

PERFORMANCE BASED CONTRACT GUIDELINES

1. WHAT IS THE PURPOSE AND SCOPE OF THE SERVICE?

Medical Services, review of IEP'S and Recommend Services.

2. AMOUNT OF SERVICE

(Set forth all quantities and/or amounts of time required to be devoted to the contract and describe where services are to be provided as specified in Schedule "B")

15 hours per week (Approximately)

3. WHO IS SERVED?

(Describe whether services are to be provided directly to students, to staff, etc.)

Students of YPS.

4. WHO WILL PROVIDE SERVICES?

(If individual providers are contemplated, set forth the names and qualifications of the service providers)

Myself ; Dr. Shadi H. Sa'egh M.D.

4a. WILL THE CONTRACTOR BE UTILIZING ANY VOLUNTEERS, OR BE HIRING/UTILIZING ANY SUBCONTRACTORS IN FURTHERANCE OF THIS AGREEMENT? IF SO, PLEASE LIST ALL OF THEIR NAMES AND CONTACT INFORMATION.

(If the Contractor will be using any subcontractors, volunteers, and/or other agents other than the individuals identified in question #4 above or #7 below, they need to be disclosed here)

5. WHAT WILL BE COMMUNICATED TO DISTRICT PERSONNEL, PARENTS, OTHERS ABOUT PROGRESS AND RESULTS OF THE SERVICES?

(How specifically will the contractor report to the School District (or parents, if applicable) about their progress towards achieving the goals of the contract?)

Initiating or Continuing Services for students
Such as PT/OT

6. HOW WILL THE QUALITY BE JUDGED?

(Set forth the method which will be used to evaluate contractor's performance)

7. PERSONS RESPONSIBLE FOR ADMINISTERING THE CONTRACT.

(There must be a single Board administrative employee identified as the person responsible. This person will also be responsible for signing off on contract payments)

8. ARE THE SERVICES PURSUANT TO A GRANT AGREEMENT? IF YES, WHAT IS THE GRANT, AND WHAT ARE THE GRANT REQUIREMENTS RELATED TO THIS AGREEMENT? —

9. WILL THE CONTRACTOR BE RECEIVING ANY STUDENT DATA OR OTHER DATA FROM YONKERS PUBLIC SCHOOLS? IF YES, PLEASE DESCRIBE. IF STUDENT DATA IS BEING SHARED, PLEASE PROCEED TO QUESTION 10 BELOW.
Yes.

10. WILL THE STUDENT DATA BE USED FOR THE PURPOSE OF DEVELOPING, VALIDATING, ADMINISTERING STUDENT AID PROGRAMS, OR IMPROVING INSTRUCTION? IF YES, PLEASE SPECIFICALLY DESCRIBE.

IEP'S, Student charts to assess programs
and services such as physical & occupational
therapy.