? If not, is this an Amendment or Renewa										Yes ⊠	No 🗆
Yes ☐ No ⊠	3.08.100 (a)) Original Contract #: 202001014										
Does contract require Council Approval? Yes ⊠ No □ If No, include WCC:											
AL 1 10 0 11 A 1 D 1						(Exclusions see: Whatcom County Codes 3.06.010, 3.08.090 and 3.08.100)					
					1 1						
Is this a grant agreement?					ala a (/a).		CED 4#.		١.	14 224	
Yes ☐ No ▷	✓ If yes, grantor agency co			y contract number(s):				CFDA#:		14.231	
Is this contract grant f	funded?										
Yes ⊠ No □		f yes, Whatco	om Cour	ty grant con	tract number(s):		2020080	014			
	•			7.0	(/						
Is this contract the res						Contract Cost					,
Yes ☐ No ☑	☐ If yes, RF	P and Bid nu	umber(s)				Center:		6/1	400/122800)
Is this agreement exc	luded from E-Ve	erify?	No ⊠	Yes 🗆	If no, includ	e Attachme	ent D Cont	tractor De	eclara	ation form.	
If YES, indicate exclusional particular		nt for cortific	d/licono	ad professio	anal						
 □ Professional services agreement for certified/licensed professional. □ Contract work is for less than \$100,000. □ Contract for Commercial off the 							a abolf ita	ma /	COTCI		
		•			Contract for Commercial off the shelf items (COTS).						
☐ Contract work is f											
☐ Interlocal Agreem	ieni (between G	overnments)									
Contract Amount:(sum	_	ract amount a			al required for; all						
any prior amendments):					ervice contract amendments that have an increase greater than \$10,000 or					
Ψ 200,000 1 1 Evereiging					t amount, whichever is greater, except when: g an option contained in a contract previously approved by the council.						
This Amendment Amount.				ct is for design, construction, r-o-w acquisition, prof. services, or other capital costs							
\$ 10,000	1000		Щ-		by council in a capital budget appropriation ordinance.						
Total Amended Amount:			3.	3. Bid or award is for supplies.4. Equipment is included in Exhibit "B" of the Budget Ordinance							
\$ 270,000											
			5.		s for manufacturer's technical support and hardware maintenance of electronic						
				nd/or technical support and software maintenance from the developer of software currently used by Whatcom County.							
Summary of Scope: T	his contract prov	vides funding	for the o					<u> </u>	yneri	encina hom	elessness
or housing instability.	riio cortitact prot	viaco idilaling	1101 1110 (poradorror	ino Orodna i loc	n Day Ooo	Ochici ioi	your o	Apont	crioing nom	0100011000
or moderning into adding.											
Term of Contract:	1 Year				Expiration Dat	te:	12/31/202	21			
2	Prepared by:	:	JT		,	2007		Date:	09	/07/2021	
Contract Routing:	Health Budget Approval			KR/JG			Date:	0000000	/15/2021		
-	3. Attorney signoff:			RB			Date:		/17/2021		
4. AS Finance reviewed: M Caldwell			Caldwell				Date:	_	5/21		
5. IT reviewed (if IT related):						Date:					
6 Contractor signed:							Date:				
7. Executive Contract Review:						Date:	10	/6/2021			
							1		8)		
8. Council approved (if necessary): AB2021				-554			Date:	09	/28/2021		
	9. Executive sig	gned:						Date:	10,	/6/2021	
	10. Original to (Council:						Date:	+		
	i i o i original lo l	Journoll.						Date.	1		

WHATCOM COUNTY HEALTH DEPARTMENT



ERIKA LAUTENBACH, DIRECTOR GREG STERN, M.D., HEALTH OFFICER

MEMORANDUM

TO: Satpal Sidhu, County Executive

FROM: Erika Lautenbach, Director

RE: Northwest Youth Services – Ground Floor Day Use Center Contract Amendment #2

DATE: September 29, 2021

Attached is a contract amendment between Whatcom County and Northwest Youth Services Contractor for your review and signature.

Background and Purpose

This contract supports operations at the Ground Floor Day Use Center, an accessible, supportive, and service rich space for youth aged 13 – 24 in Whatcom County who are experiencing homelessness or housing instability. This funding is intended to provide early interventions in young people's lives to promote health, wellbeing, and community connections. This amendment increases funding by \$10,000 for hazard pay and subsequent indirect costs for staff working at the Center during the COVID-19 pandemic.

Funding Amount and Source

Funding for this contract, in an amount not to exceed \$145,000 for this contract period (01/01/2021 – 12/31/2021) and \$270,000 for the entire contract period (01/29/2020 – 12/31/2021), is the County General Fund and the federal Emergency Solutions COVID-19 Grant (CFDA 14.231) passed through the Washington State Department of Commerce. These funds are included in the 2021 budget. Council approval is required as the additional funding provided by this amendment increases the approved budget by more than 10%.

Please contact Ann Beck, Human Services Supervisor at 360-778-6055 (<u>ABeck@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 request.



Whatcom County Contract Number:

202001014 - 2

WHATCOM COUNTY CONTRACT AMENDMENT

PARTIES:

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

AND CONTRACTOR: Northwest Youth Services 108 Prospect Street Bellingham, WA 98225

AMENDMENT NUMBER: 1 CONTRACT PERIODS:

Original: 01/29/2020 – 12/31/2020 Amendment #1: 01/01/2021 – 12/31/2021 Amendment #2: 09/29/2021 – 12/31/2021

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 B Compensation, to increase funding by \$10,000 to support hazard pay for staff providing direct service and subsequent indirect costs.
- 2. Funding for this contract period (01/01/2021 12/31/2021) is not to exceed \$145,000.
- 3. Funding for the total contract period (01/29/2020 12/31/2021) is not to exceed \$270,000.
- 4. All other terms and conditions remain unchanged.
- 5. The effective start date of the amendment is 09/29/2021.

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: Docusigned by: LNN BUL 20205000023244		9/29/2021
Ann Beck, Huma	an Services Supervisor	Date
DEPARTMENT HEAD APPROVAL: FASTERDATE PAGE 1000 PROSTRICTION OF THE	assistant Directorg/29/2021	
Erika Lautenbac	h, Health Department Director	Date
APPROVAL AS TO FORM: ROYU BUKINGHAM 1EESDDBD9542404		9/29/2021
Royce Buckingham, Pro	secuting Attorney	Date
FOR THE CONTRACTOR: Docusigned by: JASON MGIL DAAA4E26B1EDB44C.	Jason McGill, Executive Dire	ctor 10/5/2021
Contractor Signature	Print Name and Title	Date
FOR WHATCOM COUNTY: Docusigned by: Satpal Single Sidle		10/6/2021
Satpal Single Sidler Satpal Singh Sidhu, County Executive	-	Date

CONTRACTOR INFORMATION:

Northwest Youth Services

108 Prospect Street Bellingham, WA 98225 360-734-4720 jasonm@nwys.org

EXHIBIT "B" – Amendment #2 (COMPENSATION)

I. <u>Source of Funding & Budget</u>: The source of funding for this contract, in an amount not to exceed \$145,000, is the County General Fund and the WA State Department of Commerce Emergency Solutions COVID-19 Grant (CFDA 14.231). COMMERCE and the State of Washington are not liable for claims or damages arising from Subcontractor's performance of this contract. The budget for this contract is as follows:

*Cost Description	Documents Required With Each Invoice	Budget			
Personnel: (Director/Supervisor, Ground Floor Manager, Pre Housing Case Manager, PT Youth Advocates (4)	GL Detail including staff member, position, hours worked, and rate of pay	\$62,273			
Program Supplies and Postage		\$7,250			
Occupancy (including utilities)	GL detail	\$5,700			
Maintenance		\$1,100			
Mileage Direct Service Staff Training Travel (including per diem)	Receipts for fees related to registration, training, licenses, and dues. Ground transportation, parking, coach airfare, and ferries will be reimbursed at cost when accompanied by receipts. Reimbursement requests for allowable travel must include name of staff member, copies of mileage records (if applicable), dates of travel, starting point and destination, and a brief description of purpose. Lodging and meal costs for training are not to exceed the U.S. General Services Administration (GSA) Domestic Per Diem rates, specific to location (www.gsa.gov).	\$950			
	SUBTOTAL	\$77,273			
General Fund Administrative Costs** @ 10%					
	General Fund Total Cost	\$85,000			
Personnel – Ground Floor Case Management (ESG Funding)	GL Detail including staff member(s), position, hours worked, and	\$46,729			
Personnel – Hazard Pay for Direct Service Staff	rate of pay	\$9,346			
ESG Administrative Costs** @ 7% - this rate may not be exceeded					
ESG Total Cost					
	TOTAL BUDGET	\$145,000			

^{*}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 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.

^{**}Under no circumstances shall the administrative rates exceed the amounts indicated in the table above.

- 2. The Contractor shall submit invoices to 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 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.
- 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 has been 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.