WHATCOM COUNTY         Whatcom County Contract Numb           CONTRACT INFORMATION SHEET         201910011 – 4									
Originating Department: 85				Health and Community Services					
Division/Program: (i.e. D	8550 Human Services / 855060 Substance Abuse								
Contract or Grant Admir	Joe Fuller								
Contractor's / Agency Name: Whatcom Family & Community Network									
Is this a New Contract? If not, is this an Amendment or Renewal to an Existing Contract? Yes 🖂 No 🗌							No 🗆		
Yes 🗌 🛛 No 🖂	If Amendment or Rene	wal, (per WC	C 3.08.100 (a))	Original C	ontract #:		2	20191001	1
Does contract require Council Approval? Yes 🖂 No 🗌 If No, include WCC:									
Already approved? Co	ouncil Approved Date:		(Exclusions see:	Whatcom Co	unty Codes 3.0	6.010, 3.0	08.090	and 3.08.10	<u>)0)</u>
Is this a grant agreeme	nt?								
Yes No 🖂	If yes, grantor age	ncy contract nu	umber(s):		CI	FDA#:			
Is this contract grant fu	nded?								
Yes 🛛 No 🗆	If yes, Whatcom C	ounty grant co	ntract number(s)		2022010	16			
Is this contract the resu	ult of a RFP or Bid process?				Contract C	ost			
Yes 🖂 🛛 No 🗖	If yes, RFP and Bid numbe	er(s): 19	-40		Center:		1241	13/6773	50
Is this agreement exclu	uded from E-Verify? No	Yes [							
If YES, indicate exclusio	n(s) below:								
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Interlocal Agreement (between Governments).  Public Works - Local Agency/Federally Funded FHWA.									
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any prior amendments):			onal service contra act amount, whiche				ease gi	reater thar	n \$10,000 or
\$ 500,000			ing an option conta				oved b	v the cour	icil.
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Total Amended Amount	:		ward is for supplies						
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	is contract provides funding for s	ervices to redu	uce risk for substa	ance use a	nd poor men	tal hea			
	bugh outreach, education, mento					n and co	ommu	nity buildi	ng, and
Term of Contract:	nt increases funding to support a	additional youtr			11/31/2	2022			
	1. Prepared by:	JT	Expiration Date	;.	12/31/	Date		05/08/2	123
Contract Routing:	2. Attorney signoff:	RB				Date		05/10/2	
	3. AS Finance reviewed:	A Martin				Date		05/12/2	
4. IT reviewed (if IT related):     Date:									
5. Contractor signed: Date:									
6. Executive Contract Review:     Date:									
7. Council approved (if necessary): AB2023-344 Date:									
	8. Executive signed:					Date			
	9. Original to Council:					Date	:		

Whatcom County Contract Number:

201910011 – 4

#### WHATCOM COUNTY CONTRACT AMENDMENT

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

AND CONTRACTOR: Whatcom Family & Community Network 2303 Moore Street Bellingham, WA 98229

#### **CONTRACT PERIODS:**

Original:	01/01/2020 - 12/31/2020
Amendment #1:	01/01/2021 - 12/31/2021
Amendment #2:	01/01/2022 - 12/31/2022

Amendment #3: 01/01/2023 – 12/31/2023 Amendment #4: 05/01/2023 – 12/31/2023

# 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 A Scope of Work, to add section C. for youth-led and prevention related training and initiatives for the period of May 1, 2023 through June 30, 2023, summarized as follows:
  - a. Provide one youth-led Trusted Adult Workshop to 10-15 adults.
  - b. Provide a shorter Trusted Adult Workshop at the June Whatcom Prevention Coalition Meeting to approximately 15 adults.
  - c. Host a Trusted Adult Art Contest for approximately 50 youth in Whatcom County.
  - d. Promote youth designed Trusted Adult messaging through outdoor bus advertisements.
  - e. Coordinate and facilitate Mad Hope Youth Suicide Prevention Training with approximately 50 middle and high school students during the remainder of the 2022-2023 school year. Host post training focus groups with 4 -5 youth ages 14 18.
  - f. Plan and coordinate the Contractor's Summer Volunteen Program.
  - g. Conduct research on the correlation between Substance Use (including cannabis and tobacco), Mental Health and Suicide Prevention in order to effectively incorporate substance use prevention into the Contractor's mental health and suicide prevention strategies.
  - h. Send two staff to the Virtual Summer Montana Institute (one virtual, one in person).
  - i. Promote substance use and mental health prevention messages via social media.
- 2. Amend Exhibit B Compensation, to add \$85,452 in WA State Department of Health Youth Cannabis & Commercial Tobacco Funding to support the above referenced trainings and initiatives.
- 3. Funding for this contract period (01/01/2023 12/31/2023) is not to exceed \$230,452.
- 4. Funding for the total contract period (01/01/2020 12/31/2023) is not to exceed \$585,452.
- 5. All other terms and conditions remain unchanged.
- 6. The effective start date of the amendment is 05/01/2023.

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, Co	ommunity Health & Human Services Manager	Date
DEPARTMENT HEAD APPROVAL:	itenbach, Health and Community Services Director	Date
		Dato
APPROVAL AS TO FORM:		-
Royce Buckingha	am, Senior Civil Deputy Prosecutor	Date
FOR THE CONTRACTOR:		
	Kristi Slette, Executive Director	1
Contractor Signature	Printed Name and Title	Date
FOR WHATCOM COUNTY:		
Satpal Singh Sidhu, County Executive	Date	
CONTRACTOR INFORMATION:		
Whatcom Family & Community Network 2303 Moore Street Pollingham WA 98220		

Bellingham, WA 98229 Kristi.Slette@wfcn.org

#### Exhibit "A" – Amendment #4 Scope of Work

#### I. Background

The services provided under this contract have been designed to prevent youth substance use and poor mental health by reducing risks for those behaviors, and develop protective factors and resilience. Research shows that youth are more at risk of anti-social behaviors if they are socially isolated, do not feel like they belong, and have no hope or sense of purpose. In Whatcom County, many youth are struggling with issues that challenge their ability to connect and build resilience. 38% of 10<sup>th</sup> graders in Whatcom County reported feeling so sad or hopeless for two weeks or more that they stopped doing usual activities. 24% of 10<sup>th</sup> graders also reported seriously contemplating suicide. 22% of 10<sup>th</sup> graders reported using alcohol in the past month, and 32% of 8<sup>th</sup> graders report being bullied in the past month. Individuals who feel connected and 'bonded' to peers, family, school, and community are less likely to use drugs, experience poor mental health, commit crimes, join gangs, or engage in other unhealthy behaviors.

The purpose of this contract is to provide opportunities for youth and families to participate in healthy activities that strengthen relationships. The Contractor will provide youth development classes, parent skill building activities, community training, mentoring, multiple evidence-based best practice programming, and coalition coordination and community building strategies. Coalition efforts will include environmental (population-based) strategies, which are efforts focused on changing aspects of the environment that contribute to the use of alcohol and other drugs, and support of a state-wide substance abuse public awareness campaign.

The use of evidence-based activities in this project will help achieve **both** positive **behavioral outcomes**, as well as demonstrate **financial benefits** to the public. *Cost savings for these strategies, according to the Washington State Institute on Public Policy, range from \$1,167 per participant to as much as \$20,706 per participant.* Savings by service/program can be found at <u>https://www.wsipp.wa.gov/BenefitCost</u>. Behavioral outcomes evidenced by these federally recognized best practice programs also include:

- 1. 25% reduction in the rate of child maltreatment
- 2. 33% reduction in the rate of out-of-home placements e.g., in foster homes
- 3. 35% reduction in the rate of hospitalizations or emergency room visits for child maltreatment injuries
- 4. Reduced rates of skipping school and increased academic performance
- 5. Reduced rates of initiating alcohol and other substance use
- 6. Decreased rates of past month use of alcohol and other substance use
- 7. 88% of parents reported a decrease in harsh discipline and 76% reported an increase in positive parenting
- 8. 76% of parents reported decreased antisocial behavior in their child
- 9. 79% of youth reported increased emotional competence and 75% reported improved concentration/attention
- 10. 83% of students met their academic performance standards

Research has also shown that individuals who develop skills (communication, peer refusal, conflict resolution, etc.) while increasing knowledge about risks, develop essential resilience to negative behaviors.

#### II. Statement of Work

This initiative will target 750 individuals, including 200 parents and 550 school-aged youth. Additional community-wide trainings and family engagement opportunities will also target 2,000 youth and families. An emphasis on outreach will focus on youth vulnerable to mental health and substance abuse risks due to exposure to Adverse Childhood Experiences, community health disparities, or other circumstances that elevate risk. The primary target locations for this initiative will be areas demonstrating elevated risks for behavioral health problems, but also have the capacity to implement strategies.

Some of the following services will be provided through the use of subcontracts to community providers who have already demonstrated success with the programs. All subcontracts will be subject to the review and approval of the County.

- A. The Contractor will provide the following services:
  - <u>Conflict Resolution Training</u> deliver conflict resolution workshops and restorative practices using best practices for small-group facilitation, classroom management, and strategies for engaging with at-risk youth. Skill-building activities include 3 – 4 hour classroom presentations, 6 – 8 hour small group workshops, generally once per week in one-hour sessions. Additional skill-building activities include conflict coaching (1 – 4, one-hour sessions, weekly) and leadership training (1 – 2, 2-hour sessions, weekly). Intervention activities may include peer-peer mediation, restorative circles, and restorative conferences, generally 1 – 2 sessions, 2 hours each.
  - <u>Mentoring Services</u> target mentoring services to 15 20 youth through a blend of in-person and teleconnections. Services will be delivered weekly during the academic school year. Respecting COVID-19 safety guidelines in place, mentoring staff will perform enrollment activities, training, match support, and services to engage youth in positive, healthy activities that increase connection to positive individuals.

Program Outcome Evaluation surveys designed for these services will be completed by mentors/parents to document improvement in confidence, competence, and other subject improvements.

- 3. <u>Parenting Training and Support</u> Program will partner with individual families to provide individual parent coaching in one of four evidence-based curriculums. Focusing on parents with children ages 0 8 years, services will target at least 30 adults and 30 children. Parenting Coaches provide initial interviews that are trauma-informed and utilize motivational interviewing, identifying risks and protective factors. Families receive 0 12 parent coaching sessions (4 sessions per family on average). Parent Coaches provide outreach to families and partner organizations including attendance at partner meetings, participation and report at Whatcom Prevention Coalition meetings, and participate at Shuksan Community Family Night if coordinated. The evidence-based curriculums include:
  - a. Incredible Years A program guided by developmental theory on the role of multiple interacting risk and protective factors in the development of conduct problems. The program is designed to work jointly to promote emotional and social competence and to prevent, reduce, and treat behavioral and emotional problems in young children. Provide two, 6-week evidence-based Incredible Years Attentive Parenting Classes in rural communities currently lacking these services. Each series serves up to 12 families (24 families--36 parents and 48 children). Each session is 2.5 hours and includes two Brigid Collins Incredible Years-trained facilitators, onsite childcare, a meal, and a weekly check-in phone call with a facilitator. Incredible Years is for parents of children ages 2 6 years.
  - b. Parent Child Interaction Therapy (PCIT) A treatment program for young children with conduct disorders that place emphasis on improving the quality of the parent-child relationship and changing parent-child interaction patterns. PCIT was developed for children ages 2 7 years with externalizing behavior disorders.
  - c. Positive Parenting Program (Triple P) Triple P is a multilevel system of parenting and family support strategies for families with children from birth to age 12, with extensions to families with teenagers ages 13 to 16. Triple P is designed to prevent social, emotional, behavioral, and developmental problems in children by enhancing their parent's knowledge, skills, and confidence. Triple P has five intervention levels of increasing intensity to meet each family's specific needs. Triple P has a great deal of flexibility and is very effective with parent's more complex mental health needs and creates a therapeutic relationship that deals with case management issues and behavioral plans.
  - d. **Promoting First Relationships -** Promoting First Relationships (PFR) is a home-based program designed to strengthen relationships between infants and toddlers and their caregivers, to support socio-emotional development in these children, and to improve caregiver sensitivity.

Each of these evidence-based programs has guidance from model developers and researchers in how to best adapt these models to telehealth delivery. Providing these interventions over telehealth is a way to reduce barriers for families, particularly in seasons of social distancing.

The goals for parent training and support are for 80% of parents to increase their knowledge of child development and non-punitive discipline, and for 80% of parents to improve their relationship/bond with their child.

- 4. <u>Youth Development Opportunities</u> provide resilience and hope development opportunities a minimum of 10 times through social media & on-line outreach, school based prevention clubs, peer support networking, youth leadership events (virtual or face to face), and service opportunities. Topics address issues/risks that youth face like substance use, family concerns, isolation, depression, and bullying. Interactions provide opportunities for youth to participate in positive activities/opportunities to build skills, including communication, social skills, and leadership. Material and experience will be delivered to 10-20 individuals per session.
- 5. <u>Youth Outreach</u> provide direct services to youth, which can include afterschool programming, coordinating community volunteers and partnerships that provide opportunities and skill building for high-risk youth, including youth who are at-risk of gang engagement. Youth outreach will target 20 youth, grades 5 to 12, for prevention services. This includes face-to-face or virtual interactions or other direct communication with young people, connecting with parents and schools to gain support for youth participation, and to connect families to vital community resources. The Youth Outreach Coordinator will perform at least (100) one-hundred hours of direct services across the calendar year. Additional effort is dedicated to engage coalition members and other community organizations to support youth development activities and training. The goal of the coordinator is to increase connection of youth to peers, family, and community, and will be documented through program records.
- 6. <u>Prevention Training</u> provide a minimum of six coalition, community or school-based trainings. Topics include, but are not limited to the NEARH sciences (Neuroscience, Epigenetics, Adverse Childhood Experiences, Resilience & Hope); evidence based and innovative prevention sciences (Positive Social Norming; Strategic Prevention Framework); Community Capacity Building Skills, such as Art of Hosting; Liberating Structures or other participatory leadership skills; Trusted Adult Skill Development; Youth Suicide Prevention trainings (like Youth Mental Health First Aid; QPR: Question, Persuade, Respond; and MAD HOPE peer to peer education. Training will be used to educate the community on raising resilience and hope to mitigate risks associated with exposure to trauma and toxic stress such as substance abuse, violence (including gang activity and domestic violence), and other problem behaviors; increase understanding of healthy youth development; and build essential skills that help children, youth, families and communities thrive. (i.e., communication and conflict resolution). Ten to twenty individuals will participate in each training event.
- <u>Coalition & Community Building</u> coordinate a local coalition of stakeholders to engage in community assessment, service planning, evaluation, and implementation. Efforts must include a focus on the Shuksan Middle School catchment area and support the Community Prevention & Wellness Initiative, following the Community Coalition Guide <u>https://www.theathenaforum.org/cpwi-community-coalitionguide</u>.
  - a. Coalition coordination- coordinate monthly Whatcom Prevention Coalition meetings and standing workgroups needed for the delivery of services. Recruit and retain membership that is representative of the community.
  - b. Strategic Plan- conduct an annual needs and resource assessment, or a modified update. Establish assessment workgroups as necessary to review data to make recommendations of priority programs. Revise, as necessary, work plan, logic model or other items that identify goals, focus populations, and strategies.
  - c. Coalition Assessment Tool (CAT) Survey Administer an annually CAT to coalition members to assess coalition operations and ongoing functioning, and to identify areas for improvements.
  - d. Community Survey Tool- disseminate and collect survey results from adults in the community to gather information about adult concerns of youth substance use and mental health. Surveys will be targeted to a minimum of 250 individuals representative of the community.
  - e. Environmental strategies (population level) support local social norms campaign and opioid abuse prevention interventions. Coalition members lead and oversee environmental strategies.

- f. Support a public awareness campaign relating to drug issues in the community.
- 8. <u>Suicide Prevention Strategies</u> increase local capacity to develop and strengthen volunteer-based, youth-centered risk reduction and suicide prevention work. Provide engagement opportunities and school and community-based interactions (virtual or face to face for youth, by youth and supported by professionals). The M.A.D.-H.O.P.E. (Making a Difference-Helping Other People Everywhere) will rely on a 'peer to peer' approaches including opportunities for creative expression, stigma reduction outreach, peer centered support and outreach, as well as a train-the-trainer education model.
  - a. Provide outreach, education and risk reduction strategies for suicide and substance use prevention for up to 500 individuals in Whatcom County. This includes a focus on middle and high school youth, community organizations, community members, families and parents, school personnel, the LGBTQ community, and populations that demonstrate high levels of risk for poor mental health and substance use.
  - b. Train up to fifteen (15) new trainers and volunteers to disseminate knowledge, skills and resources on suicide prevention, risk reduction and related behavioral health topics. This will include understanding the warning signs of suicide, knowing how and where to refer people that may need professional help, understanding the impact of substance use, promoting healthy youth development, and building resilience and hope.
    - 1) Recruit five (5) youth ages 14 to 24 to engage in mental wellbeing strategies to build resilience and hope.
    - 2) Recruit five (5) volunteers who identify as members of populations with higher risks for depression and suicidality.
    - Recruit five (5) adult volunteers who can support youth volunteers to guide MAD HOPE training experiences.
  - c. Provide training (virtual or face to face) as follows:
    - 1) Deliver up to fifteen (15) trainings to community and school-based audiences.
    - 2) Two (2) MAD HOPE presentation "train the trainer" trainings.
    - 3) Three (3) community based trainings.
    - 4) Ten (10) in-school trainings.
  - d. Provide up to twenty (20) community outreach and engagement interactions through the following:
    - 1) Monthly Meetings with a Sustainability Planning Committee.
    - 2) Five (5) Core Team members meetings of the MAD HOPE project.
    - 3) Two (2) to four (4) Meetings with other program directors of evidence based suicide prevention programs.
    - 4) Contact all seven (7) Whatcom County school districts to determine needs, identify appropriate staff contacts, and schedule presentations.
    - 5) Examine other effective youth suicide prevention programs (e.g. Sources of Strength, and Forefront) and attend youth prevention conferences and trainings to ensure evidence-based principles are locally implemented. Develop or adapt a curriculum that meets local needs while following effective principles.
  - e. Recruit, train, schedule, and manage support for individuals to deliver these prevention strategies and the training curriculum as part of M.A.D. H.O.P.E. This could include a 'peer approach' that includes students from high schools and colleges, but also include community members. Outreach to existing prevention clubs or explore developing new school-based clubs to focus on this work, as appropriate.
  - f. Coordinate a Core Team that consistently works on adapting the M.A.D. H.O.P.E. presentation and assessment to ensure it meets the needs of diverse audiences and is aligned with best practice and current research in suicide prevention.

- B. The Contractor will also:
  - 1. Encourage youth to participate in school prevention clubs where youth can engage in healthy social opportunities through community service and leadership activities (virtual or face to face).
  - 2. Utilize stipends as an engagement tool for hard to reach youth and parents, providing additional capacity to deliver activities in this contract.
  - 3. Information about services delivered through this contract will be shared with school staff in the targeted areas. School staff can refer students or families to the available services. Similarly, youth and families served through this contract will be made aware of resources available in school settings.
  - 4. Link students to appropriate in-school or community-based mental health and/or substance use disorder services, as appropriate.
  - 5. Ensure efforts comply with all state and federal laws regulating confidentiality, as relevant.
  - 6. Ensure all services are delivered by a qualified professional that exhibits cultural competency working with diverse populations and a value for equity and social justice. Contractor will utilize hope science research and data to strive to create a "hope-informed" community.
  - 7. Participate in County evaluation efforts, including evaluation planning, data collection, and reporting. Service reports will be submitted at least twice each year according to the following timetable:

Service Period	Due Date
January – June	July 31 <sup>st</sup>
July – December	January 31 <sup>st</sup>

- a. Service reports will include the following information for each service area:
  - i. Number of single service events provided (community events, trainings, meetings, etc.).
  - ii. Number of individuals reached through single service events.
  - iii. Number of recurring service events provided (groups, classes, coalition meetings, etc.).
  - iv. Number of individuals reached through recurring service events.
- b. Outcome reports will be submitted as appropriate for the area of service. Data may be collected through program records, pre/post surveys, school records, interviews with participants or providers, or other measurement tools.
  - 75% of individuals participating in prevention trainings will increase knowledge of the training topic (suicide prevention knowledge, resilience, conflict management, substance use, etc.) as measured by pre/post-test surveys or similar tool
  - ii. 75% of individuals participating in prevention trainings will increase skills related to the training topic (ability or willingness to utilize or apply information) as measured by pre/posttest surveys or similar tool
  - iii. 75% of individuals participating in programs, services, and strategies will demonstrate improvements in measured behaviors. These additional measures will be developed and defined in consultation with County, and may include:
    - 1. Increased knowledge, attitudes, and skills in content areas (communication, parenting skills, confidence, competence, etc.)
    - 2. Increased youth opportunities for engagement in pro-social activities
    - Increased engagement in coalition and community building strategies (coalition participation, Coalition Assessment Tool, Community Adult Survey responses, etc.)
    - 4. Improved behaviors, such as

- a. School performance (academics, attendance, discipline)
- b. Family functioning
- c. Reduced risk for substance use
- d. Increased mental health and wellbeing
- e. Increased resilience, protective factors, and hope
- c. Collect additional documentation to verify activities, provided to the County upon request. This may include copies of event/training/class flyers or posters, registrations lists, sign-in sheets, case files, outreach materials, and other documents demonstrating the work performed.
- C. During the period of May 1, 2023 through June 30, 2023, the Contractor will:
  - Provide one Youth-led Trusted Adult Workshop to 10 15 adults and a shorter Trusted Adult Workshop at the June Whatcom Prevention Coalition Meeting to approximately 15 adults. The goal is to help adults understand what youth need to feel heard and understood and to seek help.
    - a. WFCN staff will support youth in developing their leadership in designing and implementing the workshop through four planning sessions including a post training reflection activity. In these workshops, four youth design and implement a Trusted Adult Workshop. Youth provide practical tips on how to support young people when they are struggling with mental health and substance use. They also discuss ineffective adult communication with youth. Workshops include activities, discussion and role playing.
  - 2. Host a Trusted Adult Art Contest for approximately 50 youth in Whatcom County.
    - a. One to two youth will create and implement a Trusted Adult Art Contest that will consist of recruiting youth to submit art that depicts the idea of "What Does a Trusted Adult Mean to You?".
    - b. An estimated 50 youth will participate including youth contest coordinators and youth submitting art.
    - c. The art will be photographed and made into electronic post cards posted on the M.A.D.-H.O.P.E. web site. Youth will be able to download the postcards to send to their Trusted Adults.
    - d. A youth panel will select the top three art submissions and provide a stipend to the winners. All youth will be acknowledged for their submissions and receive M.A.D.-H.O.P.E. stickers.
  - 3. Promote youth designed Trusted Adult messaging through outdoor bus advertisements, on Whatcom Transportation Authority buses.
    - a. Bus advertisements will be designed by a youth artist (either via youth art contest or separately) with a message that will encourage adults to listen and support youth as important to youth mental health and well-being. Bus advertising will begin by June 30, 2023 but may continue on buses throughout the year.
  - 4. Coordinate and facilitate a three-hour Mad Hope Youth Suicide Prevention Training with approximately 50 middle and high school students during the remainder of the 2022-2023 school year.

Training curriculum includes developing positive coping skills and resilience, reducing stigma around youth mental health, identifying protective factors, identifying signs of suicide, examining the truths about suicide, and practicing ways to help a struggling peer, including accessing resources and finding a trusted adult.

a. Host post training focus groups with 4 – 5 youth, ages 14 – 18 to discuss youth feedback on the training including: engagement, equity, strengths and potential improvements to better build youth skill and confidence in helping a struggling peer/friend, finding help for themselves and developing additional coping skills, etc.

- b. Purchase materials and supplies to prepare for the 2023-2024 school year. Anticipated training reach for the 2023 2024 school year is 1,000 2,000 students.
- 5. Plan and coordinate the two-day Summer Volunteen Program focused on a "Summer of Well-Being".
  - a. The targeted audience is LGBTQ+ teens and will aim to serve 15 20 youth.
  - b. Youth will engage in activities focused on building youth resilience to promote mental wellbeing including examining issues of identity and resilience, practicing self-regulation and co-regulation, discussing youth suicide prevention and the connection between substance use and mental health.
  - c. This contract is for planning and coordination time for the Volunteen Program that will occur during summer 2023, but after June 30<sup>th</sup>. During the event dates youth will engage in conversations, art activities, and a "Chalk It Up" service project in the Roosevelt Neighborhood and park.
- 6. Conduct research on the correlation between Substance Use (including cannabis and tobacco), Mental Health and Suicide Prevention in order to more effectively incorporate substance use prevention into the Contractor's mental health and suicide prevention strategies.
  - a. One to two youth will conduct research on how youth substance use (including cannabis and tobacco) affects youth mental health and the connection between substance use and suicide.
  - b. Youth will summarize their findings in a document with cited research and resources and present their findings to the MAD-HOPE team to inform the ways in which the MAD-HOPE curriculum could include this information in future trainings for middle school and high school youth.
- 7. Send two staff to the <u>Virtual Montana Summer Institute</u> (one virtual, one in person) from June 20<sup>th</sup> through June 23<sup>rd</sup>, 2023.
- 8. Promote substance use and mental health prevention messages via social media.
  - a. One youth/young adult will plan and coordinate substance use and mental health prevention messaging via the Contractor's social media channels, including utilizing the Washington State Department of Health's youth cannabis and tobacco prevention campaign toolkits.
  - b. The media plan and implementation will be created by youth/young adults in partnership with the Contractor's staff.
- Submit a monthly report to the Whatcom County Youth Cannabis & Commercial Tobacco Prevention Program (YCCTPP) Coordinator by June 10<sup>th</sup> and July 10<sup>th</sup> on the previous month's activities in a reporting link provided by the County.
- 10. Provide verification that background checks have been completed for all staff and volunteers who will work with youth (ages 0 17).
- 11. Participant stipends for any of the above referenced activities will be paid as follows:
  - a. Stipend recipients must be youth and young adults ages 14 24.
  - b. Recipients of hourly rate stipends must be youth and young adults ages 17 24 and WFCN youth volunteers.
  - c. Stipends must follow WA DOH YCCTPP Guidebook and be approved by the County's YCCTPP Coordinator. Per the WA DOH YCCTPP Implementation Guidebook:
    - 1. Monetary incentives for youth are gift cards or checks (cash incentives are never allowed). Contract Manager will review and approve incentives as part of the Contractor's annual budget.
  - d. Total stipends will not exceed \$9,000 and will be allocated per the criteria indicated in the 'Stipends for Youth/Young Adults' table in Exhibit B.

### Exhibit "B" – Amendment #4 Compensation

I. Budget & Source of Funding: The source of funding for this contract, in an amount not to exceed \$230,452, is the Behavioral Health Program Fund and the Washington State Department of Health Youth Cannabis & Commercial Tobacco Program. The budget for services is as follows:

ltem*	Documentation Required with Invoice	Budget
Program Coordinator, Youth Outreach Coordinator, Director, Suicide Prevention Specialist, Coalition and Project Coordinator (salary, benefits, taxes)	Approved hourly billing rate and timesheet showing total hours and hours charged to this contract.	\$99,018.18
Supplies, Materials, Printing, Postage, and Space Rental	Receipts	\$500
Professional development/training, and travel	Receipt for registration or training fees. Ground transportation, parking, coach airfare, and ferries will be reimbursed at cost when accompanied by receipts. Reimbursement requests for allowable travel must include name of staff member, dates of travel, starting point and destination, and a brief description of purpose. Lodging costs for training are not to exceed the U.S. General Services Administration Domestic Per Diem Rates ( <u>www.gsa.gov</u> ), specific to location. Mileage log to include name of traveler, dates, start and end point, and purpose. Reimbursement will be	\$1,000
	at the Federal rate ( <u>www.gsa.gov</u> ).	
Stipends	Stipend documentation must detail each individual, number of hours, activity supported, dates of support, and include a signature of the stipend recipient (5 stipends: 1 at \$100; 4 at \$50)	\$300
Subcontracted Services	•	
Mentoring and Wrap Around Support	und Support	
Restorative & Conflict Resolution Practices	Subcontractor's invoice with dates of service, # of	\$9,000
Parent Training & Support Program	- participants	\$17,000
Administration @ 10%		\$13,181.82
	TOTAL BH Funding:	\$145,000

Youth Cannabis & Commercial Tobacco Program (YCCTPP) Funding:			
Budget 05/01/2023 – 06/30/2023 Only			
Item*	Documentation Required with Invoice	Budget	
Personnel	Approved hourly billing rate and timesheet showing total hours and hours charged to this contract.	\$57,864	
Supplies, Materials, Printing, Postage, and Space Rental	Receipts or paid invoices	\$3,650	
Professional development/training, and travel	Receipt for registration or training fees.	\$2,745	

	TOTAL YCCTPP Funding:	\$85,452
Administration @ 10%**		\$7,768
	SUBTOTAL YCCTPP FUNDING:	\$77,684
Stipends for Youth/Young Adults – see table below:	Stipend documentation must detail each individual, number of hours (if relevant), activity supported, dates of support, and include a signature of the stipend recipient	\$9,000
Advertising	Paid Invoices	\$4,425
	description of purpose. Lodging costs for training are not to exceed the U.S. General Services Administration Domestic Per Diem Rates ( <u>www.gsa.gov</u> ), specific to location. Mileage log to include name of traveler, dates, start and end point, and purpose. Reimbursement will be at the Federal rate ( <u>www.gsa.gov</u> ).	
	Ground transportation, parking, coach airfare, and ferries will be reimbursed at cost when accompanied by receipts. Reimbursement requests for allowable travel must include name of staff member, dates of travel, starting point and destination, and a brief	

Stipends for Youth/Young Adults:				
Activity	# of Stipends	Stipend Criteria	Rate of Stipends	Total Stipends
Trusted Adult Workshop	5	Ages 15 – 18 4 hours of planning, 2-hour workshop	\$100/youth	\$500
Trusted Adult Workshop at Whatcom Prevention Coalition Meeting	4	Ages 15 – 18 30 minutes planning, 1-hour workshop	\$50/youth	\$200
Trusted Adult Art Contest	3	Ages 14 – 20 Contest Winners	\$100/winner	\$300
Trusted Adult Bus Ad Design	1	Age estimate 16 – 24	\$1,000/winner	\$1,000
MAD HOPE Youth Focus Group	5	Ages 14 – 18	\$100/youth	\$500
Stipends for engagement in project	planning, research and ı	media:		
Social Media	Up to 40 project hours	Ages 17 – 24 WFCN Volunteer	\$25/hour	\$1,000
Volunteen Planning	Up to 40 project hours	Ages 17 – 24 WFCN Volunteer	\$25/hour	\$1,000
Substance Use Research Project 1	Up to 40 project hours	Ages 17 – 24 WFCN Volunteer	\$25/hour	\$1,000
Substance Use Research Project 2	Up to 40 project hours	Ages 17 – 24 WFCN Volunteer	\$25/hour	\$1,000
Trusted Adult Art Contests	Up to 40 project hours, each volunteer	Ages 17 – 24 Up to two WFCN volunteers	\$25/hour	\$2,000
Mad Hope Research	Up to 20 project hours	Ages 17 – 24	\$25/hour	\$500

\* The Contractor may transfer funds between budget line items with prior approval from the County's Administrative Officer.

\*\* Under no circumstances will the Administration rate exceed 10%.

#### II. Invoicing

- The Contractor shall submit itemized invoices on a monthly basis in a format approved by the County. Monthly
  invoices must be submitted by the 15<sup>th</sup> day of the month, following the month of service. Invoices submitted for
  payment must include the items indicated in the table above.
- 2. The Contractor shall submit invoices to (include contract #) HL-BusinessOffice@co.whatcom.wa.us
- 3. 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 more than 30 days after the expiration of this contract.
- 4. 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 in this invoice.

5. <u>Duplication of Billed Costs or Payments for Services</u>: 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.