


WHATCOM COUNTY
CONTRACT INFORMATION SHEET

Whatcom County Contract Number:
202408020 – 2

Originating Department:		85 Health and Community Services	
Division/Program: (i.e. Dept. Division and Program)		8530 Community Health / 853070 Healthy Communities	
Contract or Grant Administrator:		Aly Robinson	
Contractor's / Agency Name:		Mount Baker School District	
Is this a New Contract?	If not, is this an Amendment or Renewal to an Existing Contract?		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If Amendment or Renewal, (per WCC 3.08.100 (a)) Original Contract #:		202408020
Does contract require Council Approval?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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?	If yes, grantor agency contract number(s):		CFDA#:
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
Is this contract grant funded?	If yes, Whatcom County grant contract number(s):		202201016
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
Is this contract the result of a RFP or Bid process?	Contract Cost Center:		10008620
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If yes, RFP and Bid number(s):		
Is this agreement excluded from E-Verify?	No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>		
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):		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 :	
\$	30,000	1. Exercising an option contained in a contract previously approved by the council.	
This Amendment Amount:		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.	
\$	55,000	3. Bid or award is for supplies.	
Total Amended Amount:		4. Equipment is included in Exhibit "B" of the Budget Ordinance	
\$	85,000	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 amendment adds funding to complete the cost-benefit analysis, planning, and development/renovation of a permanent SBHC site.			
Term of Contract:	17 Months	Expiration Date:	12/31/2025
Contract Routing:	1. Prepared by:	J. Thomson	Date: 01/16/2025
	2. Health Budget Approval:	CR	Date: 01/24/2025
	3. Attorney signoff:	Christopher Quinn	Date: 01/27/2025
	4. AS Finance reviewed:	Bbennett	Date: 02/28/2025
	5. IT reviewed (if IT related):		Date:
	6. Contractor signed:		Date:
	7. Executive Contract Review:		Date: 3/14/2025
	8. Council approved (if necessary):	AB2025-207	Date: 03/11/2025
	9. Executive signed:		Date: 3/17/2025
	10. Original to Council:		Date:



Memorandum

TO: Satpal Sidhu, County Executive
FROM: Charlene Ramont, Assistant Director
RE: Mount Baker School District – School-Based Health Center Interlocal Agreement Amendment #2
DATE: MARCH 13, 2025

Attached is an interlocal agreement amendment between Whatcom County and Mount Baker School District for your review and signature. This amendment adds \$55,000 in pass through funding from the Department of Health for the District to perform the cost-benefit analysis (estimated cost is \$30,000), planning, and development/renovation (estimated costs of planning and development/renovation are unknown at this time) of a permanent school-based health center site.

■ Background and Purpose

This Agreement provides state pass through funding for minor renovations to an office space at Mount Baker School District (MBSD) to be utilized as a school-based health center for MBHS students and operated by Sea Mar Community Health Centers and all planning and development related to the development of a permanent health center site on District-owned property. The Mount Baker School District Board voted to support this work at their January 9, 2025 meeting.

100% of Mount Baker School District students live in an area that is geographically isolated from healthcare services for young people and many struggle to access affordable healthcare. Transportation times to healthcare appointments for many residents are over 45 minutes and 50 miles roundtrip. Because of the high rate of poverty in the District, many individuals cannot afford transportation to medical centers or rely on public transit, often making appointments 5-6 hours with travel time. School staff frequently share that students miss full days of school to attend medical appointments.

School-based health centers prevent learning loss and support student academic achievement and improved health outcomes. As of 2022, there were 3,900 operational school-based health centers in 49 states (2022 National Census of School Based Health Centers). There is currently one operating school-based health center in Whatcom County, and over 70 throughout Washington State in over 30 districts.

■ Funding Amount and Source

Funding for this Agreement, in an amount not to exceed \$85,000, is provided by the Washington State Department of Health's Consolidated Contract and cannot be used for other purposes. These funds are included in the 2025 budgets. Council authorization for this agreement is required as the additional funding provided by this amendment exceeds 10% of the amount previously authorized by Council.

■ Differences from Previous Contracts

Section	Difference
Exhibit B – Compensation	Adds \$55,000 to complete the cost-benefit analysis, planning, and development/renovation of a permanent school-based health center site.

Please contact Ann Beck, Community Health and Human Services Manager at 360-778-6055 (ABeck@co.whatcom.wa.us), if you have any questions.



Whatcom County Contract Number:

202408020 – 2

**WHATCOM COUNTY CONTRACT AMENDMENT
School-Based Health Center Interlocal Agreement**

PARTIES:

**Whatcom County
Whatcom County Health and Community Services
509 Girard Street
Bellingham, WA 98225**

**AND CONTRACTOR:
Mount Baker School District
PO Box 95
Deming, WA 98244**

CONTRACT PERIODS:

**Original: 08/07/2024 – 12/31/2024
Amendment #1: 01/01/2025 – 12/31/2025
Amendment #2: 03/12/2025 – 12/31/2025**

**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 B – Compensation, to increase funding by \$55,000.
2. Funding for the total contract period (08/07/2024 – 12/31/2025) may not exceed \$85,000.
3. All other terms and conditions remain unchanged.
4. The effective start date of the amendment is 03/12/2025.

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:	<div>DocuSigned by:</div> <div><i>Ann Beck</i></div> <div>2B365BB0422344A...</div>	3/13/2025
	Ann Beck, Community Health and Human Services Manager	Date
DEPARTMENT HEAD APPROVAL:	<div>Signed by:</div> <div><i>Charlene Ramont</i></div> <div>10C96CF66701466...</div>	3/13/2025
	Charlene Ramont, Assistant Director Whatcom County Health and Community Services	Date
APPROVAL AS TO FORM:	<div>Signed by:</div> <div><i>Christopher Quinn</i></div> <div>EC466EF5C88B4FD...</div>	3/13/2025
	Christopher Quinn, Chief Civil Deputy Prosecutor	Date

FOR THE CONTRACTOR:

<div>Signed by:</div> <div><i>Brian Fraser</i></div> <div>C039D6614A4A466...</div>	Brian Fraser, Finance Manager	3/13/2025
Contractor Signature	Printed Name and Title	Date

FOR WHATCOM COUNTY:

<div>DocuSigned by:</div> <div><i>Satpal Singh Sidhu</i></div> <div>1192C7C18B664E3...</div>	3/17/2025
Satpal Singh Sidhu, County Executive	Date

CONTRACTOR INFORMATION:

Mount Baker School District
 PO Box 95
 Deming, WA 98244
bfraser@mtbaker.wednet.edu

EXHIBIT B – Amendment #2 COMPENSATION

Budget and Source of Funding: The source of funding for this agreement, in a total amount not to exceed \$85,000, is the Washington State Department of Health's Consolidated Contract.

In addition to the documentation requirements described in Exhibit B.1, invoices must include the following:

- An invoice number generated by the Contractor;
- Contract number assigned by the County;
- The current date(s) of service or work performed;
- Vendor name and DBA, if applicable;
- Itemized list of all goods and services, if not clearly listed on the subcontractor's documentation;
- The signature of the Contractor or designee. Electronic signatures are acceptable.

In addition to the Contractor generated invoice, the Contractor must provide sufficient backup documentation to demonstrate that the expenses are allowable under the terms of this contract. Backup documentation must include paid invoices and receipts provided by subcontractors. The first time the Contractor submits an invoice for a new product or service, invoices must include:

- The Vendor's intent to ID number, issued by Washington State Labor and Industries upon filing the "Statement of Intent to Pay Prevailing Wages", when applicable.
- Procurement documentation.

Approved goods and services include:

Cost Description	TOTAL Budget
Capital Expenses	
Rehabilitation and Improvements – see invoice documentation requirements above	
Other Expenses	
Planning and Development services related to the development of a Permanent Facility – invoices for services conducted by the District or through *subcontracted services must include a description of activities performed, including dates and hours, as applicable.	\$85,000

* Subcontractors must be pre-authorized by the County.

Contractor's Invoicing Contact Information:	
Name	Brian Fraser, Director of Finance
Phone	360-617-4604
Email	bfraser@mtbaker.wednet.edu

Refer to Exhibits B.1 and B.2 for additional invoicing requirements and information.

EXHIBIT "B.1"

Invoicing – General Requirements

1. When applicable, the contractor may transfer funds among budget line items. Line item changes that exceed 10% of the total budget must be pre-approved by the County Contract Administrator, prior to invoicing.
2. When applicable, indirect costs may not exceed the amount indicated in Exhibit B or the Contractor's federally approved indirect cost rate.
3. The Contractor shall submit invoices indicating the County-assigned contract number to HL-BusinessOffice@co.whatcom.wa.us and ARobinso@co.whatcom.wa.us
4. The Contractor shall submit itemized invoices on a monthly basis in a format approved by the County and by the 15th of the month, following the month of service, except for January where the same is due by the 10th of the month.
5. When applicable, the Contractor will utilize grant funding sources in the order of their expiration date as indicated by the County, prior to spending local funding sources, when no funding restrictions prevent doing so.
6. The contractor shall submit the required invoice documentation identified in Exhibit B.
 - a. The County reserves the right to request additional documentation in order to determine eligible costs. Additional documentation must be received within 10 business days of the County's request.
 - b. When applicable, if GL reports for personnel reimbursement do not specify position titles, additional documentation must be provided that includes staff name and position title.
 - c. When applicable, for subcontracted services, copies of paid invoices that include types of service, student identifier, dates, number of hours and rate are required.
 - d. When applicable, mileage will be reimbursed at the current GSA rate (www.gsa.gov). Reimbursement requests for mileage must include:
 1. Name of staff member
 2. Date of travel
 3. Starting address (including zip code) and ending address (including zip code)
 4. Number of miles traveled
 - e. When applicable, travel and/or training expenses will be reimbursed as follows:
 1. Lodging and meal costs for training are not to exceed the current GSA rate (www.gsa.gov), specific to location.
 2. Ground transportation, coach airfare and ferries will be reimbursed at cost when accompanied by receipts.
 3. Reimbursement requests for allowable travel and/or training must include:
 - a. Name of staff member
 - b. Dates of travel
 - c. Starting point and destination
 - d. Brief description of purpose
 - e. Receipts for registration fees or other documentation of professional training expenses.
 - f. Receipts for meals are not required.
7. 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 or the required invoice documentation, more than 30 days after the month of services performed and/or the expiration of this contract.
8. 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.**
9. Duplication of billed costs or payments for service: The Contractor shall not bill the County for services performed or provided under this contract, and the County 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.

EXHIBIT "B.2"

Invoice Preparation Checklist for Vendors

The County intends to pay you promptly. Below is a checklist to ensure your payment will be processed quickly. Provide this to the best person in your company for ensuring invoice quality control.

☐ Send the invoices to the correct address:

HL-BusinessOffice@co.whatcom.wa.us and ARobinso@co.whatcom.wa.us

☐ Submit invoices monthly, or as otherwise indicated in your contract.

Verify that:

- ☐ the invoice includes 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.**
- ☐ the time period for services performed is clearly stated and within the contract term beginning and end dates. Also verify any other dates identified in the contract, such as annual funding allocations;
- ☐ invoice items have not been previously billed or paid, given the time period for which services were performed;
- ☐ enough money remains on the contract and any amendments to pay the invoice;
- ☐ the invoice is organized by task and budget line item as shown in Exhibit B;
- ☐ the Overhead or Indirect Rate costs match the most current approved rate sheet;
- ☐ the direct charges on the invoice are allowable by contract. Eliminate unallowable costs.
- ☐ personnel named are explicitly allowed for within the contract and the Labor Rates match the most current approved rate sheet;
- ☐ back-up documentation matches what is required as stated in Exhibit B and B.1;
- ☐ contract number is referenced on the invoice;
- ☐ any pre-authorizations or relevant communication with the County Contract Administrator is included; and
- ☐ Check the math.

Whatcom County will not reimburse for:

- Alcohol or tobacco products;
- Traveling Business or First Class; or
- Indirect expenses exceeding 10% except as approved in an indirect or overhead rate agreement.