

**WHATCOM COUNTY CONTRACT  
INFORMATION SHEET**

Whatcom County Contract No.  
**202101011**

Originating Department:	Executive Office
Division/Program: <i>(i.e. Dept. Division and Program)</i>	EMS
Contract or Grant Administrator:	Mike Hilley
Contractor's / Agency Name:	North Whatcom Fire and Rescue
Is this a New Contract?    If not, is this an Amendment or Renewal to an Existing Contract?    Yes <input type="radio"/> No <input checked="" type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> If Amendment or Renewal, (per WCC 3.08.100 (a)) Original Contract #: _____	
Does contract require Council Approval?    Yes <input checked="" type="radio"/> No <input type="radio"/> If No, include WCC: _____ Already approved? Council Approved Date: _____ (Exclusions see: Whatcom County Codes 3.06.010, 3.08.090 and 3.08.100)	
Is this a grant agreement?    Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, grantor agency contract number(s): _____ CFDA#: _____	
Is this contract grant funded?    Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, Whatcom County grant contract number(s): _____	
Is this contract the result of a RFP or Bid process?    Contract _____ Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, RFP and Bid number(s): _____ Cost Center: 130110	
Is this agreement excluded from E-Verify?    No <input type="radio"/> Yes <input checked="" type="radio"/> If no, include Attachment D Contractor Declaration form.	
If YES, indicate exclusion(s) below: <input type="checkbox"/> Professional services agreement for certified/licensed professional. <input type="checkbox"/> Goods and services provided due to an emergency <input type="checkbox"/> Contract work is for less than \$100,000. <input type="checkbox"/> Contract for Commercial off the shelf items (COTS). <input type="checkbox"/> Contract work is for less than 120 days. <input type="checkbox"/> Work related subcontract less than \$25,000. <input checked="" type="checkbox"/> Interlocal Agreement (between Governments). <input type="checkbox"/> Public Works - Local Agency/Federally Funded FHWA.	
Contract Amount:(sum of original contract amount and any prior amendments): \$ 236,000 This Amendment Amount: \$ _____ Total Amended Amount: \$ _____	Council approval required for; all property leases, contracts or bid awards <b>exceeding \$40,000</b> , and professional service contract amendments that have an increase greater than \$10,000 or 10% of contract amount, whichever is greater, <b>except when:</b> 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: _____	
This interlocal allows for up to two students to participate in the Whatcom County paramedic training course for the cost of \$118,000 per student.	
Term of Contract: 1 year	Expiration Date: 12/31/2021

Contract Routing:	1. Prepared by: <u>M. Hilley</u>	Date: <u>02/23/21</u>
	2. Attorney signoff: <u>Christopher Quinn</u>	Date: <u>03/22/21</u>
	3. AS Finance reviewed: <u>M Caldwell</u>	Date: <u>3/23/21</u>
	4. IT reviewed (if IT related): _____	Date: _____
	5. Contractor signed: _____ ✓	Date: <u>4-9-21</u>
	6. Submitted to Exec.: _____	Date: _____
	7. Council approved (if necessary): _____ ✓	Date: <u>4-6-21</u>
	8. Executive signed: _____ ✓	Date: <u>4-19-21</u>
	9. Original to Council: _____ ✓	Date: <u>4-23-21</u>

**INTERAGENCY AGREEMENT**  
**Between**  
**North Whatcom Fire and Rescue**  
**And**  
**Whatcom County Emergency Medical Services/Whatcom County**  
**Paramedic Training Program**

Whatcom County Emergency Medical Services, (hereinafter the "County"), and North Whatcom Fire and Rescue, (hereinafter the "District"), in consideration of the mutual covenants herein, agree as follows:

- I. **Purpose:** This Agreement is meant to provide paramedic training for up to two (2) North Whatcom Fire and Rescue Firefighter/EMT's in the 2021 Paramedic Training class administered by the Bellingham Fire Department (BFD), accreditation affiliation with Bellingham Technical College (College), funded by the Whatcom County EMS Levy.
- II. **Program Administration:** It is understood that the County and the District shall be responsible for the direct supervision of their respective employees and that nothing in this Agreement will interfere with the employer/employee relationship or the functioning of the District or County herein named. In compliance with applicable law and State records guidelines, both parties will maintain documentation and/or records relevant to the program in this Agreement.
- III. **Financial Responsibility:** The 2021 Paramedic Training Program is paid for by the Whatcom County Countywide Emergency Medical Services Fund. The County shall reimburse District for the wages and benefits of the paramedic students while they are in the training class and up to 50% of the eligible sick leave accruals banked at the time of graduation and the employee is transferred to the ALS agency. County will provide reimbursement to District not to exceed \$236,000, as presented in Exhibit A "Budget". District will invoice the County monthly for actual wages and benefits of the students, supported by general ledger detail.
- IV. **Program Sponsorship:** The College shall be the sponsoring institution and, as such, the program will operate within the College's appropriate policies and procedures.
- V. **Program Approval:** The paramedic training program is approved through the Washington State Board for Community and Technical Colleges and the Washington State Department of Health. Accreditation is granted through the Commission on Accreditation of Allied Health Education Programs (CAAHEP).
- VI. **Responsibilities of the District:**
  - A. Provide recommendation for enrollment of student into Paramedic Training by the

Fire Chief and the respective Department's Medical Program Director.

- B. Obtain concurrence from the College, County, Paramedic Training Medical Program Director and BFD for the selection of qualified EMT's for enrollment in the Paramedic Training program.
- C. Provide weekly or monthly, depending on need, direct leadership liaison with Paramedic Training Lead Instructor for the purposes of monitoring student progress and activities.

**VII. Responsibilities of the County:**

- A. Secure budget authority from the Whatcom County Council to fund the 2021 program costs for paramedic training as presented in Exhibit A.
- B. Participate as a member of the Paramedic Program Advisory Committee.

**VIII. Objectives of Paramedic Training Course:**

- A. Paramedic Training will provide the pre-requisite (60-hour/ 5 Credit) Anatomy and Physiology Course through a combination of online and laboratory learning.
- B. Paramedic Training will provide approximately 1300 clinical hours to the Paramedic Candidate which includes working on Whatcom County ALS units under the supervision of experienced paramedics known as "preceptors." Students generally see about 500 patients when working on the ALS units. In addition, these clinical hours include training with the hospital emergency department, operating room, intensive care unit & maternity units, along with observation days at Children's Hospital and Harborview Medical Center as part of the learning experience. Students average about 150 IV's and about 20 Intubations during this time.
- C. Paramedic Training will provide 650 classroom hours for both didactic and simulation lab learning.
- D. Provide weekly or monthly, depending on need, progress reports to the District liaison. North Whatcom Fire and Rescue:  
Chief Jason Vanderveen, P.O. 286 Lynden, WA 98264 (360) 318-9933  
[jvanderveen@nwfrs.com](mailto:jvanderveen@nwfrs.com)
- E. Provide Paramedic Student Evaluations (Approximately 20).
- F. Provide Physician-Level Evaluations for certification.
- G. Prepare the student for National Registry of EMT's (NREMT) testing and certification.

**IX. Paramedic Training Program admission requirements:**

- A. Eligible Advanced Life Support Departments and Whatcom County Fire Departments or District employees meeting admission requirements as set forth in RCW 18.71.205 and WAC 246.976.041, will be considered for the program upon recommendation of the Paramedic Training Course Director. Enrollment is not open to the public.
  - B. All students accepted for admission must have current Emergency Medical Technician (EMT) certification and a high school diploma or equivalent as per Washington State Department of Health (DOH) guidelines.
- X. Program Administration:**
- College Supervisor: Julie Samms, Associate Dean, Bellingham Technical College, 3028 Lindbergh Ave., Bellingham, WA, 98225, (360) 752-8316, [jsamms@btc.edu](mailto:jsamms@btc.edu)
- Paramedic Training Medical Program Director: Dr. Ralph Weiche, 1800 Broadway, Bellingham, WA 98225 (360) 778-8413 [rweiche@cob.org](mailto:rweiche@cob.org)
- Whatcom County EMS Paramedic Training Course Director: Steven Cohen, MS, EMS Training Specialist; 800 E. Chestnut St. Bellingham, WA 98225 (360) 820-6157 [scohen@co.whatcom.wa.us](mailto:scohen@co.whatcom.wa.us)
- Bellingham Fire Department Coordinator: Div. Chief Scott Ryckman, Medical Services Officer, Bellingham Fire Department, 1800 Broadway, Bellingham, WA, 98225, (360) 778-8413, [sryckman@cob.org](mailto:sryckman@cob.org)
- Paramedic Lead Instructor: Capt. Rob Stevenson, 1800 Broadway, Bellingham, WA 98225. [rstevenson@cob.org](mailto:rstevenson@cob.org)
- XI. Nondiscrimination:** There will be no discrimination against any participant covered under the Agreement because of race, color, religion, national origin, sex (including pregnancy and parenting status), disability, age, veteran status, sexual orientation, gender identity or expression, marital status or genetic information in programs or activities including employment, admissions, and educational programs.
- XII. Liability:** Each party to this Agreement will be responsible for the negligent or willful acts or omissions of its own employees, officers, volunteers or agents in the performance of this Agreement. Neither party will be considered the agent of the other, nor does either party assume any responsibility to the other party for the consequences of any act or omission of any person, firm, or corporation not a party to this Agreement. Each party shall insure its own employees.
- XIII. Term of the Agreement:** This Agreement will become effective upon date of final signature and will terminate upon completion of paramedic training. Completion of training is determined after all requirements for graduation and certification have been

met. Termination of this Agreement shall be effective thirty (30) days following written notice of termination provided by either party in the case a student is unable to complete or is academically terminated from Paramedic Training. If modifications to this Agreement are deemed necessary, such changes shall be approved by the Department and the County unless such modifications are required based on State, Federal or Local law.

- XIV. Entire Agreement:** This Agreement constitutes the entire agreement between the parties, and supersedes all prior oral or written agreements, commitments, or understandings concerning the matters provided for herein.

**Authority:** The parties represented and covenant that they are authorized to sign as authorized agents of their respective college/agency.

ACCEPTED, agreed, and signed as of the date first set forth below

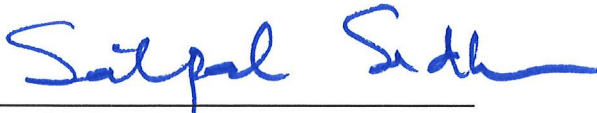
EXECUTED, this 9<sup>th</sup> day of April, 2021, for North Whatcom Fire and Rescue

**District Approval:**



\_\_\_\_\_  
Jason Vanderveen, Fire Chief

EXECUTED, this 19<sup>th</sup> day of April, 2021, for Whatcom County:



\_\_\_\_\_  
Satpal Sidhu, County Executive

**Approved as to Form:**

Christopher Quinn per email 03/22/21  
Office of Prosecuting Attorney, Civil Division

## Exhibit 'A'

### BUDGET

#### Student Tuition Costs

	DESCRIPTION	COST PER STUDENT
Student Wages and Benefits	Preceptor, Classroom and Lab Hours	\$107,000
50% Sick Leave Transfer	Employer Transfer of Sick Leave based on actuals	\$11,000 (year-end estimate)
<b>Total per student</b>		<b>\$118,000</b>
<b>GRAND TOTAL</b>	<b>Two Students</b>	<b>\$236,000</b>



## MEMORANDUM

**TO:** Whatcom County Council  
**FROM:** Mike Hilley, EMS Manager  
**RE:** North Whatcom Fire & Rescue Paramedic Training  
**DATE:** 03/22/2021

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Enclosed is a contract between North Whatcom Fire & Rescue (NWFR) and Whatcom in support of two eligible firefighter EMTs to participate in the Whatcom County paramedic training course.

▪ **Background and Purpose**

On February 25, 2021 the EMS Finance committee reviewed the proposed paramedic training budget and recommended it for review by the Technical Advisory Board (TAB) and The EMS Oversight Board (EOB). On March 10<sup>th</sup> the EOB reviewed and recommended the paramedic training budget for council approval. Both the Finance and EOB approved the 2021 training budget, inclusive of the NWFR, for recommendation to the council with the caveat that a comprehensive paramedic training plan be finalized for review and consideration of the Finance Committee before additional classes are recommended.

Upon graduation, these students will be transferred to Bellingham Fire Department to begin their careers as paramedics serving on ALS units.

▪ **Funding Amount and Source**

Funding in the amount of \$236,000 will be provided through the EMS Levy Fund.

▪ **Differences from Previous Contract**

There are no significant changes to the first agreement as the scope and compensation are very similar.

Please contact Mike Hilley, EMS Manager at (360) 927-1155, if you should have any questions or concerns regarding the terms of this agreement.