

PERFORMANCE BASED CONTRACT GUIDELINES

**Horizon Healthcare Staffing
20 Jerusalem Avenue
3rd Floor
Hicksville, NY 11801
516-326-2020**

1. WHAT IS THE PURPOSE AND SCOPE OF THE SERVICE? (Describe in detail any services to be provided or materials to be purchased)

- Horizon shall provide to School on an as-needed and as-requested basis, the full range of staffing services including Registered Nurses, Licensed Practical Nurses, Certified Nurse Assistants, Health Aides, and other Clinical professionals hereinafter referred to as (“Clinicians”). Additional practitioners (and or other temporary staff) and associated rates can be added as an addendum to this contract with agreement by both parties.

2. AMOUNT OF SERVICE?

(Set forth the monetary value of the proposed agreement and 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”)

\$264,000.00

- Horizon shall provide and furnish to School all services on an as-needed and as-requested basis. Services shall include provision of Nurse Practitioners, Registered Nurses, Licensed Practical Nurses, Certified Nurses Assistants, Medical Assistants, and Medical Billers upon the request of School.

3. WHO IN THE SCHOOL DISTRICT IS SERVED?

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

- School nursing services shall be provided primarily to students, with the occasional need to provide assessment of a staff member when warranted under rare circumstances.

4. WHO WILL PROVIDE SERVICES?

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

- Horizon will meet the qualifications of School for Nurses defined as: All Nurses are asked to complete a skills checklist and submit their nursing license/current registration for verification (NYS Office of Professions) and Office of Inspector General (Exclusion Database); and professional references are checked. Horizon will also obtain for each Nurse sent to School a current physical assessment. In addition, Horizon agrees to check the NYS Nurse Aid Registry to ensure that the CNAs sent to School are eligible to work. We will insure the BLS CPR certification is current. All Horizon employees complete our Employment Eligibility Verification (Form I-9) and will maintain those files as is required by law. Horizon agrees to cooperate with the School District and will complete any necessary forms or procedures, all at no cost or expense to the School District, and to obtain the required fingerprinting (to comply with NYS SAVE legislation). All Horizon employees have had fingerprinting checks performed and been initially cleared to work in public schools as required by Education Law of New York State. It is, however, the sole responsibility of the school district to login to the nurse’s TEACH account utilizing the nurse’s social security number to both verify clearance and to register that specific nurse with your district through the NYSED.gov

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

No

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?)

Direct contact with school building administrators, and parents, and by maintaining school building level student records as warranted.

- Cooperation with School: Horizon agrees to cooperate and participate with School in any internal peer review, external audit systems and grievance procedures as may be established by School. Horizon further agrees to participate in School case conferences and continuing in-service education for Horizon's Clinicians.

6. HOW WILL THE SCHOOL DISTRICT JUDGE THE QUALITY OF SERVICES? (Set forth the method which will be used to evaluate contractor's performance)

- School building administrators input.

- School building record review.

7. INDIVIDUALS RESPONSIBLE FOR ADMINISTERING THE CONTRACT.

Vendor Name: Horizon Heathcare Staffing

Vendor Address: 20 Jerusalem Avenue
Hicksville, New York 11801

Vendor Phone No.: 516-326-2020

Vendor Business Status: (corporation, non-profit individual, unincorporated)

Vendor Contact Name: Tina Longo CVT- Director of Medical Services & Marketing

Vendor Contact Email: dgrossman@thehorizongroup.com

Tax ID No.: 11-3407141

School District Administrator Name: Dr. Luis Rodriguez

School District Administrator Title: Assistant Superintendent Special Education and Pupil support Services

School District Administrator Phone No.: 914-376-8489

School District Administrator Email: lrodriguez2@yonkerspublicschools.org

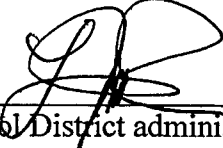
8. ARE THE SERVICES PURSUANT TO A GRANT AGREEMENT? IF YES, WHAT IS THE GRANT, AND WHAT ARE THE GRANT REQUIREMENTS RELATED TO THIS AGREEMENT?

No

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.**

No

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.**

<p>Performance Based Guidelines Reviewed and approved by:</p>  <p>_____ (Signature of School/District administrator/employee)</p> <p>_____ Dr. Luis Rodriguez (Printed Name) Assistant Superintendent Special Education and Pupil Support Services</p>
