

PITTSBURGH-MT. OLIVER INTERMEDIATE UNIT

July 17, 2013

Agenda

I. COMMITTEE ON EDUCATION

- A. Consultants/Contracted Services
 - 1. Western Pennsylvania School For The Blind
 - 2. Marianne Loibl
- B. Payments Authorized
 - 3. Apple, Inc.
 - 4. Catapult Learning
 - 5. UPMC: Addiction Medicine Services of Western Pennsylvania
 - 6. OnHand Schools
 - 7. Professional Development & Learning Support Services
- C. General Authorization
 - 8. Memoranda of Understanding with the University of Pittsburgh School of Health and Rehabilitation Sciences

II. COMMITTEE ON BUSINESS

- A. Payments Authorized
 - 1. Daily Payments
- B. Proposals/Grant Awards
 - 2. Title I Delinquent
 - 3. Title I Neglected
 - 4. Title II-A

Board Action Information Sheet

ED-1
Action Item #
July 2013
Action Month

EXCELLENCE
FOR ALL

Linda M. Baehr
Submitted By
Linda M. Baehr
Person Accountable

Consultants/Contracted Services

(not to be used for District employees)

Name of Consultant or Firm:

Address:

Western Pennsylvania School for the Blind
201 N. Bellefield Avenue
Pittsburgh, PA 15213

Indicate the category of this contract:

☒ NEW ☐ RENEWAL

<input type="checkbox"/> Individual	<input type="checkbox"/> Minority <input type="checkbox"/> Non Minority	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> City Resident <input type="checkbox"/> Non-Resident
<input checked="" type="checkbox"/> Company	<input type="checkbox"/> Profit <input checked="" type="checkbox"/> Non-Profit	<input type="checkbox"/> EBE	<input type="checkbox"/> Pennsylvania <input checked="" type="checkbox"/> Pittsburgh <input type="checkbox"/> Allegheny County

- ☐ Security Clearance has been obtained ☐ Resume is attached
☒ Security Clearance will be obtained before contractor begins work
☐ Security Clearance not needed, as contractor will not be working with children

Total Contract Amount: \$ <u>\$3,840.00</u>		Account Number(s)				
Rate of Payment <u>80.00</u> per <u>hour</u>		Resp.	Fund	Func.	Obj.	Amount
<input type="checkbox"/> General Fund:	Department _____	_____	<u>10</u>	<u>1500</u>	<u>320</u>	<u>\$3,840.00</u>
<input checked="" type="checkbox"/> Supplemental Fund	Account Name _____	_____	_____	_____	_____	_____

District Goals: ☒ 1. Maximum academic achievement ☐ 2. Safe and orderly learning environment ☒ 3. Efficient and effective support operations ☒ 4. Efficient & equitable distribution of resources to address the needs of all students ☐ 5. Improved public confidence and strong parent/community engagement

What is the purpose of this contract and how will it be implemented? (Please write in complete sentences)

RESOLVED, That the Board of Directors of the Pittsburgh-Mt. Oliver Intermediate Unit #2 authorize it's proper officers to enter into a contract with Western Pennsylvania School for the Blind to provide vision services to the students of the non public schools within the City of Pittsburgh.

Total not to exceed \$3,840.00 from account 10.1500.320.380.113.000.

Who will the services benefit?

The visionally impaired students of the non public schools within the City of Pittsburgh.

Where will the services occur? (location)

Various non public schools within the City of Pittsburgh.

Additional person(s) accountable for this tab

Board Action Information Sheet

ED-1

Action Item #

July 2013

Action Month

The operating period shall be from July 1, 2013 to June 30, 2014.

Explain why an external contract is necessary to provide these services?

PMOIU2 has no one on staff able to provide this service.

Indicate process for making recommendation:

☒ Negotiated

☐ Solicited Proposals

☐ Competitive Bid

Describe the expected results of this activity:

Consultant to provide service to visually challenged students.

If this is a contract renewal, indicate the original objective of this activity:

Has objective been met? ☐ Yes; ☐ No

Please explain how the objective was met or why the objective was not met

Data Source utilized, or if a new contract, that will be utilized to evaluate contractor performance:

Will evaluation be made on the basis of predetermined written criteria? ☐ Yes ☐ No

Will there be a tangible work product at the completion of the contract? ☐ Yes ☐ No

If there is a tangible work product expected, please describe expectations and name the custodian of the work product:

Board Action Information Sheet

ED-2
Action Item #
July 2013
Action Month

EXCELLENCE
FOR ALL

Linda M. Baehr
Submitted By
Linda M. Baehr
Person Accountable

Consultants/Contracted Services

(not to be used for District employees)

Name of Consultant or Firm:

Address:

Marianne Loibl

4098 Valleyvue Drive

Gibsonia, PA 15044-9520

Indicate the category of this contract:

☐ NEW ☒ RENEWAL

<input checked="" type="checkbox"/> Individual	<input type="checkbox"/> Minority <input checked="" type="checkbox"/> Non-Minority	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	<input type="checkbox"/> City Resident <input checked="" type="checkbox"/> Non-Resident
<input type="checkbox"/> Company	<input type="checkbox"/> Profit <input type="checkbox"/> Non-Profit	<input type="checkbox"/> EBE	<input type="checkbox"/> Pennsylvania <input type="checkbox"/> Pittsburgh <input type="checkbox"/> Allegheny County

- ☐ Security Clearance has been obtained ☐ Resume is attached
☐ Security Clearance will be obtained before contractor begins work
☐ Security Clearance not needed, as contractor will not be working with children

Total Contract Amount: \$ <u>\$8,250.00</u>		Account Number(s)				
Rate of Payment <u>\$150.00</u> per day		Resp.	Fund	Func.	Obj.	Amount
<input type="checkbox"/> General Fund:	Department	---	---	---	---	---
<input checked="" type="checkbox"/> Supplemental Fund	Title I	---	10	3300	329	\$8,250.00
Account Name		---	---	---	---	---

District Goals: ☐ 1. Maximum academic achievement ☐ 2. Safe and orderly learning environment ☒ 3. Efficient and effective support operations ☒ 4. Efficient & equitable distribution of resources to address the needs of all students ☒ 5. Improved public confidence and strong parent/community engagement

What is the purpose of this contract and how will it be implemented? (Please write in complete sentences)

Authorization is requested to renew the contract with Ms. Marianne Loibl to assist with the Parent Engagement responsibilities at the Pittsburgh-Mt. Oliver Intermediate Unit #2. Ms. Loibl's responsibilities will include building parents' capacity for Parent Involvement - Title I-A requirements, and activities. Ms. Loibl's primary duties will include organizing materials for the fall and winter/spring parent workshops, summer reading packets, collect, compile surveys and data. Ms. Loibl will be paid at the daily rate of \$150.00 per day not to exceed fifty-five (55) days from August 15, 2013 through June 16, 2014.

Total amount of this contract is not to exceed \$8,250.00 from account line 10.3300.329.100.401.000.

Who will the services benefit?

All Title I students and families who receive services from the Pittsburgh-Mount Oliver Intermediate Unit #2.

Where will the services occur? (location)

The services will take place at the Pittsburgh-Mt. Oliver Intermediate Unit #2 and Title I Schools.

Additional person(s) accountable for this tab

Board Action Information Sheet

ED-2

Action Item #

July 2013

Action Month

The operating period shall be from August 15 , 2013 to June 16, 2014.

Explain why an external contract is necessary to provide these services?

Indicate process for making recommendation:

☒ Negotiated

☐ Solicited Proposals

☐ Competitive Bid

Describe the expected results of this activity:

If this is a contract renewal, indicate the original objective of this activity:

To effectively assist the non-public Title I-A students and families of PMOIU2 with Parent Involvement.

Has objective been met? ☒ Yes; ☐ No

Please explain how the objective was met or why the objective was not met

Increase in attendance at the parent meetings; surveys returned and feedback from surveys.

Data Source utilized, or if a new contract, that will be utilized to evaluate contractor performance:

Will evaluation be made on the basis of predetermined written criteria? ☐ Yes ☐ No

Will there be a tangible work product at the completion of the contract? ☐ Yes ☐ No

If there is a tangible work product expected, please describe expectations and name the custodian of the work product:

Board Action Information Sheet

ED-3

Action Item #

July 2013

Action Month

EXCELLENCE
FOR ALL

Linda M. Baehr

Submitted By

Linda M. Baehr

Person Accountable

PAYMENTS AUTHORIZED

- ☐ Teachers
☐ Other Staff

- ☐ Students
☐ Parents

- ☒ Outside Firm or Person

Name: Apple Inc.
Address: 12545 Riata Vista Circle 198-9IES
Austin, Texas 78727-6524

- ☐ Security Clearance has been obtained.
☐ Security Clearance will be obtained before contractor begins work.
☒ Security Clearance not needed, as contractor will not be working with children.
☐ Resume is attached.

Payment Data

Total Cost This Action:	\$64,120.00	Account Number(s):				
		Resp	Fund	Func	Obj	Amount
<input type="checkbox"/> General Fund	Department					
<input checked="" type="checkbox"/> Supplemental Fund	Name		10	1500	610	\$64,120.00
	Name					
	Name					

District Goals: ☒ 1. Maximum academic achievement ☐ 2. Safe and orderly learning environment ☒ 3. Efficient and effective support operations ☒ 4. Efficient & equitable distribution of resources to address the needs of all students ☐ 5. Improved public confidence and strong parent/community engagement

For what purpose are these funds being requested and how will it be implemented? (Please write in complete sentences)

Payment to Apple Education in the amount of \$64,120.00 for the purchase of fourteen - ten packs (140 total) 16GB iPad2s with Wi-Fi and AppleCare + to use in the remedial classrooms in the following non-public schools: Brookline Regional Catholic, The Campus School of Carlow University, Community Day School, The Ellis School, Falk School, Hillel Academy, Imani Christian School, Kentucky Avenue School, Northside Catholic, Sacred Heart, St. Bede, St. Benedict the Moor, St. Edmunds Academy, St. Maria Goretti, St. Raphael, St. Rosalia Acadmey, Shady Side Academy, Waldorf School of Pittsburgh, Yeshiva Boys School and Yeshiva Girls School.

Total cost is not to exceed \$64,120.00 from account lines 10.1500.610.380.113.000.

Who will this benefit?

Students in non-public schools will benefit from this equipment.

Where and when will the activities/services occur? (location)

Various schools listed above.

Additional person(s) accountable for this tab

Board Action Information Sheet

ED-4

Action Item #

July 2013

Action Month

EXCELLENCE
FOR ALL

Linda M. Baehr

Submitted By

Linda M. Baehr

Person Accountable

PAYMENTS AUTHORIZED

- ☐ Teachers ☐ Students
☐ Other Staff ☐ Parents

☒ Outside Firm or Person

Name: CATAPULT LEARNING
Address: LLC 2 Aquarium Drive, Suite 100
Camden, NJ 08103

- ☐ Security Clearance has been obtained. ☐ Resume is attached.
☐ Security Clearance will be obtained before contractor begins work.
☒ Security Clearance not needed, as contractor will not be working with children.

Payment Data

Total Cost This Action:	\$6,050.00	Account Number(s):				
		Resp	Fund	Func	Obj	Amount
<input type="checkbox"/> General Fund						
	Department					
<input checked="" type="checkbox"/> Supplemental Fund	Title II A		10	2270	324	\$6,050.00
	Name					
	Name					

District Goals: ☒ 1. Maximum academic achievement ☐ 2. Safe and orderly learning environment ☒ 3. Efficient and effective support operations ☒ 4. Efficient & equitable distribution of resources to address the needs of all students ☐ 5. Improved public confidence and strong parent/community engagement

For what purpose are these funds being requested and how will it be implemented? (Please write in complete sentences)

Payment authorization requested to CATAPULT LEARNING in the amount of \$6,050.00 to present a workshop to Diocesan math teachers on August 19, 2013. This workshop will consist of three instructors and will be broken down by grade levels; grades K-2, grades 3-5 and grades 6-8. This workshop will enable participants to understand the fundamental design of the Common Core State Standards in math. Participants will understand the shifts in math instruction including focus in content at each grade level; coherence that allows students to connect new learning to previous learning and balance between fluency of skills and depth of understanding, and intensity in both. Participants will examine the instructional shifts inherent in the math Common Core State Standards and explore the implications of these instructional shifts on what is taught, how we engage students in the process, and how learning is assessed. Participants will recognize that students should engage in all eight Mathematical Practices so that they can build depth of understanding and transfer learning to new, varied contexts.

The total cost not to exceed \$6,050.00 from account 10.2270.324.460.309.050.

Who will this benefit?

All Diocesan math teachers within the Pittsburgh-Mt. Oliver Intermediate Unit #2 area will greatly benefit from this presentation. A total of 80 participants will be instructed.

Where and when will the activities/services occur? (location)

Great Hall, St. Paul Seminary * 2900 Nobelstown Road * Pittsburgh, PA 15205 - August 19, 2013 from 8:30 AM - 3:30 PM

Linda M. Baehr

Additional person(s) accountable for this tab

Board Action Information Sheet

ED-5

Action Item #
July 2013

Action Month

EXCELLENCE
I O R A L L

Linda M. Baehr

Submitted By

Linda M. Baehr

Person Accountable

PAYMENTS AUTHORIZED

- ☐ Teachers ☐ Students
☐ Other Staff ☐ Parents

☒ Outside Firm or Person

Name: UPMC: Addiction Medicine Services of Western
Address: 1835 Centre Avenue
Pittsburgh, PA 15219

- ☐ Security Clearance has been obtained. ☐ Resume is attached.
☐ Security Clearance will be obtained before contractor begins work.
☒ Security Clearance not needed, as contractor will not be working with children.

Payment Data

Total Cost This Action:	<u>\$13,518.00</u>	Account Number(s):				
		Resp	Fund	Func	Obj	Amount
<input type="checkbox"/> General Fund	Department					
<input checked="" type="checkbox"/> Supplemental Fund	Title II A		10	2270	324	\$13,518.00
	Name					
	Name					

District Goals: ☒ 1. Maximum academic achievement ☐ 2. Safe and orderly learning environment ☒ 3. Efficient and effective support operations ☒ 4. Efficient & equitable distribution of resources to address the needs of all students ☐ 5. Improved public confidence and strong parent/community engagement

For what purpose are these funds being requested and how will it be implemented? (Please write in complete sentences)

Payment authorization requested to UPMC: Addiction Medicine Services of Western Psychiatric Institute & Clinic in the amount of \$12,600.00 (\$350.00 per person) to present a workshop on the Student Assistance Program (SAP) to thirty-six (36) Diocesan elementary and high school teachers within the Pittsburgh-Mt. Oliver Intermediate Unit #2 area..

The participants will attain the competencies needed to function well; be aware of relevant federal and state legislation and regulations that impact the Student Assistance Program; and study practices that will assist them in working collaboratively with families. They will learn more current information about child and adolescent behavioral health issues, how to promote resiliency in children, and how to work effectively as a team. Finally, time and direction will be given for action planning in preparation for implementation of the new learning.

The total cost not to exceed \$13,518.00 from account 10.2270.324.460.309.050, (\$12,600.00 for the presentation and \$918.00 for the breakfast, lunch and beverage costs for the three days).

Who will this benefit?

Every student will benefit from having a trained, functioning, SAP Team in the school. Parent and faculty will benefit from having student needs addressed. There will be a total of 36 participants attending this workshop.

Where and when will the activities/services occur? (location)

Great Hall, St. Paul Seminary * 2900 Nobelstown Road * Pittsburgh, PA 15205 – August 5-7, 2013 from 8:15 AM - 3:30 PM

Linda M. Baehr

Additional person(s) accountable for this tab

Board Action Information Sheet

ED-6
 Action Item #
 July 2013
 Action Month

EXCELLENCE
 FOR ALL

Linda M. Baehr *LB*
 Submitted By
 Linda M. Baehr *LB*
 Person Accountable

PAYMENTS AUTHORIZED

☐ Teachers ☐ Students
☐ Other Staff ☐ Parents

☒ Outside Firm or Person

Name: OnHand Schools
 Address: 1501 Reedsdale Street, Suite 5000
Pittsburgh, PA 15233

☐ Security Clearance has been obtained. ☐ Resume is attached.
☐ Security Clearance will be obtained before contractor begins work.
☒ Security Clearance not needed, as contractor will not be working with children.

Payment Data

Total Cost This Action: <u>\$16,000.00</u>		Account Number(s):				
		<u>Resp</u>	<u>Fund</u>	<u>Func</u>	<u>Obj</u>	<u>Amount</u>
<input type="checkbox"/> General Fund	Department					
<input checked="" type="checkbox"/> Supplemental Fund	Title II A		10	2270	324	\$16,000.00
	Name					
	Name					

District Goals: ☒ 1. Maximum academic achievement ☐ 2. Safe and orderly learning environment ☒ 3. Efficient and effective support operations ☒ 4. Efficient & equitable distribution of resources to address the needs of all students ☐ 5. Improved public confidence and strong parent/community engagement

For what purpose are these funds being requested and how will it be implemented? (Please write in complete sentences)

Payment authorization requested to OnHand Schools in the amount of \$10,000.00 to present a five day workshop to twenty (20) Cardinal Wuerl North Catholic High School teachers. The workshop will enable teachers to learn how to map their curriculum aligned with standards, incorporating technology, and using projects to enhance student learning. The training will consist of group presentations and individual hands-on experience of mapping curriculum. A stipend of \$300.00 per week will be provided to each teacher attending this workshop to cover the cost of travel and incidentals, which comes to \$60.00 a day. Names of the teachers will be on file at the Pittsburgh-Mt. Oliver Intermediate Unit #2's Office.

The total cost not to exceed \$16,000.00 from account 10.2270.324.460.309.057, (\$10,000.00 for the presentation and \$6,000.00.00 teacher stipends).

Who will this benefit?

The students and teachers of Cardinal Wuerl North Catholic High School will benefit from this training.

Where and when will the activities/services occur? (location)

Cardinal Wuerl North Catholic High School * 1400 Troy Hill Road * Pittsburgh, PA 15212 - August 12-16, 2013 from 9 AM - 2 PM

Linda M. Baehr
 Additional person(s) accountable for this tab

Board Action Information Sheet

ED-7

Action Item #

July 2013

Action Month

EXCELLENCE
I O R A L L

Linda M. Baehr

Submitted By

Linda M. Baehr

Person Accountable

PAYMENTS AUTHORIZED

- ☐ Teachers
☐ Other Staff

- ☐ Students
☐ Parents

- ☒ Outside Firm or Person

Name: PDLSS
Address: 119 June Drive
Port Vue, PA 15133

- ☐ Security Clearance has been obtained.
☐ Security Clearance will be obtained before contractor begins work.
☒ Security Clearance not needed, as contractor will not be working with children.

- ☐ Resume is attached.

Payment Data

Total Cost This Action:	\$8,000.00	Account Number(s):				
		Resp	Fund	Func	Obj	Amount
<input type="checkbox"/> General Fund						
	Department					
<input checked="" type="checkbox"/> Supplemental Fund	Title II A		10	2270	324	\$8,000.00
	Name					
	Name					

District Goals: ☒ 1. Maximum academic achievement ☐ 2. Safe and orderly learning environment ☒ 3. Efficient and effective support operations ☒ 4. Efficient & equitable distribution of resources to address the needs of all students ☐ 5. Improved public confidence and strong parent/community engagement

For what purpose are these funds being requested and how will it be implemented? (Please write in complete sentences)

Payment authorization requested to Professional Development & Learning Support Services (PDLSS) in the amount of \$8,000.00 to present a three day workshop to Diocesan teachers. PDLSS Summer Workshop is a three day hands-on training workshop where teachers will learn how to effectively use the technology devices for classroom instruction and management. Teachers will become proficient at using the technology devices given to them for instruction and assessment. Dr. Shirley Campbell will be the presenter of this workshop and will work with the teachers attending both individually and in small groups on project based learning in a one to one classroom.

The total cost of this action is not to exceed \$8,000.00 from account 10.2270.324.460.309.050.

Who will this benefit?

The students and teachers of Cardinal Wuerl North Catholic High School will benefit from this training.

Where and when will the activities/services occur? (location)

Cardinal Wuerl North Catholic High School * 1400 Troy Hill Road * Pittsburgh, PA 15212 - August 5, 2013 from 9 AM - 3 PM

Linda M. Baehr

Additional person(s) accountable for this tab

Board Action Information Sheet

ED-8

Action Item #

July 2013

Action Month

EXCELLENCE
FOR ALL

Linda M. Baehr

Submitted By

Linda M. Baehr

Person Accountable

GENERAL AUTHORIZATION

Payment Data

Total Cost This Action:	_____	Account Number(s):				
		Resp	Fund	Func	Obj	Amount
<input type="checkbox"/> General Fund	_____	_____	_____	_____	_____	_____
	Department	_____	_____	_____	_____	_____
<input type="checkbox"/> Supplemental Fund	_____	_____	_____	_____	_____	_____
	Name	_____	_____	_____	_____	_____
	Name	_____	_____	_____	_____	_____

District Goals: ☐ 1. Maximum academic achievement ☐ 2. Safe and orderly learning environment ☐ 3. Efficient and effective support operations ☐ 4. Efficient & equitable distribution of resources to address the needs of all students ☐ 5. Improved public confidence and strong parent/community engagement

What is the purpose of this authorization? (Please write in complete sentences)

RESOLVED, That the Board authorizes the appropriate officers of the Pittsburgh-Mt. Oliver Intermediate Unit #2 to enter into a Memoranda of Understanding with the University of Pittsburgh School of Health and Rehabilitation Sciences. The purpose of the Memoranda is to provide student teachers with a learning experience in a professional environment. The Memoranda is intended to coordinate plans with Placement Site to make learning experiences available for their students. (See Attachment)

Who will this benefit?

Teachers of the Pittsburgh-Mt. Oliver Intermediate Unit #2 and students of the University of Pittsburgh.

Where will the activities/services occur and how was this school/location selected? (if applicable)

Various PMOIU#2 locations.

Additional person(s) accountable for this tab

UNIVERSITY OF PITTSBURGH
School of Health and Rehabilitation Sciences

AGREEMENT

Made this ____ day of July 2013

between

UNIVERSITY OF PITTSBURGH - OF THE COMMONWEALTH SYSTEM OF HIGHER EDUCATION, School of Health and Rehabilitation Sciences, with its principal office located at Forbes Tower, Pittsburgh, Pennsylvania, 15260, hereinafter referred to as "University", and **Pittsburgh-Mt. Oliver Intermediate Unit #2** with its principal office located at 3816 South Water Street, Building Five Pittsburgh, PA 15203 hereinafter referred to as "Placement Site."

WITNESSETH:

WHEREAS, Placement Site provides capability for learning experiences and recognizes the professional responsibility of assisting in the teaching of University students and is interested in providing assistance to the University in its curricula: and

WHEREAS University is currently conducting programs granting Bachelor of Science degrees, professional, clinical master's, and doctoral degrees in Health and Rehabilitation Sciences and desires to obtain the assistance of Placement Site in furthering University's educational objectives.

NOW, THEREFORE, IT IS MUTUALLY AGREED AS FOLLOWS:

1. In accordance with the University of Pittsburgh School of Health and Rehabilitation Sciences Student Clinical Placement Procedures, University shall coordinate plans with Placement Site to make learning experiences available to their students.
2. University acknowledges that its students shall be expected to comply with all current policies and procedures of Placement Site.
3. University shall, as mutually agreeable to the parties, provide by the beginning of each term: (a) number of students and the dates and hours which they will be assigned; (b) the expected level experience to which they will be assigned; and (c) the expected learning objectives of its students.
4. University shall provide a faculty member who will serve as liaison with Placement Site field instructors when necessary.
5. University shall provide and maintain the records and reports required by Placement Site for conducting clinical learning experience of its students under this Agreement.
6. Placement Site shall provide learning experiences to students enrolled in the School of Health and Rehabilitation Sciences of the University. The number of students, their program of education within the Placement Site and the scheduling of their education at the Placement Site shall be determined by mutual agreement between the Placement Site's coordinator for clinical education and University's program coordinator for clinical education or their representatives.

7. Placement Site shall provide learning experiences under the supervision of qualified personnel, which meet the experience standards of recognized professional accrediting agencies or state agencies and the stated objectives of the educational program.
8. Placement Site shall, in its patient units, clinics, laboratories, classrooms and other selected departments, provide opportunities for observations and practical experience, conducive to the learning process of the student and to the meeting of the stated learning objectives.
9. Placement Site shall provide orientation of the appropriate University faculty and students to the physical facilities, policies and procedures of the Placement Site, and where appropriate, to the needs of individuals and/or groups with which they will be working.
10. Placement Site shall provide available time, when possible, to field instructors for attending clinical supervisory meetings and conferences called by the University as part of the educational program.
11. Placement Site shall provide, whenever necessary, available conference rooms, dressing rooms, and locker space for University students participating in the educational program.
12. Placement Site shall require the University to withdraw a Program student if: (1) the achievement, progress, adjustment or health of the student does not warrant continuation at Placement Site, or (2) the behavior of the student fails to conform to the applicable regulations of Placement Site. Placement Site reserves the right, to exclude any student from its premises in the event that such student's conduct or state of health is deemed objectionable or detrimental to the proper administration of Placement Site.
13. Placement Site shall provide and maintain records and reports required by the University for conducting the educational program.
14. Placement Site shall be responsible for and retain absolute control over the administration of the Site, its operation and all patient care.
15. The University shall require the students to carry professional liability insurance through an occurrence policy with the minimum limits of \$2,000,000 per occurrence/\$4,000,000 annually naming the Site as an additional insured. The University will also require the students to carry health insurance.
16. University will ensure that all students for placement in a rotation and all faculty involved in advising and counseling those students take the University's web-based HIPAA training and receive certification therein. The University shall track the student and faculty successful completion of this training.
17. The University students and employees who will have direct contact with children during the discharge of responsibilities under this Agreement and shall obtain at their own expense, and submit all criminal background reports required by 24 P.S. §1-111, as amended, and child abuse clearances required by 23 Pa. C.S. §6355, as amended. All required reports and clearances must be submitted to the site prior to assignment to a patient under his Agreement. The University further agrees to notify the Site within seventy-two (72) hours of the arrest of a student during the term of assignment. This Agreement may be terminated immediately if this paragraph is violated

by the University and a student may be removed immediately from the Site if all required reports and clearances are not received or if any report or clearance indicates the student has been convicted of a disqualifying crime.

18. University and Placement Site shall not discriminate against anyone applying to or enrolled in the program contemplated under this Agreement or employed by either party because of race, color, religion, ethnicity, national origin, age, sex, sexual orientation, or marital, veteran, or disabled status.

19. University and Placement Site agree that they shall abide by all applicable federal, state and local laws, rules, regulations and executive orders in effect as of the date of this Agreement, and as they may change or be amended.

20. This Agreement is for a term of one (1) year and automatically renewed thereafter for successive one (1) year terms; provided however, that the Agreement may be terminated upon providing at least thirty (30) days written notice to the other party prior to the beginning of the then academic term of the University, such notice delivered by certified mail return receipt requested. Such a termination must not affect students affiliated with Placement Site for the academic term in which notice is given.

21. This Agreement shall not be assigned or transferred by either party without written approval of the other.

22. This Agreement constitutes the entire agreement between the parties. No change or addition shall be binding upon the parties until reduced to writing, and signed by both parties. This agreement, when fully executed, shall supersede any and all prior or existing agreements, either oral or in writing with respect to the subject matter hereof.

23. This contract shall be governed by, construed and interpreted in accordance with the laws of the Commonwealth of Pennsylvania.

24. The University will indemnify the Site, its officers, directors and employees, from any costs, damages and fees, including reasonable attorney fees, awarded in an action against them to the extent that such costs, damages and fees are directly caused by the University's breach of this Agreement or the negligence or willful misconduct of the University or its employees. The Site will indemnify the University, its officers, directors and employees, from any costs, damages and fees, including reasonable attorney fees, awarded in an action against them to the extent that such costs, damages and fees are directly caused by the Site's breach of this Agreement or the negligence or willful misconduct of the Site or its employees subject to the limitations set forth by the Political Subdivision Tort Claims Act.

25. Any notices required to be sent under this agreement, except a termination notice pursuant to paragraph 19 above, shall be sent by regular or first-class mail to the following addresses:

IF TO PLACEMENT SITE:

Pittsburgh Mt. Oliver Intermediate Unit
3816 South Water Street
Building Five
Pittsburgh, PA 15203
Attention: _____

IF TO UNIVERSITY:

Coordinator, Clinical Contracts
University of Pittsburgh
School of Health and Rehabilitation Sciences
4028A Forbes Tower
Pittsburgh, PA 15260

IN WITNESS WHEREOF, the parties hereto have set their hands and seals as of the day and date set forth above.

WITNESS:

UNIVERSITY OF PITTSBURGH - OF THE
COMMONWEALTH SYSTEM OF HIGHER
EDUCATION

By _____
Clifford E. Brubaker, Ph.D.
Dean, School of Health and Rehabilitation Sciences

Date

PLACEMENT SITE:

Pittsburgh – Mt. Oliver Intermediate Unit #2

Signature and Date/Board President

Signature and Date/Board Secretary/Assistant Secretary

Board Action Information Sheet

BU-1

Action Item #

July 2013

Action Month

EXCELLENCE
FOR ALL

Linda M. Baehr

Submitted By

Sandy Uhlyar

Person Accountable

PAYMENTS AUTHORIZED

- ☐ Teachers ☐ Students ☐ Outside Firm or Person
☐ Other Staff ☐ Parents

Name: _____

Address: _____

- ☐ Security Clearance has been obtained. ☐ Resume is attached.
☐ Security Clearance will be obtained before contractor begins work.
☐ Security Clearance not needed, as contractor will not be working with children.

Payment Data

Total Cost This Action: _____		Account Number(s):				
		Resp	Fund	Func	Obj	Amount
<input type="checkbox"/> General Fund	_____	_____	_____	_____	_____	_____
	Department	_____	_____	_____	_____	_____
<input type="checkbox"/> Supplemental Fund	_____	_____	_____	_____	_____	_____
	Name	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	Name	_____	_____	_____	_____	_____

District Goals: ☐ 1. Maximum academic achievement ☐ 2. Safe and orderly learning environment ☐ 3. Efficient and effective support operations ☐ 4. Efficient & equitable distribution of resources to address the needs of all students ☐ 5. Improved public confidence and strong parent/community engagement

For what purpose are these funds being requested and how will it be implemented? (Please write in complete sentences)

It is recommended that the list of payments made for the month of June 2013 in the amount of \$138,291.59 be ratified, the payments having been made in accordance with the Rules in Effect in the Intermediate Unit and the Public School Code.

(Information is on file in the Business Office of the Intermediate Unit)

Who will this benefit?

Where and when will the activities/services occur? (location)

Additional person(s) accountable for this tab

Board Action Information Sheet

BU-2
Action Item #
July 2013
Action Month

EXCELLENCE
FOR ALL

Linda M. Baehr
Submitted By
Sandy Uhlvar
Person Accountable

Proposals/Grant Awards

☐ Submitting Proposal/Application

☒ Accepting Grant/Award/Subcontract

Grant Amount: \$ \$738,765.00
Federal \$ _____
State \$ _____
Private \$ _____
Federal/State Pass Thru \$ _____
General Fund \$ _____
Value of In Kind \$ _____
Other Sources \$ _____
Total Budget : \$ \$738,765.00

Name of Fund
Title I Delinquent
Name of Granting Agency
PA Department of Education

Indirect Cost \$ \$59,101.00

If there is no indirect cost to district, explain why:

District Goals: ☒ 1. Maximum academic achievement ☒ 2. Safe and orderly learning environment
☒ 3. Efficient and effective support operations ☒ 4. Efficient & equitable distribution of resources to address the needs of all students ☐ 5. Improved public confidence and strong parent/community engagement

For what will this funding be used? Briefly describe the major action steps that this funding will support. (Please write in complete sentences)

Authorization is requested to accept a grant, in the amount of \$738,765.00 from the PA Department of Education to provide educational support to Title I eligible students who are residents of institutions classified as delinquent institutions throughout Allegheny County. This is a decrease of \$39,567.00 (-5.08%) from the 2012-2013 grant.

Who will this benefit?

Title I students of delinquent institutions will benefit from this grant.

What is the location of these activities and how was this school/location selected? (if applicable)

Ten delinquent institutions.

Linda M. Baehr

Additional person(s) accountable for this tab

Board Action Information Sheet

BU-2

Action Item #

July 2013

Action Month

What is the funding period? July 1, 2013 to June 30, 2014

Who will be the Program Manager?

Estimated Revenue by Funding Source:

Source	Actual Year 1		Est. Yr. 2	Est. Yr. 3	Est. Yr. 4	Est. Year 5
Federal	\$ 738,765.00	100.0%	\$ _____	\$ _____	\$ _____	\$ _____
State	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Private	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Federal/State Pass Thru	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
General Fund	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Value of In Kind	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Other Sources	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Total	\$ 738,765.00	100.0 %	\$ _____	\$ _____	\$ _____	\$ _____

Budget Projections

	Actual Year 1	Actual Year 2	Actual Year 3	Actual Year 4	Actual Year 5
Staffing (including fringe benefits):	_____	_____	_____	_____	_____
<input type="checkbox"/> New Staff					
<input type="checkbox"/> General Fund Offset					
Contracted Services	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Other Costs	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Total	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

Maintenance of Effort (In Kind)

Explain the commitment of staff time or other District resources and identify the impact on other programs or responsibilities:

Board Action Information Sheet

BU-3
Action Item #
July 2013
Action Month

EXCELLENCE
FOR ALL

Linda M. Baehr
Submitted By
Sandy Uhlvar
Person Accountable

Proposals/Grant Awards

☐ Submitting Proposal/Application

☒ Accepting Grant/Award/Subcontract

Grant Amount: \$ \$435,129.00
Federal \$
State \$
Private \$
Federal/State Pass Thru \$
General Fund \$
Value of In Kind \$
Other Sources \$
Total Budget : \$ \$435,129.00

Name of Fund
Title I Neglected
Name of Granting Agency
PA Department of Education

Indirect Cost \$ \$34,000.00

If there is no indirect cost to district, explain why:

District Goals: ☒ 1. Maximum academic achievement ☒ 2. Safe and orderly learning environment
☒ 3. Efficient and effective support operations ☒ 4. Efficient & equitable distribution of resources to
address the needs of all students ☐ 5. Improved public confidence and strong parent/community
engagement

For what will this funding be used? Briefly describe the major action steps that this funding will support. (Please write in complete sentences)

Authorization is requested to accept a grant, in the amount of \$435,129.00 from the PA Department of Education to provide educational support to Title I eligible students who are residents of institutions classified as neglected institutions throughout Allegheny County. This is a decrease of \$121,649.00 (-21.85%) from the 2012-2013 grant.

Who will this benefit?

Title I students of neglected institutions will benefit from this grant.

What is the location of these activities and how was this school/location selected? (if applicable)

Twenty-six neglected institutions.

Linda M. Baehr

Additional person(s) accountable for this tab

Board Action Information Sheet

BU-3

Action Item #

July 2013

Action Month

What is the funding period? July 1, 2013 to June 30, 2014

Who will be the Program Manager?

Estimated Revenue by Funding Source:

Source	Actual Year 1		Est. Yr. 2	Est. Yr. 3	Est. Yr. 4	Est. Year 5
Federal	\$ 435,129.00	100.0%	\$ _____	\$ _____	\$ _____	\$ _____
State	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Private	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Federal/State Pass Thru	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
General Fund	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Value of In Kind	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Other Sources	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Total	\$ 435,129.00	100.0%	\$ _____	\$ _____	\$ _____	\$ _____

Budget Projections

	Actual Year 1	Actual Year 2	Actual Year 3	Actual Year 4	Actual Year 5
Staffing (including fringe benefits):	_____	_____	_____	_____	_____
<input type="checkbox"/> New Staff					
<input type="checkbox"/> General Fund					
Offset					
Contracted Services	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Other Costs	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Total	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

Maintenance of Effort (In Kind)

Explain the commitment of staff time or other District resources and identify the impact on other programs or responsibilities:

Board Action Information Sheet

BU-4
Action Item #
July 2013
Action Month

EXCELLENCE
FOR ALL

Linda M. Baehr *LB*
Submitted By
Sandy Uhlir *SU*
Person Accountable

Proposals/Grant Awards

☐ Submitting Proposal/Application

☒ Accepting Grant/Award/Subcontract

Grant Amount: \$ \$92,911.00
Federal \$ _____
State \$ _____
Private \$ _____
Federal/State Pass Thru \$ _____
General Fund \$ _____
Value of In Kind \$ _____
Other Sources \$ _____
Total Budget : \$ \$92,911.00

Name of Fund
Title II-A, E-Grant

Name of Granting Agency
PA Department of Education

Indirect Cost \$ \$7,432.00

If there is no indirect cost to district, explain why:

District Goals: ☒ 1. Maximum academic achievement ☒ 2. Safe and orderly learning environment
☒ 3. Efficient and effective support operations ☒ 4. Efficient & equitable distribution of resources to
address the needs of all students ☐ 5. Improved public confidence and strong parent/community
engagement

For what will this funding be used? Briefly describe the major action steps that this funding will support. (Please write in complete sentences)

Authorization is requested to accept a grant, in the amount of \$92,911.00 from the PA Department of Education to provide teacher quality staff development for the non-public schools in the City of Pittsburgh. This grant has been held harmless; no increase or decrease in the amount from the 2012-2013 year to the current 2013-2014 year.

Who will this benefit?

Non-public school teachers and administrators will benefit from this funding.

What is the location of these activities and how was this school/location selected? (if applicable)

Various locations

Linda M. Baehr

Additional person(s) accountable for this tab

Board Action Information Sheet

BU-4

Action Item #

July 2013

Action Month

What is the funding period? July 1, 2013 to June 30, 2014

Who will be the Program Manager?

Estimated Revenue by Funding Source:

Source	Actual Year 1		Est. Yr. 2	Est. Yr. 3	Est. Yr. 4	Est. Year 5
Federal	\$ 92,911.00	100.0%	\$ _____	\$ _____	\$ _____	\$ _____
State	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Private	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Federal/State	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Pass Thru	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
General Fund	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Value of In Kind	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Other Sources	\$ _____	%	\$ _____	\$ _____	\$ _____	\$ _____
Total	\$ 92,911.00	100.0%	\$ _____	\$ _____	\$ _____	\$ _____

Budget Projections

	Actual Year 1	Actual Year 2	Actual Year 3	Actual Year 4	Actual Year 5
Staffing (including fringe benefits):	_____	_____	_____	_____	_____
<input type="checkbox"/> New Staff					
<input type="checkbox"/> General Fund					
Offset					
Contracted Services	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Other Costs	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Total	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

Maintenance of Effort (In Kind)

Explain the commitment of staff time or other District resources and identify the impact on other programs or responsibilities: