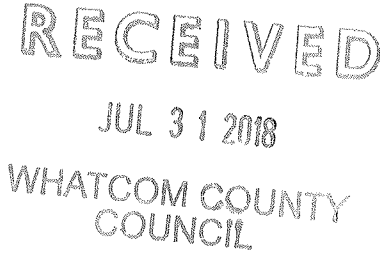


**WHATCOM COUNTY COUNCIL AGENDA BILL**

2018-228

NO. \_\_\_\_\_

CLEARANCES	Initial	Date	Date Received in Council Office	Agenda Date	Assigned to:
Originator:	JT	6/20/2018		8/8/18	Finance/Council
Division Head:	AD	6/28/18			
Dept. Head:	AD	7/10/18			
Prosecutor:	[Signature]	7-13-18			
Purchasing/Budget:	[Signature]	7/14/18			
Executive: [Signature]	[Signature]	7.31.18			

**TITLE OF DOCUMENT:**  
 Agreement between Whatcom County and the Blaine School District

- ATTACHMENTS:**
1. Contract Information Sheet
  2. Memo to County Executive
  3. 2 Originals of Contract

SEPA review required?    ( ) Yes    ( X ) NO SEPA review completed?    ( ) Yes    ( ) NO	Should Clerk schedule a hearing?    ( ) Yes    ( X ) NO Requested Date:
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**SUMMARY STATEMENT OR LEGAL NOTICE LANGUAGE:** (If this item is an ordinance or requires a public hearing, you must provide the language for use in the required public notice. Be specific and cite RCW or WCC as appropriate. Be clear in explaining the intent of the action.)

The purpose of the contracted services is to provide behavioral health services within the Blaine School District in order to promote a greater ability for academic success for students who are challenged with mental health and substance abuse problems.

<b>COMMITTEE ACTION:</b>	<b>COUNCIL ACTION:</b>
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Related County Contract #:	Related File Numbers:	Ordinance or Resolution Number:
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**Please Note:** Once adopted and signed, ordinances and resolutions are available for viewing and printing on the County's website at: [www.co.whatcom.wa.us/council](http://www.co.whatcom.wa.us/council).




**MEMORANDUM**

RECEIVED

JUL 16 2018

JACK LOUWS  
COUNTY EXECUTIVE

**TO:** Jack Louws, County Executive

**FROM:**   
Regina A. Delahunt, Director

**RE:** Blaine School District – Behavioral Health Services Contract  
Amendment #3

**DATE:** July 9, 2018

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Enclosed are two (2) originals of a contract amendment between Whatcom County and Blaine School District for your review and signature.

▪ **Background and Purpose**

The purpose of this contract is to provide behavioral health services within the Blaine School District in order to promote a greater ability for academic success for students who are challenged with mental health and substance abuse problems. The purpose of this amendment is to extend the agreement for an additional year and to increase funding for school-based counseling services, subcontracted professional services, and Care Team Stipends.

▪ **Funding Amount and Source**

The source of funding for this amendment, in an amount not to exceed \$131,400, is the Behavioral Health Program fund. Funding for this amendment is included in the 2018 budget. Council approval is required because funding exceeds 10% of the original contract amount.

Please contact Joe Fuller at extension #6045 if you have any questions regarding this agreement.

Encl.



**WHATCOM COUNTY CONTRACT  
INFORMATION SHEET**

Whatcom County Contract No.  
201507023 - 3

Originating Department:	85 Health
Division/Program: (i.e. Dept. Division and Program)	8550 Human Services / 855020 Mental Health
Contract or Grant Administrator:	Joe Fuller
Contractor's / Agency Name:	Blaine School District

Is this a New Contract? If not, is this an Amendment or Renewal to an Existing Contract? Yes  No   
 Yes  No  If Amendment or Renewal, (per WCC 3.08.100 (a)) Original Contract #: 201507023

Does contract require Council Approval? Yes  No  If No, include WCC: \_\_\_\_\_  
 (see Whatcom County Codes 3.06.010, 3.08.090 and 3.08.100)

Is this a grant agreement? Yes  No  If yes, grantor agency contract number(s): \_\_\_\_\_ CFDA#: \_\_\_\_\_

Is this contract grant funded? Yes  No  If yes, Whatcom County grant contract number(s): \_\_\_\_\_

Is this contract the result of a RFP or Bid process? Contract \_\_\_\_\_  
 Yes  No  If yes, RFP and Bid number(s): \_\_\_\_\_ Cost Center: 124100

Is this agreement excluded from E-Verify? No  Yes  If no, include Attachment D Contractor Declaration form.

If YES, indicate exclusion(s) below:

- Professional services agreement for certified/licensed professional.
- Contract work is for less than \$100,000.
- Contract work is for less than 120 days.
- Interlocal Agreement (between Governments).
- Contract for Commercial off the shelf items (COTS).
- Work related subcontract less than \$25,000.
- Public Works - Local Agency/Federally Funded FHWA.

Contract Amount:(sum of original contract amount and any prior amendments):  
 \$ 293,400  
 This Amendment Amount:  
 \$ 131,400  
 Total Amended Amount:  
 \$ 424,800

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:**

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.

Summary of Scope: The purpose of this contract is to provide behavioral health services within the Blaine School District in order to promote a greater ability for academic success for students who are challenged with mental health and substance abuse problems.

Term of Contract:	1 Year	Expiration Date:	8/31/2019
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Contract Routing:	1. Prepared by: JT	Date:	6/15/2018
	2. Attorney signoff: _____	Date:	_____
	3. AS Finance reviewed: <i>Abennet</i>	Date:	✓
	4. IT reviewed (if IT related): _____	Date:	_____
	5. Contractor signed: _____ ✓	Date:	6-29-18
	6. Submitted to Exec.: _____ ✓	Date:	7-16-18
	7. Council approved (if necessary): _____	Date:	_____
	8. Executive signed: _____	Date:	_____
	9. Original to Council: _____	Date:	_____

**WHATCOM COUNTY HEALTH DEPARTMENT CONTRACT EXTENSION**

**Whatcom County # 201507023**

**PARTIES:**

Whatcom County  
Whatcom County Courthouse  
311 Grand Avenue  
Bellingham, WA 98225

**AMENDMENT NUMBER: 3**

**CONTRACT PERIODS:**

Original: 09/01/2015 – 08/31/2016  
Amendment #1: 09/01/2016 – 08/31/2017  
Amendment #2: 09/01/2017 – 08/31/2018  
Amendment #3: 09/01/2018 – 08/31/2019

**AND CONTRACTOR:**

Blaine School District  
770 Mitchell Street  
Blaine, WA 98230

**THE CONTRACT IDENTIFIED HEREIN, INCLUDING ANY PREVIOUS AMENDMENTS THERETO, IS HEREBY EXTENDED AS SET FORTH IN THE DESCRIPTION OF THE EXTENSION BELOW BY MUTUAL CONSENT OF ALL PARTIES HERETO**

**DESCRIPTION OF EXTENSION:**

1. Extend the duration and other terms of this contract for 1 year, as per the original contract "General Terms, Section 10.2, Extension".
2. Amend Exhibit B – Compensation, to add \$18,000 in funding for school-based counseling services, subcontracted professional services and Care Team stipends; revised Exhibit B is attached.
3. Funding for this extended contract period (09/01/2018 – 08/31/2019) is not to exceed \$131,400.
4. Funding for the total contract period (09/01/2015 – 08/31/2019) is not to exceed \$424,800.
5. All other terms and conditions remain unchanged.
6. The effective start date of the extension is 09/01/2018.

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 EXTENSION HEREBY ACKNOWLEDGE AND ACCEPT THE TERMS AND CONDITIONS OF THIS EXTENSION. Signature is required below.

APPROVAL AS TO PROGRAM: Anne Deacon 7/9/18  
Anne Deacon, Human Services Manager Date  
DEPARTMENT HEAD APPROVAL: Regina A. Delahunt 7/10/18  
Regina A. Delahunt, Health Department Director Date  
APPROVAL AS TO FORM: Royce Buckingham 7-13-18  
Royce Buckingham, Civil Deputy Prosecuting Attorney Date

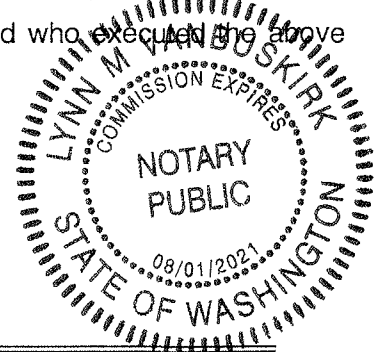
FOR THE CONTRACTOR:

Randy Elsbree | Randy Elsbree, Director 6/29/18  
Contractor Signature | Print Name and Title | Date

STATE OF WASHINGTON )  
COUNTY OF WHATCOM )

On this 29th day of JUNE, 2018, before me personally appeared Randy Elsbree, to me known to be the Director and who executed the above instrument and who acknowledged to me the act of signing and sealing thereof.

Lynn M. VanBuskirk  
NOTARY PUBLIC in and for the State of Washington  
Residing at Blaine  
My Commission expires: 8/1/2021



FOR WHATCOM COUNTY:

\_\_\_\_\_  
Jack Louws, County Executive Date

STATE OF WASHINGTON )  
COUNTY OF WHATCOM )

On this \_\_\_\_\_ day of \_\_\_\_\_, 2018, before me personally appeared Jack Louws, to me known to be the Executive of Whatcom County and who executed the above instrument and who acknowledged to me the act of signing and sealing thereof.

\_\_\_\_\_  
NOTARY PUBLIC in and for the State of Washington,  
Residing at Bellingham.  
My Commission expires: \_\_\_\_\_

**EXHIBIT "B" – Amendment #3**  
(COMPENSATION)

The source of funding for this contract, in an amount not to exceed \$131,400, is the Behavioral Health Program Fund. The budget for mental health intervention and treatment services is as follows:

Item	Invoice Documentation Required	Budget
Intervention/Prevention Specialist (including salary and benefits)  Mental Health Counselor (including salary and benefits)	General Ledger Detail	\$73,272
Program supplies, professional development/training, and travel	<p>General Ledger Detail for supplies &amp; training</p> <p>For mileage reimbursement, copies of mileage records, including the name of the staff member, date of travel, starting point and destination of travel, the number of miles traveled, the per mile reimbursement rate, and a brief description of the purpose of travel, for mileage reimbursement. Mileage will be reimbursed at the current Federal Rate.</p> <p>Ground transportation, coach airfare, and ferries will be reimbursed at cost when accompanied by receipts. Reimbursement requests for allowable travel must include name of staff member, beginning and ending time and 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.</p> <p>General Services Administration Domestic Per Diem Rates (<a href="http://www.gsa.gov">www.gsa.gov</a>), specific to location. Receipts for meals are not required.</p>	\$10,558
Subcontracted services (e.g., alcohol and drug evaluations, case management, community presentations, parent and staff trainings, psychological evaluations)	Subcontractor invoicing showing subcontractor name, type of service, rate & hours of service, student identifier	\$37,970
Care Team member stipends plus benefits (Middle School and High School) \$450/member/yr	Names of Care Team Members	\$9,600
<b>TOTAL</b>		<b>\$131,400</b>

The Contractor may transfer funds between budget line items with County prior approval.

The Contractor cannot exceed 40% of the total allocation during the first four months of service (September through December) without prior county approval.