



Public Health & Social Services

360 NW North Street
Chehalis WA 98532

Amendment to Professional Service Contract

Amendment # and Title: H02-0175-22 A

to contract #: H02-0175-22

Between: Lewis County Public Health & Social Services, and

Agency: Housing Resource Center

Purpose

The purpose of this amendment is to:

- **Update the scope of work**
- **Add funds in the amount of \$80,928.00**

It is mutually agreed therefore that the original contract H02-0175-22 is hereby amended as follows and effective November 1, 2022 until June 30, 2023:

Task Number	Task/Activity/Description	Deliverables/Outcomes	Reporting Requirement	Due Date
1	Emergency Shelter	• Provide time limited shelter beds to community members who are experiencing homelessness. Time limits shall be structured as follows: initial entry into shelter is for 90 days. Once 90 days is reached, client can request a panel review to be allowed to stay for an additional 90 days ONLY if participant has made meaningful gains towards meeting their goals to becoming housed. • Max time allowed for participants to be in shelter is capped at 180 days. • Partner with County lead to request panel review for shelter participants requesting to stay the additional 90 days. • Create and maintain housing stability plans with every shelter participant. These plans must clearly map out participant goals to achieving housing at the following intervals: 90 days & 180 days • Provide moderate to intense case management to shelter participants in an effort to support them in achieving their housing goals within the first 90-180 days of shelter stay.	1. Provide number of entries and exits into shelter	Monthly

Budget	Original 7/1/22-10/31/22	Amendment A 11/1/22-6/30/23	Total
Administration	\$ 3,224.00	\$ 6,456.00	\$ 9,680.00
Facility Support	\$ 21,011.00	\$ 42,024.00	\$ 63,035.00
Staffing	\$ 16,224.00	\$ 32,448.00	\$ 48,672.00
TOTAL	\$ 40,459.00	\$ 80,928.00	\$ 121,387.00

All other terms and conditions of the original contract and any subsequent amendments hereto remain in full force and effect. The parties signing below represent they have read and understand this amendment, and have the authority to execute this amendment.

For the County:

Meja Handlen,
Public Health & Social Services Director

Date: _____

For the Agency:



Ruth Gutierrez- Director

Date: 10/13/22