



# District School Board of Pasco County

20430 Gator Lane • Land O' Lakes, Florida 34638 • 813/794-2221

Heather Fiorentino, Superintendent


[www.pasco.k12.fl.us](http://www.pasco.k12.fl.us)

Department of Purchasing  
Michael J. Woodall, CPPO, Purchasing Agent  
813/794-2221 Fax: 813/794-2111  
727/774-2221 TDD: 813/794-2484  
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September 18, 2012

## MEMORANDUM

TO: Honorable School Board Members

FROM: Michael J. Woodall, CPPO, Purchasing Agent 

RE: Mental Health Provider Contract  
GracePoint MHC, Inc.

The School District has individual and group counseling service agreements with various facilities in order to provide counseling services for students and families.

The services covered under this contract are considered professional services and therefore are exempt from the competitive pricing requirements as outlined in DOE's Section 6A-1.012 (11)(a). The counseling services are outlined in the agreement and attached for your perusal.

At this time, we respectfully request your approval to enter into the one-year agreement with the above-referenced facility. This agreement will commence upon Board approval and expire on June 30, 2013.

Should you have any questions regarding this matter, please contact Mr. David H. Chamberlin, Supervisor of Student Services or me at your earliest convenience.

MJW/acf

Attachments

Date/Time: September 12, 2012 07:59:00



# District School Board of Pasco County

7227 Land O' Lakes Boulevard • Land O' Lakes, Florida 34638 • 813/ 794-2000

Heather Fiorentino, Superintendent

[www.pasco.k12.fl.us](http://www.pasco.k12.fl.us)

Student Services Department  
David H. Chamberlin, Supervisor  
813/ 794-2442 Fax: 813/ 794-2120  
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352/ 524-2442

## MEMORANDUM

SS 009A 12/13

**Date:** August 16, 2012  
**To:** Kendra Goodman, CPPB, Purchasing Agent  
**From:** David Chamberlin, Supervisor of Student Services (Social Work) *DC*  
Lizette Alexander, Director of Student Services *LA*  
**Subject:** Mental Health Provider Contracts

Please find the following contracts with local mental health providers that outlines counseling services for students and families:

### **GracePoint MHC, Inc.**

At this time, we respectfully request that The Board approve the above-referenced agreements.

Thank you

DHC/es



**RECEIVED**

*8/24/12 Perw*

**AGREEMENT FOR SERVICES AND MUTUAL COOPERATION**

This agreement made and entered into this 24TH day of July, 2012 by and between Grace Point MHC, Inc., a Florida corporation not for pecuniary profit, herein referred to as "GRACEPOINT" and the **DISTRICT SCHOOL BOARD OF PASCO COUNTY**, hereinafter referred to as the "**SCHOOL BOARD**".

**WITNESSETH:**

**WHEREAS, GRACEPOINT** has the staff and facilities necessary for providing psychiatric assessment, counseling services and evaluation in Pasco County and

**WHEREAS,** the school system for which the **SCHOOL BOARD** is responsible requires such services from time to time, and

**WHEREAS,** there is a need for cooperation and sharing of services and resources between **GRACEPOINT** and the **SCHOOL BOARD**.

**NOW THEREFORE,** in consideration of the premises and the mutual covenants contained in this agreement, it is agreed by and between the parties that:

*Board approval*

1. This agreement shall take effect and be in force from ~~July 24~~, 2012 until June 30, 2013.
2. During the term of the agreement, the supervisory/administrative staff of the two agencies will communicate and cooperate on matters of mutual concern.
3. During the term of this agreement **GRACEPOINT** shall provide counseling services to students and their families as requested by the **SCHOOL BOARD**.
4. The **SCHOOL BOARD** shall provide appropriate referral information on all cases referred to **GRACEPOINT**.
5. **GRACEPOINT** shall submit written reports to the **SCHOOL BOARD** on services delivered when requested by the Supervisor of Student Services.
6. A. Each student referred to **GRACEPOINT** by the Department of Student Services staff of the **SCHOOL BOARD** shall be eligible for services as outlined below at the rates of payment indicated.

1. Psychiatric Evaluation	\$210.00 per evaluation
2. Medication Management	\$60.00 per session Limited to three (3) sessions
3. Individual/Family Counseling	\$73.32 per session Limited to four (4) sessions
4. Bio-psychosocial	\$48.00 per session
5. Treatment Plan	\$97.00 per session
6. Group Counseling	\$40.00 per session (capacity of 10 children)

- b. **GRACEPOINT** will pursue all other avenues of reimbursement prior to billing the **SCHOOL BOARD**.

CONTRACT REVIEWED  
AND APPROVED:

*AW 9.7.12*



7. Total compensation for this contract for counseling services is estimated to be Five thousand dollars (\$5,000.00). The final cost will depend on referrals and utilization of services.
8. **GRACEPOINT** shall provide a monthly accounting of services delivered and the **SCHOOL BOARD** shall remit payments to **GRACEPOINT** accordingly.
9. Requests by the **SCHOOL BOARD** for services to be performed by **GRACEPOINT** shall be authorized by the Director of Student Services through the Supervisor of Student Services.
10. Per Florida Statute 1012.32, the agency acknowledges that a Level 2 fingerprint screening is required of any individual who has direct contact with students while delivering services under the provision of this agreement. The agency will provide the names of specific employees who will provide services through direct contact with students and will cooperate with the School Board in meeting the requirements of the referenced statute.
11. **GRACEPOINT** agrees to accept the designated payment amount as payment in full and shall not seek compensation from additional sources, i.e. insurance, Medicaid, etc.

**HOLD HARMLESS:**

Each of the parties to this Agreement hereby agrees to indemnify and hold the other party hereto harmless from and against all damages of any nature whatsoever which are caused or materially contributed to by the negligent acts of any officer, employee, and agent or other representative of the indemnifying party and which are not caused or materially contributed to by any officer, employee, agent or other representative of the indemnified party.

Either party upon thirty (30) days written notice may terminate this agreement.

- A) Gracepoint MHC, Inc. shall comply with all applicable laws, ordinances, codes, and statutes of any and all local, state, or national governing bodies included within this section. Gracepoint MHC, Inc. shall comply with the regulations of the Civil Rights Act of 1964, in which no person in the United States shall on the grounds of race, creed, color, or national origin be excluded from participation in or be denied the proceeds of, or be subject to discrimination in the performance of this Contract.



