## WHATCOM COUNTY **CONTRACT INFORMATION SHEET**

Whatcom County Contract Number: 201805015 – 10

Originating Department:					85 Health									
Division/Program: (i.e. Dept. Division and Program)						8550 Human Services / 855040 Housing Program								
Contract or Grant Administrator:						Barbara Johnson-Vinna								
Contractor's / Agency Name:						Opportunity Council								
Is this a New Contract? If not, is this an Amendment or Renewal					ewal	I to an Existing Contract?					Yes ⊠	No □		
Yes ☐ No ☒ If Amendment or Renewal, (per WCC					VCC					05015				
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)							
								<u> </u>						
Is this a grant agreement?         Yes □       No ⊠       If yes, grantor agency contract nun				nber(s): CFDA#:										
Yes \( \square\) No \( \square\)		i i yes, granic	or agend	cy cc	muac	l Hull	iber(s).			CFL	JH#.			
Is this contract grant	funded?													
Yes ⊠ No □		If yes, Whato	com Co	unty	grant	cont	tract number(s): 202107011							
Is this contract the re-	sult of a RFP	or Rid process	:?				Contract Cost							
Yes \( \square\) No \( \square\)		RFP and Bid n		(s)·						nter:	122600			
							1							
Is this agreement exc	cluded from E	-Verity?	No	$\boxtimes$	Yes	<u> </u>								
If YES, indicate exclus	ion(s) below:													
□ Professional ser	vices agreer	nent for certifi	ed/lice	nsed	l profe	essio	nal.							
☐ Contract work is							☐ Contract for Commercial off the shelf items (COTS).							
☐ Contract work is							☐ Work related subcontract less than \$25,000.							
☐ Interlocal Agreem	nent (betweer	n Governments	S).				☐ Public Works - Local Agency/Federally Funded FHWA.							
Contract Amount:(sum	of original co	ntract amount	and				al required for; all							
any prior amendments	):						I service contract					ase g	reater than	\$10,000 or
\$ 6,704,111.50				10% 1.			amount, whichev					wad h	y the counc	1
This Amendment Amo	unt:			2.			an option contained in a contract previously approved by the council.  s for design, construction, r-o-w acquisition, prof. services, or other capital costs							
\$   503,370.							by council in a capital budget appropriation ordinance.							
Total Amended Amour	nt:			3.			vard is for supplies.							
\$ 7,207,481.50				4.			nt is included in Exhibit "B" of the Budget Ordinance							
					s for manufacturer's technical support and hardware maintenance of electronic ind/or technical support and software maintenance from the developer of									
					software currently used by Whatcom County.									
Summary of Scope: T	his contract fo	unds programn	natic ar	nd ac								e Ho	using and E	Essential
Needs (HEN) Program	and the distr	ibution of renta	al and u	itility	assist	tance	subsidies to el	igible pa	ticipan	nts.				
						1		<u> </u>	1 00/0					
Term of Contract:	1 Year	1		<u> </u>			Expiration Dat	e:	06/3	30/2022	. 1 .	07/0	20/0004	
Contract Routing:	1. Prepared	<u> </u>		JT (T							ate:		20/2021	
Contract reduing.				KR/JG				ate:		29/2021				
	3. Attorney s	-		RB	.1.1						ate:		01/2021	
4. AS Finance reviewed: M Caldwell			l				ate: ate:	10/	12/21					
<ul><li>5. IT reviewed (if IT related):</li><li>6. Contractor signed:</li></ul>							ate:							
6. Contractor signed: 7. Executive Contract Review:								ate:						
7. Executive Contract Review:								aio.						
Council approved (if necessary):  AB2021-				595			D	ate:						
9. Executive signed:							D	ate:						
	10. Original	to Council:								D	ate:			

201805015 - 10

#### 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:** 

Amendment #4: 03/15/2019 - 06/30/2019 Amendment #5: 07/01/2019 - 06/30/2020

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:
  - a. Lower the number of eligible households receiving essential needs as the Opportunity Council has increased their purchases of move-in kits rather than filling monthly bags of essential needs.
  - b. Increase the number of eligible households receiving case management and rental assistance. This number is only slightly higher as less households are exiting the HEN Program and motel stays are being extended due to COVID and the lack of affordable housing.
- 2. Amend Exhibit B Compensation, to increase funding by \$503,370 to support additional personnel costs, operations, rent and related costs, and subsequently, increased indirect costs.
- 3. Funding for this contract period (07/01/2021 06/30/2022) is not to exceed \$2,540,694.
- 4. Funding for the total contract period (07/01/2018 06/30/2022) is not to exceed \$7,207,481.50.
- 5. All other terms and conditions remain unchanged.
- The effective start date of the amendment is 07/01/2021.

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:		
Ann Beck,	Date	
DEPARTMENT HEAD APPROVAL:  Erika Laute	Date	
APPROVAL AS TO FORM:	n, Prosecuting Attorney	Date
FOR THE CONTRACTOR:		
	Greg Winter, Executive Director	I
Contractor Signature	Print Name and Title	Date
FOR WHATCOM COUNTY:		
Satpal Singh Sidhu, County Executive	<del></del>	Date

## **CONTRACTOR INFORMATION:**

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

## EXHIBIT "A" – Amendment #10

(SCOPE OF WORK)

## I. Background

The Housing and Essential Needs (HEN) is one of three programs created by Engrossed Senate House Bill 2082 which terminated the Disability Lifeline (DL) Program. HEN funds are part of Washington State Department of Commerce (Commerce) Consolidated Homeless Grant (CHG) and are intended to provide rental assistance, case management, utility assistance and essential needs for Medical Care Services recipients whose eligibility is determined by the Department of Social and Health Services (DSHS). The Opportunity Council's Whatcom Homeless Service Center (WHSC) is a housing services program that serves as the coordinated entry for homelessness prevention and re-housing services for Whatcom County residents. The Community Services Division of the Opportunity Council oversees and administers housing case management and related programs. The WHSC administers HEN rental and utility assistance in coordination with Community Services. Community Services administers case management services for the HEN Program and the purchasing and distribution of Essential Needs products for HEN eligible clients. The WHSC manages the Homeless Management Information Services (HMIS) for the County and is responsible for the HMIS requirements of the HEN Program. People eligible to receive HEN rental and utility assistance, and Essential Needs items, will be served as long as funding is available and within the designated program requirements.

#### II. Project Description and Design

Housing and Essential Needs funds are limited to providing rental assistance, case management, utility assistance and essential needs for Washington Apple Health (Medicaid) recipients who are experiencing homelessness, or at substantial risk of becoming homeless and whose eligibility is determined by DSHS. The HEN Program is not intended to provide long term support for households, nor will it be able to address all the financial and supportive service needs of households that affect housing stability, nor will it be able to serve all those who are eligible. WHSC serves as the administrative entity for the rental and utility assistance, while the Community Services Division administers case management and the purchasing and distribution of essential needs products and transportation assistance, for eligible individuals. The WHSC and Community Services will staff the program with program operations and case management staff that are funded by the Contract and are responsible for program implementation.

Due to a change in state law in March of 2018, expansion of HEN eligibility now includes Aged, Blind, or Disabled (ABD) recipients, and those who DSHS has determined to be incapacitated due to substance use. HEN providers are expected to prioritize those who are HEN-eligible who have the greatest need, including prioritizing people experiencing homelessness. Guidance from Commerce on prioritization of HEN-eligible clients indicates the following factors must be used to determine greatest need to include, but not be limited to: unsheltered homelessness, chronic homelessness, and length of time homeless. Additional guidance on prioritization is available in the Washington State Coordinated Entry Guidelines, Section 4, and within the Consolidated Homeless Grant guidelines.

#### III. Statement of Work

#### A. HEN Rental & Utility Assistance and Case Management Services

The Contractor will be responsible for programmatic and administrative services associated with the operation of the HEN Program. Programmatic and administrative services include all activities necessary to operate the WHSC and Community Services in accordance with the requirements set forth in the Administrative Requirements and Guidelines for the CHG as more fully described in Section IV: Special Conditions, below.

The Contractor will:

- 1. Commit to efforts to reducing and ending homelessness in Whatcom County by:
  - a. Prioritizing unsheltered homeless households for services (as per CHG Guidelines).
  - b. Assessing each household's housing needs and facilitating housing stability with the goal of obtaining or maintaining permanent housing (as per CHG Guidelines).
  - Employing a progressive engagement service model.
- 2. Provide direct services to individuals whose eligibility is noted in the DSHS Benefits Verification System (BVS).
- 3. Document client eligibility in client files.

- 4. Authorize and issue rental and utility assistance subsidies in a timely manner.
- 5. Track and report rental and utility assistance subsidies.
- 6. Support households in obtaining or maintaining permanent housing. This may include payment of eviction, attorney, or collections fees for previous rental damages, or move in kits. Funding for these expenses must be paid directly to a third party on behalf of the household and noted in a household's housing stability plan.
- 7. Coordinate with existing housing providers and landlords to identify and secure permanent housing placements for clients.
- 8. Cultivate and maintain relationships with local landlords who agree to participate in the program.
- 9. Make client referrals for Essential Needs Services, housing and other community resources.
- 10. Coordinate with the Community Service Office of DSHS regarding client service delivery.
- 11. Comply with HMIS requirements including data entry and reporting responsibilities.
- 12. Commit to reporting complete quality data that is timely, truthful and accurate (as per CHG/HEN Guidelines and HMIS User Agreement).
- 13. Ensure compliance with State confidentiality laws and regulations.
- 14. Complete all other activities identified by Whatcom County and Commerce as necessary to implement and manage the rental and utility assistance portion of the HEN Program.

## B. Essential Needs and Move-in Supplies Assistance

The Contractor, specifically the Community Services Division of the Opportunity Council, will be responsible for administration and distribution of essential needs products, to include personal health and hygiene items, cleaning supplies, move-in supplies, or bus passes, and will accordingly:

- Purchase and distribute essential needs products and move-in supplies to clients eligible for the Housing and Essential Needs (HEN) program.
- 2. Document client eligibility using DSHS Benefits Verification system.
- 3. Have written and available Applicant Denial and Grievance and Termination and Grievance policies and/or procedures.
- 4. Maintain an inventory tracking and tracking of client usage system.

## IV. Special Conditions

The Contractor will comply with program requirements, policies and procedures contained in the "Department of Commerce Guidelines for Consolidated Homeless Grant" hereafter referred to as CHG Guidelines located at: <a href="http://www.commerce.wa.gov/serving-communities/homelessness/consolidated-homeless-grant/">http://www.commerce.wa.gov/serving-communities/homelessness/consolidated-homeless-grant/</a>. Changes to the CHG Guidelines may be made without contract amendment. The CHG Guidelines will be updated periodically in compliance with changing State requirements. Whenever a revised edition of the CHG Guidelines is available, the County will provide an email notification.

Consequences of non-compliance with CHG Guidelines, as per the Department of Commerce for Grantees, are listed below and will be passed on to CHG Subgrantees:

- If Commerce determines that a Grantee is failing to comply with the Guidelines, Terms and Conditions, Commerce
  will notify Grantee that Grantee will receive technical assistance and be required to respond to a corrective action
  plan to address and remedy the noncompliance. The technical assistance and corrective action plan to address
  and remedy the noncompliance will be passed on to the Subgrantee by the County.
- 2. If the Grantee is still out of compliance after the technical assistance, Commerce may move the Grantee into a probationary period with a second corrective action plan and may reduce the grant total by 20%. The second corrective action plan will be passed on to the Subgrantee by the County.
- 3. If the Grantee remains out of compliance after the probation period, Commerce may terminate the grant, per the General Terms and Conditions TERMINATION FOR CAUSE.

#### V. Program Outcomes

During this contract period, the Contractor is expected to meet the following outcomes:

- A. The Contractor will provide assistance to all HEN eligible households that seek assistance during the contract term providing that HEN rent and utility assistance funds are available. Based on the previous 12-month period, the program is expected to serve an estimated 230 households between 7/1/2021 6/30/2022.
- B. The Contractor will provide assistance to approximately 350 HEN-eligible households through the purchase and distribution of essential needs items and cleaning and move-in supplies as the budget for this purpose so allows.

#### VI. Reporting Requirements

System-wide performance measures and benchmarks specific to intervention type (HMIS project type), are outlined in the table found at the link below. CHG Grantees must meet or demonstrate progress towards established performance measure targets by meeting the indicated benchmarks. Targeted Prevention performance measures are exempted from the "Consequences of non-compliance" as per Commerce, listed in Section IV: Special Conditions above, wherein "Grantee" refers to the County being the CHG recipient.

Updates to the CHG System-Wide Mandatory Performance Measures table will be provided periodically by Commerce. Updates will be posted on the Whatcom County Health Department website which can be accessed at: <a href="http://whatcomcounty.us/910/Housing-Program">http://whatcomcounty.us/910/Housing-Program</a>. Additionally, the Opportunity Council will receive written notification from the County upon notification of updates from Commerce.

The Contractor will submit the following reports on a monthly basis to the County:

- A. Number of HEN eligible households assisted during the current month and how many have been assisted year to date.
- B. Average amount of subsidy per HEN household.
- C. Number of HEN eligible households declined.
- D. Projects falling under the following intervention types and funded by the Consolidated Homeless Grant (CHG), which includes HEN, will be expected to meet or demonstrate progress towards system-wide performance measures as set by the Washington State Department of Commerce.

Reporting for purchase and distribution of essential needs requires:

A. The Contractor will submit an Essential Needs Report to the County, at which time it is due as required by Consolidated Homeless Grant guidelines, that identifies the number of people that received Essential Needs products and services each month. The report must answer this question: How many people did you serve with Essential Needs this month? Duplication of people is expected and will be acceptable.

# EXHIBIT "B" – Amendment #10 (COMPENSATION)

## I. Budget and Funding

The source of funding for this contract, in an amount not to exceed \$2,540,694, is from the Washington State Department of Commerce, Consolidated Homeless Grant. Commerce and the State of Washington are not liable for claims or damages arising from Subcontractor's performance of the contract. The budget for this contract is as follows:

ŀ	IEN PROGRAM BUDG	GET 07/01/2021 - 06/30/2022		
Cost Description*	cost Description* Documents Required with Each Invo			
Personnel (HMIS, Case Managers, Coordinated Entry, Support)	•	edger (GL) report for the period billed	\$450,534	
50% Fringe Benefit Rate	Expanded GL report	based on federally approved fringe rate	\$225,267	
Direct Program Supplies – Office Space, Telephone, Insurance	Expanded GL report	for the period billed	\$25,000	
Mileage	starting point and des	e: name of staff member, date of travel, stination of travel, number of miles traveled. oursed at the GSA rate (per <a href="www.gsa.gov">www.gsa.gov</a> ).	\$7,688	
Travel/Training	Include name of trave Receipts required for Lodging and meal co Receipts for meals at	\$7,119		
		SUBTOTAL	\$715,608	
Indirect Costs – 7% **	•		\$50,093	
		TOTAL	\$765,701	
	Rent	Payments		
Rent Payments – Includes: Monthly rent and any combination or rent and security deposits; Utilities, Arrears and Late Fees; Pro-rated Rent; Hotel/Motel expense & Manufactured Homes for HEN enr Late Fees Prior to HEN Enrollment; Support Expenses (must be paid dir for eviction costs/damages to previous accordance with CHG Guidelines Se	es; Lot Rent for RV's colled; Rental Arrears; Permanent Housing ectly to a third party) us units, all in	Expanded GL with Client ID, payee, amount	\$1,449,972	
Landlord Incentives (excludes volun Security Deposits and Landlord Adm		Expanded GL report for the period billed	\$60,000	
,	•	ousing Costs		
Utility Payments, Arrears (not includ			¢50,000	
Application Fees, Background/Credideposits (excluding cable), and cost testing of household members if necessarial housing in accordance with Cosection 5.3	s of urinalysis for drug essary/required for	Expanded GL report for the period billed	\$50,000 \$3,500	
		SUBTOTAL	\$1,563,472	
Indirect Costs – 7%**			\$109,443	
		TOTAL	\$1,672,915	

ESSENTIAL NEEDS ASSISTANCE BUDGET 07/01/2021 - 06/30/2022						
Cost Description	Budget					
Personnel	GL Detail	\$30,000				
Hygiene Product, Cleaning and Move-in Supplies, and Transportation Assistance	GL Detail and Receipts	\$65,000				
Insurance/Supplies/Mortgage/Rent		\$400				
	SUBTOTAL	\$95,400				
Indirect Costs – 7% **		\$6,678				
	Essential Needs TOTAL	\$102,078				
	TOTAL CONTRACT AMOUNT	\$2,540,694				

<sup>\*</sup>The Contractor may transfer funds among budget line items within each program budget only (HEN, Rent, or Essential Needs Assistance) in an amount up to 10% of the total program budget. Changes to a line item budget that exceed 10% must be approved in writing by the County.

#### II. Invoicing

- 1. The Contractor shall submit itemized invoices up to two times per month in a format approved by the County. Invoices should be received no later than the 15<sup>th</sup> of each month for the previous month expenditures. Invoices submitted for payment must include the documentation specified in the tables above.
- 2. Invoices and all invoice-related communication should be sent to <a href="https://example.co.uk/html/>
  HL-BusinessOffice@co.uk/hatcom.wa.us">https://example.co.uk/hatcom.wa.us</a>.
- 3. End of year rent and utility assistance payments will be invoiced and reimbursed based on the date of the rent or utility assistance check issuance.
- 4. 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.
- 5. 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.
- 6. <u>Duplication of Billed Costs or Payments for Services</u>: The Contractor shall not bill the Health Department for services performed or provided under this contract, and the Health Department 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.

<sup>\*\*</sup>In no instance shall the indirect cost exceed 7% or fringe benefit rate exceed the current federally approved rate. All allocated direct costs must be based on approved cost allocation plan.