

**WHATCOM COUNTY  
CONTRACT INFORMATION SHEET**

Whatcom County Contract Number:  
202506001 – 1

Originating Department:	85 Health and Community Services
Division/Program: (i.e. Dept. Division and Program)	8550 Human Services / 855050 Developmental Disabilities
Contract or Grant Administrator:	Jessica Lee
Contractor's / Agency Name:	Washington Initiative for Supported Employment (WISE)

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 #:	202506001	
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):		ALN#:	
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	202507002		
Is this contract grant funded?	If yes, Whatcom County grant contract number(s):		202507002	
Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	202507002		
Method of Procurement:	RFP 25-75	Contract Cost Center(s):	18541001.6610 (\$54,500) / 10008583.6610 (\$5,000)	
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 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):	\$	39,500
This Amendment Amount:	\$	20,000
Total Amended Amount:	\$	59,500

Council approval required for; all property leases, all Interlocal agreements, contracts or bid awards **exceeding \$75,000**, and grants 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.

<b>Contract Term Ends:</b>	<b>06/30/26</b>		
Contract Routing:	1. Prepared by:	JL	Date: 12/11/25
	2. Health Approval:	CR	Date: 01/16/2026
	3. Attorney signoff:	Kimberly A. Thulin	Date: 01/27/2026
	4. AS Finance reviewed:	DK	Date: 1/28/2026
	5. IT reviewed (if IT related):		Date:
	6. Contractor Program Manager Review:		Date:
	7. Executive Contract Review:		Date:
	8. Council approved (if necessary):	AB2026-127	Date:
	9. Executive signed:		Date:
	10. Original to Council:		Date:

**WHATCOM COUNTY CONTRACT AMENDMENT**  
**Training and Technical Assistance**

**PARTIES:**

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

**AND CONTRACTOR:**  
**Washington Initiative for Supported Employment**  
**16000 Christensen Road, Suite 212**  
**Tukwila, WA 98188**

**CONTRACT PERIODS:**

**Original: 07/01/2025 – 06/30/2026**

**Amendment #1: 02/11/2026 – 06/30/2026**

**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**

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**DESCRIPTION OF AMENDMENT:**

1. Per the original contract “General Terms, Section 40.1, Modifications”, updates Exhibits A – Scope of Work and B – Compensation, to add requirements related to the provision of additional services and the development of employer engagement and community inclusion initiatives and increases funding by \$20,000 to support the provision of these additional services.
2. Funding for the total contract period (07/01/2025 – 06/30/2026) is not to exceed \$59,500.
3. All other terms and conditions remain unchanged.
4. The effective start date of the amendment is 02/11/2026.



**EXHIBIT "A" – Amendment #1**  
(SCOPE OF WORK)

**I. Background and Purpose**

The Whatcom County Developmental Disabilities Program coordinates with a variety of community agencies who provide services to individuals with developmental disabilities. These agencies require ongoing support and training to enhance or maintain quality of services. The intent of training and technical assistance is to enhance services, programs, service outcomes, and contract compliance.

**II. Statement of Work**

The Contractor will provide training, technical assistance and consultation to Whatcom County staff, County contracted service providers, school districts, and community members, as described below or otherwise authorized by the Whatcom County Health and Community Services Developmental Disabilities Program. TA will promote best practices in Supported Employment, Inclusion and transition from school to adult services. Training and technical assistance activities will be pre-approved in writing by the Administrative Officer using the Training & Technical Assistance Authorization Form (Exhibit C). Training event topics will be identified and requested throughout the contract period.

Training and technical assistance (TA) will be provided in the following ways, as directed by the County:

- A. One-on-one TA to school district staff related to best practices in school to work transition. TA requests from school districts will be authorized through the completion of the authorization form.
- B. One-on-one assistance to County contracted service providers related to best practices in supported employment and community inclusion. Includes Individualized Technical Assistance related to specific clients, as well as TA related to program and service development, improvement and implementation. TA requests from contractors will be authorized through the completion of the authorization form.
- C. TA to the County and contracted providers related to developing and implementing Countywide employer engagement and hiring initiatives
- D. TA to the County and community partners related to developing Countywide initiatives designed to increase the inclusion of people with DD in their communities.
- E. Training events for County contracted service providers, community members, school districts, individuals/family members with developmental disabilities, and other organizations as directed and authorized by the County. This may include the following tasks:
  1. Identify Contractor staff or subcontractors who are qualified to present on topics specified by the County.
  2. Assist the County in conducting outreach to individuals and organizations who would benefit from information and training.
  3. Copy training materials as needed, develop training agenda and send out training announcement.
  4. Maintain registration information by compiling a list of the names of individuals registered for training and the agency or organization that they represent.
  5. Attend the training to monitor registration, provide materials and ensure necessary equipment is available.
  6. Distribute and collect evaluations of the training event and send copies to the County.
  7. Pay for room rentals and equipment, as needed.
  8. Pay for consultants to include presentation fee, accommodations and travel expenses.
  9. Providing participants with certificates of completion.

- F. Make available, contractor developed and publicly advertised, on-line webinars and in person training to Whatcom County providers and community members. Examples include the annual state-wide Community Summit and the [Washington Online Academy 100](#) and [200](#) series.
- G. Provide consultation to Whatcom County Program staff as directed. Consultation activities may include professional consultation with regard to program development, community assessment, planning activities, community information, and capacity building.

### III. Program Requirements

- a. The Contractor shall designate a key staff member to be responsible for coordinating authorized training and TA activities and to act as a liaison with County staff.
- b. The Contractor shall develop and maintain a list of TA resources for potential use by the County, including training offered directly by the Contractor.
- c. The Contractor shall work in cooperation with other counties as needed to coordinate and provide training opportunities.
- d. The Contractor will provide training materials as requested by the County.
- e. The Contractor's employees, subcontractors and/or volunteers who may have unsupervised access to vulnerable DSHS clients, in accordance with RCW 43.43.830 – 845, RCW 74.15.030 will have a background criminal history clearance completed every three years. If the Contractor reviewing the application elects to hire or retain an individual after receiving notice that the applicant has a conviction for an offense that would disqualify the applicant from having unsupervised access to vulnerable clients, as defined in RCW Chapter 74.34, then the County shall deny payment for any subsequent services rendered by the disqualified individual. The DSHS Background Check Central Unit (BCCU) shall be utilized to obtain background clearance.
- f. A copy of the Disability Rights of Washington (DRW) Access Agreement with DDA is available at <https://www.dshs.wa.gov/sites/default/files/DDA/dda/documents/WPAS.pdf>. The Contractor shall review the Access Agreement. The Agreement covers DRW's access to individuals with developmental disabilities, clients, programs and records, outreach activities, authority to investigate allegations of abuse and neglect, other miscellaneous matters, and is binding for all providers of DDD contracted services.

### IV. Additional Requirements

Per the Washington State Department of Social & Health Services, the Contractor must comply with the following Applicable Laws and Washington State Requirements:

- a. The Contractor must ensure compliance with the Department of Social Health and Human Services (DSHS) General Terms and Conditions which is incorporated by reference. A copy of the general terms and conditions is posted on the County Health and Community Services contractor resources page. <https://www.whatcomcounty.us/713/Public-Health-Contractor-Resources>.
- b. The subcontractor shall abide by the requirements of Governor's Directive 22-03 and all subsequent amendments. By signature to this Contract, the Contractor certifies that they are not presently an agency of the Russian government, an entity which is Russian-state owned to any extent, or an entity sanctioned by the United States government in response to Russia's invasion of Ukraine.
- c. The contractor must ensure the security of Confidential Information when transporting client records containing confidential information outside of a secure area in line with the DSHS data security agreement, incorporated by reference. A copy of the Data Security agreement may be found on the County Health and Community Services contractor resources page. <https://www.whatcomcounty.us/713/Public-Health-Contractor-Resources>

**EXHIBIT “B” – Amendment #1**  
(COMPENSATION)

**Budget and Source of Funding:** The source of funding for this contract, in an amount not to exceed \$59,500 is the Washington State Department of Social & Health Services, Developmental Disabilities Administration. The budget for this contract is as follows:

Cost Description	Rates & Documents Required with Each Invoice	Budget
Training & Technical Assistance (TA) to County Contractors, staff and community members	<ul style="list-style-type: none"> <li>• \$140-\$175/hour based on staff assigned – See staff rate schedule below. Travel time from the Contractor’s office may be billed at the above hourly rate. Time must be billed by quarter hours.</li> <li>• Documentation to include brief description of activities, date/hours of service and staff rate/hour</li> </ul>	\$50,000
Individual Technical Assistance (ITA) for specific DDOS eligible clients authorized by the County	<ul style="list-style-type: none"> <li>• \$165/ hour with other costs approved per the documentation requirements specified above</li> </ul>	
Subcontracted Services	<ul style="list-style-type: none"> <li>• Reimbursement as <u>pre-authorized</u></li> <li>• Travel and accommodation costs will be reimbursed at GSA rates, specific to location</li> <li>• May include a 15% processing fee</li> </ul>	
Contractor sponsored and publicly <sup>1</sup> available training/conferences (for Whatcom County contractors and community members as <u>pre-approved</u> by the County.)	Reimbursement at publicly advertised registration rates. Reimbursement requests for registration expenses must be accompanied by receipts or paid invoices [see Exhibit B.1 (6.d)].	\$6,000
Training materials, supplies and rental costs	Reimbursement as <u>pre-authorized</u>	\$500
Travel and Accommodation Costs	See Exhibit B.1 (6.c and 6.d)	\$3,000
<b>TOTAL</b>		<b>\$59,500</b>

<sup>1</sup> Documentation related to reimbursement for publicly available training will include a list of Whatcom County participants.

<b><sup>2</sup>Staff Rate Schedule</b>		
Tier	Staff Type	Rate/Hour
1	Program Support	\$140
2	Professional Services	\$165
3	Directors	\$175

<sup>2</sup> Staff rates may not increase during the contract period (07/01/2025 – 06/30/2026)

<b>Contractor’s Invoicing Contact Information:</b>	
<b>Name</b>	
<b>Phone</b>	
<b>Email</b>	

**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 in an amount not to exceed 10% of the total budget. Line item changes that exceed 10% must be pre-approved by the County Contract Administrator, prior to invoicing.
2. When applicable, indirect costs and fringe benefit cost rates 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](mailto:HL-BusinessOffice@co.whatcom.wa.us) and [JLLee@co.whatcom.wa.us](mailto:JLLee@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 15<sup>th</sup> of the month, following the month of service, except for January and July where the same is due by the 10<sup>th</sup> 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, mileage will be reimbursed at the current GSA rate ([www.gsa.gov](http://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
  - d. 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](http://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.
8. 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.
9. 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.**
10. 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](mailto:HL-BusinessOffice@co.whatcom.wa.us) and [JLLee@co.whatcom.wa.us](mailto:JLLee@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 10% except as approved in an indirect or overhead rate agreement.

**EXHIBIT "C"**  
**Training and Technical Assistance Authorization Form**

**Type of Request:**

- Professional Development (BARS .31)                       Technical Assistance (BARS .31)  
 Community Information (BARS .41)                       Partnership Projects with Districts (Bars .94)

**Name of Organization benefiting from training, technical assistance or another program support:**

**Description and purpose:**

**Proposed dates or timelines**

**What outcome are the proposed investments designed to achieve?**

**Name and purpose of subcontractor, if applicable:**

**Estimated costs:**

Type of cost	Description	Documentation	Total \$
Staff costs		Date and hours of service	
Equipment, materials or other direct costs		Reimbursement	
Subcontractor fees		Reimbursement	
Brokerage fees @15% applied to subcontractor costs		Reimbursement	
Travel and accommodations	Reimbursed at U.S. General Services Administration Domestic Per Diem Rates ( <a href="http://www.gsa.gov">www.gsa.gov</a> )	Dates, location, purpose	
<b>Subtotal</b>			

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Whatcom County Program Specialist