

April 15, 2021

Housing Authority Board of Commissioners  
Clackamas County

Members of the Board:

Approval to execute Amendment #1 to the contract between Housing Authority of Clackamas County and Do Good Multnomah for case management of homeless individuals and families participating in the “Metro 300” program

<b>Purpose/Outcomes</b>	Approval to execute Amendment #1 to the contract between Housing Authority of Clackamas County and Do Good Multnomah for case management of homeless individuals and families participating in the “Metro 300” program
<b>Dollar Amount and Fiscal Impact</b>	Total contract value increasing by \$75,000
<b>Funding Source</b>	Health Share of Oregon
<b>Duration</b>	April 15 - June 30, 2021
<b>Previous Board Action</b>	Health Share Grant Agreement approved by HACC Board February 27, 2020
<b>Strategic Plan Alignment</b>	<ol style="list-style-type: none"> <li>1. Ensure safe, healthy and secure communities</li> <li>2. Build public trust through good government</li> </ol>
<b>Counsel Review</b>	Andrew Naylor, February 17, 2021
<b>Contact Person</b>	Jill Smith, HACC Executive Director (503) 502-9278
<b>Contract No.</b>	Contract No. 10090

**BACKGROUND:**

The Housing Authority of Clackamas County (HACC), a Division of Health, Housing and Human Services Department is requesting approval to execute Amendment #1 to the contract between HACC and Do Good Multnomah, for case management services of forty (40) additional families who are experiencing homelessness and have a disabling health condition, through the Health Share of Oregon Pilot Rent Assistance Program referred to as “Metro 300.”

The Grant Agreement with Health Share to administer a pilot rent assistance housing program “Metro 300” was approved and executed by the HACC Board on February 27, 2020. The original agreement totaled \$1,333,333, to serve 80 homeless households with rent assistance for one (1) year. The agreement required HACC to contract for case management services to assist families in finding and maintaining housing while working to increase their income. Do Good Multnomah has been successful in meeting the goals of the program. Families referred to the Metro 300 program are homeless, medically vulnerable and often come with high rental barriers. Do Good Multnomah has been successful in housing 67 individuals and families and 13 are working on placements, which meets our goal of housing eighty (80) vulnerable homeless residents of Clackamas County.

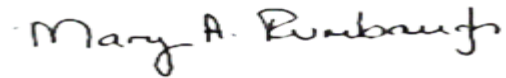
The grant has funds remaining at the end of its term, so HACC negotiated to use the remaining grant funds to serve an additional 40 homeless households by July 1, 2021. Given the aggressive goal is less than 3 months, it requires Do Good Multnomah to increase staffing in the short term. Also, Do Good Multnomah is familiar with the program, eligibility, screening criteria and working with all the partners to get these vulnerable folks housed.

For those households not yet ready to graduate off of assistance, we hope to transition them into the new Supportive Housing Services Program known as the Regional Long-Term Rental Assistance (RLRA) program if they require assistance on a more long term basis.

**RECOMMENDATION:**

Staff recommends that the Board approve the Contract Amendment between Do Good Multnomah and HACC and authorize Commissioner Tootie Smith, Chair to sign the amendment.

Respectfully submitted,

A handwritten signature in black ink that reads "Mary A. Rumbaugh". The signature is written in a cursive style.

*For Rod Cook*  
Rodney Cook, Interim Director  
Health, Housing and Human Services

## First Amendment to Agency Services Agreement between Housing Authority of Clackamas County and Do Good Multnomah

This Amendment #1 is entered into between Housing Authority of Clackamas County, a public corporation organized under ORS Chapter 456 ("HACC") and Do Good Multnomah ("Do Good") and shall become part of the contract No. 10090 ("Agreement") entered into by and between the parties on April 8, 2020.

The Purpose of this Amendment #1 is to make the following changes to the Agreement:

**1. Section 2, SCOPE OF COOPERATION, is hereby amended to add the following additional Work:**

**A. Do Good agrees to:**

1. Perform the Work described in Exhibit A (revised) of this Agreement ("Scope of Work")
2. Provide full-time case management to participants of Metro 300, further described in Exhibit B (revised) of this Agreement ("Metro 300 Description")
3. Work in partnership with the Coordinated Housing Access and Housing Authority of Clackamas County
4. Submit monthly invoices to HACC for payment of services delivered

**2. Section 3, Terms of Agreement, is hereby amended as follows:**

The term of this Agreement is extended from March 31, 2021, to **June 30, 2021**.

**3. Section 4, Budget and Financial, is hereby amended as follows:** HACC agrees to pay Do Good, for the additional Work authorized under this Amendment #1, a sum not to exceed \$75,000.00.

ORIGINAL CONTRACT	\$ 50,000.00
<b><u>AMENDMENT #1</u></b>	<b><u>\$ 75,000.00</u></b>
<b>TOTAL AMENDED CONTRACT</b>	<b>\$ 125,000.00</b>

Except as expressly amended above, all other terms and conditions of the Agreement shall remain in full force and effect. By signature below, the parties agree to this Amendment #1, effective upon the date of the last signature below.

**HOUSING AUTHORITY OF  
CLACKAMAS COUNTY BOARD**  
 Commissioner Tootie Smith, Chair  
 Commissioner Sonya Fischer  
 Commissioner Mark Shull  
 Commissioner Paul Savas  
 Commissioner Martha Schrader  
 Resident Commissioner Ann Leenstra

**Do Good Multnomah**

DocuSigned by:

*Chris Aiosa*

Executive Director

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Commissioner Tootie Smith, Chair

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Chris Aiosa, Executive Director

3/30/2021

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**Exhibit A**  
**Scope of Services**

**A. Under this Agreement the responsibilities of Do Good shall be as follows:**

1. Provide supportive services for up to one hundred twenty (120) households. Do Good staff will be part of a team of additional case managers serving one hundred twenty households.
2. Work with HACC to allow participant to obtain and maintain housing with service connections.
3. Provide for the staffing and supervision of a Case Manager for the Metro 300 grant.
4. Housing search and placement services
5. Metro 300 services to include:
  - a. HMIS intake, annual, and exit paperwork and data entry requirements
  - b. Help clients complete all required documentation for the program.
  - c. Refer people qualified to receive metro 300 assistance and provide them with case management that includes housing placement and ongoing stabilization services as needed.
  - d. Provide housing search and placement services and housing stabilization services to qualified referred clients (some referrals may not come with case management). Housing must pass Housing Quality Standards and must be affordable given the tenant's income and the Housing Authority's payment standards and utility allowances.
  - e. Participate in regular meetings with partners and HACC to share updates, successes and challenges and work to provide a coordinated system.
  - f. Provide mediation between the property management, landlord or owner and the tenant that will help stabilize their relationship and maintain stable housing for the household.
  - g. Provide interpretation services between the Housing Authority and the client.
  - h. Help successful placements to access services as needed on an individual basis.
  - i. Ensure all referrals understand that they are receiving limited 12 months of rent assistance and help them to identify income and the potential to transition zero assistance after receiving 12 full months of rent assistance.
  - j. Work closely with landlords to stabilize participants as needed, act as a direct contact for the landlord at the time of move in and ongoing in case of challenges.
6. The primary source of participants will be screened and referred through the H3S Coordinated Housing Access (CHA). Work with CHA and HACC to help identify candidates that should be referred to the Metro 300 program.
7. Participate in Metro 300 team staffing meetings.
8. Provide appropriate documentation of program participation and material for payment requests.

**Exhibit B**  
**Metro 300 Program Description**

**1. Program Description**

The Metro 300 Grant is designed to provide funding to each of the three counties in the Portland metro area with the goal of housing 300 qualifying seniors in the region within 4 months of execution of this Agreement. The funding originates from the Metro 300 Grant to Health Share on behalf of the Regional Supportive Housing Impact Fund (RSHIF). Health Share is administering the grants in collaboration with Kaiser and the three counties.

Under the Grant Agreement between HACC and Healthshare, HACC will strive to house 120 households during the 2020-21 calendar year within Clackamas Counties. This number may be adjusted with the written consent of Health Share.

Participants housed using funds granted pursuant to this Agreement must meet the following criteria:

- A member of the household must be age 50 or above and homeless. Homeless is defined as “literally homeless” using the HUD definition, with the following exceptions:
  - No restriction on 90 or more days in an institution,
  - No restriction on those fleeing domestic violence, and
- One or more disabling conditions and/or referral from one or more systems of care/institutions. These may include, but are not limited to, the Recuperative Care Program (RCP), Assertive Community Treatment (ACT), hospital, Skilled Nursing Facility (SNF), Coordinated Entry/Coordinated Access waitlists, Federally Qualified Health Centers, or Warming shelters.

Note: those participants who are chronically homeless at entry into this rapid rehousing program will maintain their chronic homeless status (and thus their eligibility for permanent supportive housing units should they become available).

**2. Program Services**

HACC will utilize grant funding to house qualifying individuals. Project funding can be deployed flexibly to deliver anything necessary for qualifying individuals for housing stability, including barrier reduction, housing location and move-in supports, supportive services, rapid rehousing and rent assistance, housing search assistance, and ongoing resident services focused on housing stabilization.

While HACC can leverage and braid this flexible funding with other sources, the expectation is that the Kaiser Permanente funds will, to the extent possible, serve those qualifying individuals who otherwise would remain unhoused, and the grant funds shall not be used to replace other funding.

In Clackamas County, the project will work closely with existing partners for referrals. These partners include Continuum of Care providers, Law Enforcement Assisted Diversion Program (LEAD), Better Outcome through Bridges (BOB), Health Centers and Oregon Human Development Corporation (Oregon HDC). Efforts are also already underway to partner in new and different ways for this population with the Health, Housing and Human Services Department (H3S).

All participants shall be asked to complete an HMIS Entry form so that client data can be tracked and seen by the referring agency, any third-party housing search agency, and the county lead agency to monitor progress with service connections, housing stability and income. Each county will strive to ensure program participants receive housing search and placement support along with retention services focused on housing stabilization, based on individual need.

**3. Program Reporting**

Each county will manage and track the grant funding, which will provide housing financial assistance for each qualifying individual based on their individualized housing plan. HACC will monitor and report progress to an oversight committee that will include representatives from Health Share, Kaiser

Permanente, and the each of the three Counties. Summary reports will be produced by HACC using a standard HMIS reporting template submitted to Health Share monthly and will include:

- Number of qualifying individuals housed in the previous month
- Number of qualifying individuals in housing search (i.e., have been referred/entered but not yet housed)
- Standard demographics in HMIS report (race, ethnicity, gender, age categories)
- Total number of qualifying individuals housed since project launch
- Referral source breakdown for all qualifying individuals served to date
- Housing placement breakdown for all qualifying individuals served to date using HMIS standard categories

On a quarterly basis, and to the extent permitted by applicable law, HACC will submit individually identified data to Health Share that includes, at a minimum, the following fields:

- Client name (first, last)
- Client date of birth
- Standard demographics in HMIS report (race, ethnicity, gender, age categories)
- Date housed
- Referral source (e.g. hospital, emergency department, RCP, shelters, etc.)
- Housing placement type using HMIS standard categories

Prior to the release of the second and third payments, HACC shall have submitted all reports due, and a financial report, in a form acceptable to Health Share, that includes amounts spent to date, any amount committed but not yet spent, and any remaining unallocated funds. Spending will be broken down, at a minimum, in the following categories: Personnel, Rental Assistance, Barrier Removal and Administrative Fee. This report will be submitted to Health Share and after review will be submitted by Health Share to Kaiser. Following satisfactory review of this report by Kaiser, Kaiser will issue the next payment to Health Share for distribution to the Counties.

#### **4. Evaluation**

Grantee acknowledges that Health Share and/or Kaiser may hire a third party to evaluate the effectiveness of Metro 300, or associated projects. Grantee explicitly grants Health Share and Kaiser each a license to use and disclose data generated or reported in support of this Agreement to third parties solely for the purposes of performing this evaluation and consistent with the Confidentiality provisions in the Agreement. Grantee also explicitly grants permission for Health Share, Kaiser, and any third party evaluator to publicize the results of any evaluation, so long as those results only contain aggregate or de-identified data, and consistent with academic and scientific research standards publish any findings.

Grantee will collaborate with Health Share, Kaiser, and the third party evaluator and take reasonable necessary steps to acquire effective consents from qualifying individuals to use and disclose any sensitive or personally identifying information necessary to support Metro 300 and associated evaluation(s). Grantee will acquire approval from Health Share prior to instituting any consent or authorization forms associated with this program. If requested Grantee shall execute data sharing agreements to facilitate the evaluation of Metro 300 and disseminate findings.

No information which could identify an individual will be included in any public reports generated.