

PERFORMANCE BASED CONTRACT GUIDELINES

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

Social Emotional Learning (SEL) and Mental Health (MH) k-12 multi-tiered student curriculum includes 390 student lessons for general education (Tiers 1 & 2), 182 student lessons for students in Special Education (Tier 3), and 182 student Mental Health lessons.

Social Emotional Learning and Mental Health Educator and Family Professional Learning include 40 video-based training modules for SEL and Trauma and 30 modules for Mental Health. Each module includes Extension Activities for PLC groups, Content Delivery which includes Concept definitions, skill explanations and definitions; Skills assessment including direct evaluation to demonstrate content knowledge and Direct Applications with practical examples of applications of skills.

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")

\$99,995.00 – to include 58 Educator Licenses and 10,030 Student Licenses

3. WHO IN THE SCHOOL DISTRICT IS SERVED?

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

Staff and students with access to Rethink Autism, Inc.'s digital platform.

4. WHO WILL PROVIDE SERVICES?

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

Rethink Autism, Inc.

- 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?)

Regular (typically monthly) review of implementation progress with district leadership.

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

Access to Rethink Autism, Inc's Administrative Dashboard, and Robust Reporting Tools will allow district leadership to monitor progress of staff and students utilizing the program and share data reflective of student and staff outcomes with Parents/Caregivers.

7. **INDIVIDUALS RESPONSIBLE FOR ADMINISTERING THE CONTRACT.**

Vendor Name: Rethink Autism, Inc.

Vendor Address: 49 W 27th St, 8th floor, New York, NY 10001 Vendor Phone No.: (800) 729-5162

Vendor Business Status: corporation

Vendor Contact Name: Megan Stuhmann, Director of Educational Partnerships

Vendor Contact Email: megan@rethinked.com

Tax ID No.: 26-1746074

School District Administrator Name: Dr. Stephanie McCaskill

School District Administrator Title: Interim Assistant Superintendent of Special Education and Pupil Support Service

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

School District Administrator Email: smccaskill@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?**

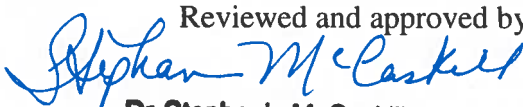
Yes, the RECOVS: Recover from COVID School Program Mental Health Grant. Rethink Autism, Inc. is serving as a Tier I support to help students develop social and emotional skills aligned with CASEL Competencies as well as mental health protective factors.

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.**

Student data will be shared with Rethink Autism, Inc. for the creation of student profiles so students may access the digital curriculum and assessment components of the program.

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.

No.

Performance Based Guidelines
Reviewed and approved by:

Dr. Stephanie McCaskill
~~Interim Assistant Superintendent~~
(Signature of School District Administrator/employee)
~~Special Education Support Services~~

(Printed Name)