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)

These (4) 2-hour sessions will extend participant knowledge and skills from a foundational understanding of trauma informed care to creating trauma responsive educational environments for staff and students. Special focus will include understanding the connection of these concepts to those experiencing housing insecurity.

- Session 1: Foundational Trauma Informed Care
- Session 2: Trauma Responsive Teaching
- Session 3: Creating Spaces for Wellness
- Session 4: Trauma Responsive Teaching: Moving Knowledge to Practice

McKinney-Vento Conference Workshop (half day in-person 4 hours)

• The Roots of Bias: Cultural Responsiveness as a Vehicle of Scholar Engagement

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")

Learning Series: Creating Trauma Responsive Educational Environments (4) 2-hour virtual sessions

Half Day In-Person Workshop for McKinney-Vento Conference (4 hours)

3. WHO IN THE SCHOOL DISTRICT IS SERVED?

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

The Learning Series Professional Development sessions and the Conference session will be provided directly to all staff across Yonkers Public Schools, as identified by Yonkers Public Schools in collaboration with CCSI facilitator.

4. WHO WILL PROVIDE SERVICES?

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

Primary Facilitators:

- Deb Salamone, MS Ed., Senior Consultant Trauma Informed Care and TIO
- John Pavlack, Consultant Trauma Informed Care and TIG
- Sara Hanson, Consultant Trauma Informed Care

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

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All work will be provided by employees of CCSI as indicated above.

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?)

CCSI will equip Yonkers project staff with session evaluation results to inform progress and district communication strategy. The report will be available through Alchemer, an online survey and reporting platform.

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

The Learning Series will provide evaluations at the conclusion of each session. A summary of evaluation results will be developed and shared with Yonkers Public Schools. Session evaluations will include indicators to assess facilitator knowledge and responsiveness, achievement of learning objectives, and open-ended responses to harvest qualitative data. The Conference session will be evaluated at the conclusion of the session in the above manner and results shared with Yonkers Public Schools.

7. INDIVIDUALS RESPONSIBLE FOR ADMINISTERING THE CONTRACT.

Vendor Name: Coordinated Care Services, Inc. (CCSI)

Vendor Address: 1099 Jay St., Bldg J, Rochester, NY, 14611

Vendor Phone No.: 585.328.5190 Vendor Business Status: Non-profit Vendor Contact Name: Joslyn Teter

Vendor Contact Email: contracts@ccsi.org

Tax ID No.: 22-2573042

School District Administrator Name: Dr. Stephanie McCaskill School District Administrator Title: Associate Superintendent School District Administrator Phone No.: 914-376-8209

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, McKinney-Vento Grant

Provide culturally sensitive and clinically appropriate training, support, and resource services to assist school sin responding to the emotional needs of students

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.

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:	
Aph WC	
(Signature of School District administrator/emplo	oyee)
Dr. Stephanie Mc Cas Kill	
(Printed Name)	