



WHATCOM COUNTY CONTRACT INFORMATION SHEET (CIS)

Whatcom Co. Contract #:
202411003 – 2

Originating Department: 85 - Health
Division: 8530 - Community Services
Program: 853020 - Healthy Children and Families
Contract or Grant Administrator: Allison Williams
Contractor's / Agency Name: Ferndale School District
Title of Agreement (optional): Healthy Children's Fund - Mental Health Workforce Expansion Amendment #2

Type of Contract: Standard Contract for Services	
If amendment or renewal, original contract #: 202411003	
Is this is a grant agreement? No	
If so, grantor agency contract #s:	ALN:
<i>Note: Complete ALN field if contract involves direct federal grants/cooperative agreements or pass-through federal funds.</i>	
Is this contract grant-funded? No	If yes, Whatcom County grant contract number(s):
If this contract the result of an RFP? Yes	If yes, RFP number(s): 24-60
Is this contract the result of a Bid Process? No	If yes, Bid Number(s):
Does this contract involve federal reimbursement? (i.e. fed grant, cooperative agreement, pass-through fed funds, etc.) No	
Procurement method:	Request for Proposal (RFP) - For services or technologically complex equipment such as computer
Council review: Required - Amendment exceeds \$10,000 or 10% threshold	

Fund(s): 1858	Original Contract Amount: \$ 271,817
Cost Center(s): 18581004	This Amendment Amount: \$ 300,530
Object Account(s): 7210	Total Cumulative Amount: \$ 572,347

Contract term ends: 08/31/2027

Key words/summary (optional): 2026 estimated budget spend out = 100,166 2027 estimated budget spend out = 200,364

Contract routing (please initial & date):

Prepared by: A. Williams 06/17/2026

Contractor signed: _____

Contractor review: _____

Executive review: _____

Attorney signoff: J. Wilson 06/29/2026

Council approval, if necessary: _____

AS Finance review: D. Kempf 07/16/2026

AB#: AB2026-564

IT review (if related): n/a

Executive signed: _____

**WHATCOM COUNTY CONTRACT AMENDMENT
HCF MENTAL HEALTH WORKFORCE EXPANSION**

PARTIES:

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

AND CONTRACTOR:
Ferndale School District
PO Box 698
Ferndale, WA 98248

CONTRACT PERIODS:

Original: 10/23/2024 – 08/31/2026
Amendment #1: 09/01/2025 – 08/31/2026
Amendment #2 09/01/2026 – 08/31/2027

**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. Extend the duration and other terms of this contract for one year, pursuant to the original contract “Section 3, CHANGES, MODIFICATIONS, AMENDMENTS, EXTENSIONS, OR WAIVERS.” The cumulative term of this contract may not extend beyond 10/22/2028.
2. Amend Exhibit A – Scope of Work, to:
 - a. Replace the estimated number of early learners served with a range, rather than a single number.
 - b. Remove the collaborative learning project with WCEL.
 - c. Modify the facilitation and convening deliverables for the Whatcom County Schools Collaboration Group to fit the meeting cadence and learning objectives of the participants.
 - d. Modify the intern caseload and define the hours dedicated to early learners (ages 3-5).
 - e. Add requirements for convening and facilitating an internship learning collaborative for Whatcom organizations hosting behavioral health, counseling, and social work interns serving children and families.
 - f. Update reporting requirements to reflect changes in the scope of work, and alignment with Results Based Accountability.
3. Amend Exhibit B – Compensation, to:
 - a. Update the budget to reflect funding for the extended contract period and the revised scope of work (revisions to the Personnel line item reflect the staff infrastructure necessary to support intern development).
4. Adds Exhibit C – Summary Data, which is a progress report of work to date (Q4 2024 – Q2 2026).
5. Funding for this contract period (09/01/2026 – 08/31/2027) is not to exceed \$300,530. Funding for the total contract period (10/23/2024 – 08/31/2027) is not to exceed \$572,347.
6. All other terms and conditions remain unchanged.
7. The effective start date of the amendment is 09/01/2026.

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: _____
Ann Beck, Community Health and Human Services Manager Date

DEPARTMENT HEAD APPROVAL: _____
Champ Thomaskutty, Director Date
Whatcom County Health and Community Services

APPROVAL AS TO FORM: Approved via email JCW/crg 06/29/2026
Janelle C. Wilson, Civil Deputy Prosecutor Date

FOR THE CONTRACTOR:

Dr. Kristi Dominguez, Superintendent		
Contractor Signature	Printed Name and Title	Date

FOR WHATCOM COUNTY:

Satpal Singh Sidhu, County Executive Date

CONTRACTOR INFORMATION:

Ferndale School District
Dr. Kristi Dominguez, Superintendent
PO Box 698
Ferndale, WA 98248
Kristi.Dominguez@ferndalesd.org

EXHIBIT A – Amendment #2 STATEMENT OF WORK

I. Background and Purpose

This agreement funds the expansion of mental health services to an estimated 150-250 early learners (ages 3 – 5) and their families annually, who are enrolled in Ferndale School District's (District) Developmental Preschool and Transitional Kindergarten Programs. Services include mental health staff support to early learners ages 3-5 and their families, training and professional development opportunities for new and existing staff, increasing collaboration with community partners who are providing mental health services, and implementing a Mental Health Internship Program.

Expansion of services will include providing evidence-based early childhood and mental health care training, professional development opportunities, and interventions aimed at increasing capacity to serve the mental health needs of young children and families to new and existing Early Learning Program staff, interns and teachers.

Access to early childhood mental health care is a critical gap in Whatcom County. This lack of access has serious and lasting consequences on children's physical, emotional, social, and cognitive health. With early identification and investments in mental health treatment for young children and their families, expenditures in healthcare, education, the criminal-legal system, and the labor market are reduced. Early identification and intervention helps families to access simple strategies for support, which leads to healthy development of the child and a healthier home environment, and a reduction in the risks of childhood mood disorders.

This contract is awarded as a result of RFP 24-60 and aligns with Healthy Children's Fund strategies intended to expand behavioral and mental health services for vulnerable children, pregnant parents, and parents with young children.

II. Statement of Work

The District will expand mental health services to an estimated 150-250 early learners ages 3-5 and their families annually within the Ferndale School District's Developmental Preschool and Transitional Kindergarten Program, as follows:

A. Target Population Eligibility

Early learners, ages 3 – 5, who are enrolled in the District's Developmental Preschool and Transitional Kindergarten Programs and their families are eligible for the expanded services funded by this agreement.

1. Developmental Preschool Program – estimated to serve 100-200 early learners annually
 - a. Services will be provided to children ages 3 – 5 who are enrolled in the Developmental Preschool Program at the District's Mountain View Learning Center facility.
 - b. Entrance criteria for the Developmental Preschool Program includes special education qualifying criteria (such as developmental delays [97.4% of enrollees in the 2023-24 school year were students with disabilities] and health impairments) and/or a lack of participation in early learning opportunities in the community, such as child care or community-based preschool programs.

- i. Entrance criteria for this Program are broadening to include a significant number of children who are not identified as having a disability, but experience other risk factors such as:
 - a. lower socioeconomic status using the ECEAP eligibility of at or below 36% of the state median income, or
 - b. lack of participation in any early learning or childcare setting.
- 2. Transitional Kindergarten – estimated to serve 50-80 early learners annually
 - a. Services will be provided to children ages 4 – 5 who are enrolled in the District’s Transitional Kindergarten Programs, which are housed in the neighborhood elementary schools throughout Ferndale.
 - b. Entrance criteria for the Transitional Kindergarten Program includes students who have not had access to early learning services provided in a childcare or early learning environment.
 - c. Data from the 2023-2024 school year indicated that 51% of the children enrolled in this program qualified for Free and Reduced Lunch, set at 185% of the poverty level (or below).

B. Expansion of Service Delivery

- 1. The District will hire or subcontract/affiliate with one (1) new Social Worker/Mental Health Specialist (1 FTE - Post-Masters level in a behavioral health related field). This position will provide services to Early Learner and Transitional Kindergarten students, as follows:
 - a. Work collaboratively with student counselors, administrators, educators, specialists, and families to develop and implement effective mental health services for students, including participation in team planning or consultations, as needed.
 - b. Participate in interdisciplinary student planning processes, including outreach to parents and assessment of mental health needs for young children and their families.
 - c. Deliver high-quality therapeutic services, including evidence-based behavioral health programs and interventions, such as Motivational Interviewing, Cognitive Behavioral Therapy (CBT), Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), child and family-centered services, and community care coordination, using Multi-Tiered Systems of Support and National School Mental Health Best Practices.
 - d. Ensure staff are trained to engage in outreach, including methods to minimize language or other communication barriers.
 - e. Coordinate and follow-up with outside resources to provide additional services.
 - f. Monitor service delivery to ensure equitable access to services.
- 2. The District will implement a Mental Health Internship Program, as described in C. (Internship Program Delivery), below.
- 3. The majority of mental health services will occur within classroom settings. A variety of small group and individual interventions will occur in addition to these experiential, integrated classroom-based services.

- a. The District will provide school-based mental health supports to Early Learning Program students across tiers of interventions and needs.
 - i. The District's early learning instruction includes trauma informed interventions such as Play Works (<https://www.playworks.org/impact/studies-on-playworks/>) and Conscious Discipline (https://consciousdiscipline.com/methodology/research/?gad_source=1&gclid=CjwKCAjwnei0BhB-EiwAA2xuBjIZxTJnoWpfxwg6lV0xhc_VSoWlzyr-arZT9UYie0p_EMwmm1QgVRoCDXQQAvD_BwE).
4. When specific mental health needs arise within the classroom setting or through conferencing and collaborating with families, school staff will complete a brief referral form for the Mental Health Specialist or Intern to contact the family and offer more intensive case management services.
5. Services, resources and support for navigating the transition to parenthood will be offered universally to all families enrolled in the District's early learning programs, through parenting classes offered in partnership with the Whatcom Center for Early Learning as well as integrated mental health support provided throughout the District's early learning programs.
 - a. Families will have the ability to self-refer for more intensive and individualized mental health support.
 - b. The mental health specialist/social worker will:
 - i. Collaborate closely with the early learning team to share resources and create trauma-informed and healing-centered classroom spaces.
 - ii. Participate in events and school functions that support early learners and their families.
 - iii. Facilitate connections to existing community resources, using school staff and family input.
 - iv. Offer specific workshops that fit the needs of young families if determined by staff and families as a need.
 - v. Support students and staff in early learning classrooms settings, including engaging staff and families in conversations around classroom management, trauma informed and healing centered practices, play based learning and healing through play.
 - vi. Directly interact with young learners, helping them solve problems in the moment, increase coping skills, practice distress tolerance, increase mindfulness and engage in perspective taking.
 - vii. Provide intervention to individuals outside of the classroom, to be determined on an individual basis.
6. Intakes for optional case management services will occur verbally with the Mental Health Professional and identified families to provide the lowest barrier access point to services.
7. Integration of care for material needs will occur through referrals to the District's Family Resource Center, physically located at the Mountain View Learning Center facility.

8. Integration of care for community-based resources and more intensive mental health care will occur through “warm hand-off” referrals to trusted community partners including Brigid Collins Family Support Center (including their recently opened Parent Academy), Single Entry Access to Services (SEAS) for families of children seeking assessment, diagnosis or support with an existing diagnosis, and Whatcom Center for Early Learning to provide a continuum of care for Ferndale’s families with children with disabilities from birth to five, during the crucial early childhood developmental period.
9. The District will facilitate a collaborative learning space with WCEL staff and the District’s Early Learning Program staff. This may include food provided at the gatherings, as well as access to speakers and resources supporting their professional development.
10. Participate in County evaluation efforts, including evaluation planning, data collection and reporting.

C. Internship Program Delivery - District Responsibilities:

1. The District will advertise internship opportunities to academic institutions with appropriate and relevant graduate programs, such as Western Washington University’s Clinical Counseling Program and the University of Washington’s Social Work Program.
2. The District criteria for intern selection includes:
 - a. Enrollment in a Master’s level program in applied mental health, like counseling or clinical social work
 - b. Level of clinical experience
 - c. Interest in serving children and families
 - d. Interest in school-based mental health care
 - e. Basic clinical competence, verified through the interview process
3. As the designated training site, the Ferndale School District is responsible for:
 - a. Designating one or more qualified staff members to serve as Practicum Instructors to direct and supervise student learning.
 - b. Conferring with the academic institution’s Field Faculty about individual student progress.
 - c. Making training site facilities available for interns’ educational purposes, with the understanding that use may immediately be limited or withdrawn if the intern endangers any client.
 - d. Allocating reasonable time to Practicum Instructors to carry out their education responsibilities, including attending training for practicum instruction, developing student learning contracts, and regularly supervising and evaluating students.
 - e. Providing student interns access to available information or sources of information that will further their education while assigned to the Training Site.
 - f. The District’s Mental Health Specialist and Director of Mental and Behavioral Health will help facilitate the Whatcom County Schools Collaboration group, which aims to increase access to mental health services for students in all seven school districts. This collaboration group meets quarterly and has explored the possibility of establishing

similar internships and mental health workforce expansion opportunities within Whatcom County school districts in the future.

- g. Additionally, the Mental Health Specialist has worked closely with staff in other districts providing clinical internships and will continue to do so. During the 2024-25 school year, this took the form of a monthly clinical supervision consult group. During the 2025-26 year, a monthly intern collaboration group met with interns and their supervisors across the County sharing resources and professional development opportunities. This will continue each year in a format that works for other districts as well as the Ferndale interns in this program.

D. Intern Responsibilities and Expectations

1. Interns will receive bi-weekly supervision. Depending on the size of the intern cohort and individual intern needs, supervision meetings will be in individual and group settings.
2. Supervision meetings will alternate between focusing on the logistics of providing mental health care in a school setting and clinical supervision, including oversight of individual cases and clinical approaches.
3. Attendance is required at counseling team meetings and staff meetings applicable to their work.
4. Each intern will carry a caseload of 5-15 students, ages 3-5 years old (up to 500 hours of work per intern).
5. Interns will conduct case management for students and families.
6. Interns will develop and implement appropriate clinical intervention services for students and families on their caseload.
7. The district will pay interns a monthly stipend. The total compensation for the 500 hours of the internship dedicated towards early learners (3-5 years old) is \$15,600 for each intern.
8. Receipt of the stipend requires meeting internship requirements, which will be monitored by the intern's clinical supervisor, including attendance, completing required trainings, attending supervision sessions, and serving students and families.
9. Interns will track their hours using the university hours log, which will be signed by the Ferndale School District clinical supervisor quarterly.
10. Interns must complete the following required training for Ferndale School District employees:
 - a. CPS reporting requirements
 - b. Bullying prevention and response
 - c. Title IV reporting
 - d. Professional boundaries
 - e. Health emergencies
11. Interns must complete a 3-hour suicide prevention training aligning with Washington State requirements for Educational Staff Associate (School) Social Workers.
12. Throughout the internship, additional training opportunities specific to early childhood and family mental health, as well as school-based mental health services, will be provided.

E. Internship Learning Collaboration Coordination

1. Convene and facilitate a learning group for organizations hosting behavioral health, counseling, and social work interns serving children and families.
2. Coordinate regular meetings to support collaboration, peer learning, and resource sharing among internship host organizations. Meeting cadence to be determined by learning group.
3. Support shared learning related to intern recruitment, placement pathways, supervision capacity, and training opportunities.
4. Facilitate sharing of tools, materials, and promising practices among participating organizations.
5. Identify shared challenges and opportunities related to internship models, accreditation requirements, and workforce development needs.
6. Document key themes, identify opportunities, and make recommendations for systems alignment and collaborative workforce development.
7. Strengthen relationships and coordination among community partners to support building a community of practice and a sustainable behavioral health workforce pipeline.

III. Reporting

Whatcom County Health and Community Services aligns contract reporting requirements with its identified Results Based Accountability (RBA) model for assessing program performance and evaluation. Reporting requirements may be updated with advanced notice to the Contractor and without contract amendment.

The Contractor shall submit performance data and reports sufficient for the County to monitor implementation and assess progress using the RBA framework (“How much did we do?”, “How well did we do it?”, “Is anyone better off?”). Reporting will focus on performance accountability for services funded under this contract.

- A. Reported data will be used for monitoring, decision-making, public transparency, and to support the biennial performance audit required by ordinance. Data will be shared with external auditors for an evaluation of the Healthy Children’s Fund. Reports shall be submitted online (<https://www.surveymonkey.com/MHWERound2>) through county-designated online forms and templates (and when applicable, a spreadsheet) in accordance with county instructions. The Contractor shall utilize the most current reporting templates provided by the County to submit quarterly reports on the 15th of the month, following completion of each quarter (July 15, October 15, January 15, April 15).
- B. On a six-month period (October 15, April 15), the Contractor will also be asked to answer questions related to the success and challenges of implementation, as well as provide feedback to Whatcom County Health and Community Services around the process. Each six-month report will contain 4-6 questions that will ask for a paragraph response to each.

EXHIBIT B – Amendment #2 COMPENSATION

Budget and Source of Funding: The source of funding for this agreement, in a total amount not to exceed \$300,530, is the Healthy Children's Fund. The budget for this agreement is as follows:

BUDGET YEAR – September 1, 2026 through August 31, 2027		
Item	Documents Required Each Invoice	Budget
Personnel (salaries and benefits) • Early Child Development Specialist – 7.5 hours/day, 5 days/week • Mental Health Specialist – up to 3.75 hours/day, 4 days/week • Mental Health Specialist – up to 2.25 hours/day, 5 days/week • Internship Learning Collaboration Coordination	Expanded General Ledger (GL) Detail. For subcontracted services, include service dates, hours, and rates.	\$228,904
Internship Stipends	• Expanded GL Detail documenting stipends paid • Name or unique identifier of Intern	\$31,200
*Light refreshments for staff trainings, team meetings, and parent facing events	• Copies of paid invoices or receipts • Meeting/Training/Event location, dates, hours	\$1,000
Supplies for personnel and intern work space and material needs	Copies of paid invoices or receipts	\$1,105
Staff/affiliate, and intern professional development/training and travel (includes speaker/facilitator fees, training materials, and travel between early learning sites)	• See Exhibit B.1 (6.c and 6.d) • Copies of paid invoices or receipts; for subcontracted services, invoices must include documentation of hours and dates	\$11,000
SUBTOTAL		\$273,209
Indirect @ 10%		\$27,321
TOTAL YEAR		\$300,530

* Light refreshments are defined as nonalcoholic beverages and edible items commonly served between meals but not intended to substitute for meals. The per person meal cost shall not exceed the current GSA rates.

Contractor's Invoicing Contact Information:	
Name	Dr. Kristi Dominguez
Phone	360-383-9207
Email	Kristi.dominguez@ferndalesd.org

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% 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 AWilliam@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, 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, affiliate, or intern
 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 AWilliam@co.whatcom.wa.us
- ☐ Submit invoices monthly, or as otherwise indicated in your contract.

Verify that:

- ☐ invoices 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.**
- ☐ 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 15% except as approved in an indirect or overhead rate agreement.

Exhibit C

Summary Data for Ferndale School District *Summary of Work to Date (Q4 2024 – Q2 2026)*

A. Summary of Progress in Relation to the Scope of Work

Overall, Ferndale School District's implementation reflects strong alignment with the intent of the Scope of Work. While direct service implementation was delayed due to staffing and onboarding timelines typical in public school systems, this period was used to build infrastructure, strengthen partnerships, and develop training systems that supported full-service launch in the 2025-2026 school year.

The District established an early childhood mental health support model embedded within Developmental Preschool and Transitional Kindergarten classrooms. The program focuses on increasing access to school-based mental health services for children ages 3-5 and their families through classroom-based support, caregiver engagement, consultation, and referral pathways. Once implementation stabilized, services were well integrated into early learning environments and supported strong engagement from staff and families.

Early delays were primarily related to hiring and onboarding the Mental Health Specialist and graduate interns, coordination with university partners, and internal district processes. During this time, the District prioritized workforce development, training, and system design, which strengthened readiness for implementation. By Fall 2025, services were fully operational, including the launch of an internship program and expansion of classroom-based supports.

B. Key Metrics and Service Data

1. Workforce Capacity and Training

Ferndale School District completed approximately 621 staff training hours focused on early childhood and school-based mental health. Training topics included trauma-informed care, Trust-Based Relational Intervention, play therapy, suicide prevention and crisis response, perinatal mental health, behavioral supports, grief and loss, and early childhood assessment and intervention. Training reached school staff, early learning staff, counselors, and community partners across Whatcom County and expanded over the course of implementation.

2. Mental Health Specialist Services

Following program launch, the Mental Health Specialist provided increasing levels of classroom-based and individualized support within Developmental Preschool and Transitional Kindergarten settings. By Q2 2026, approximately 190 children ages 3-5 had received mental health services through the program model.

Service utilization increased steadily over time as implementation matured, shifting from limited early uptake to strong and consistent engagement. Approximately half or more of children served were enrolled in Apple Health/Medicaid. Services were primarily delivered through embedded classroom supports, play-based interventions, caregiver engagement, and consultation rather than traditional clinic-based sessions.

3. Mental Health Internship Program

The District implemented a graduate-level internship program to support early childhood mental health workforce development. By Q2 2026, interns provided 51 child sessions, 14 parent sessions, 32 case management or collaboration contacts, and 53 school visits. Interns served approximately 82 children ages 3–5 and provided psychoeducation and support to both staff and families.

The internship model was integrated into district supervision structures and supported broader countywide collaboration across school districts and university partners to strengthen the local workforce pipeline.

C. Implementation Context and Learning (6- and 12-Month Reports)

Narrative reports indicate that embedding mental health supports directly within early learning environments was a key strength of the project. Once implementation was established, staff and families reported strong engagement, increased trust in services, and reduced barriers related to transportation, scheduling, and stigma.

The program strengthened collaboration between educators, mental health staff, and community partners, and improved referral pathways for children needing additional developmental or behavioral support. Providers also noted that classroom-based services supported broader learning environments through improved emotional regulation, social-emotional development, and caregiver connection.

Implementation also highlighted system-level learning, including the complexity of building school-based mental health infrastructure and the importance of sustained staffing capacity as demand increases. Overall, the District characterized the project as highly successful and expressed interest in sustaining and expanding the model into future school years and broader early learning settings.