

LAKE HAVASU UNIFIED SCHOOL DISTRICT #1

**CONSENT CALENDAR ITEM**

**TOPIC:** APPROVAL OF REVISED CONTRACT WITH SOLIANT FOR INCREASED SPEECH SERVICES

**SUBMITTED BY:** Aggie Wolter, Director of Special Services

**DATE FOR BOARD CONSIDERATION:** February 21, 2017

**RECOMMENDATION:**

It is recommended that the Governing Board approve the amended contract with Soliant Speech Therapy.

**RATIONALE:**

Due to the increased caseload demands of the Speech Therapist, the Special Education Department needs to increase the hours from 37.5 per week to 40 hours per week. This will increase the contract by \$3,000.00. The increased expenditure will be paid out of Medicaid funds.

This has been reviewed by purchasing.

Approved for Transmittal to Governing Board

  
Superintendent



**CLIENT ASSIGNMENT CONFIRMATION**

This Client Assignment Confirmation is entered into on the date first signed below and supplements the Client Services Agreement between Soliant Health, Inc and their Client, **Lake Havasu Unified School District**

The Soliant Consultant named below has been placed with Client and Client will pay Soliant Health for hours worked by Consultant according to the terms outlined below:

**ASSIGNMENT DETAILS**

Consultant: Denice Clapp Position: SLP  
 Assignment Start Date: 2/27 Assignment End Date: 5/26/2017  
 Bill Rate per Hour: \$ 72.00 Minimum Hours: 40  
 Miscellaneous: Monday-Friday following school schedule

**PLACEMENT CRITERIA**

Licensing: Consultant  is  is not authorized to begin providing services while professional license is in process.  
 Teaching Certification: Teaching certification  is  is not required.

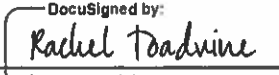
**DESIGNATED APPROVERS** District Personnel designated by Client to approve Timesheets. *If not applicable, respond with N/A.*

Name	Title	Phone	Email Address

**WORK SITE LOCATIONS** District Schools to which Consultant will be assigned: *Client to complete. If not applicable, respond with N/A.*

School 1: \_\_\_\_\_  
 Location: \_\_\_\_\_  
 School 2: \_\_\_\_\_  
 Location: \_\_\_\_\_

**Please note:** Sales tax will be added to professional fees if required by state law and client is not a tax exempt entity.  
 Client agrees that it will not directly or indirectly, personally or through another agent or agency, contract with or employ Consultant for a period of one year after the latest date of introduction, referral, or completion of the assignment.  
 If Soliant Consultant should be required to travel to other locations at the specific request of the Client, the Client will be responsible for all expenses incurred

_____ Client Signature	DocuSigned by:  _____ Soliant Health, Inc. Signature _____ Rachel Toadvine _____ Soliant Health, Inc. Printed Name _____ Senior Associate _____ Soliant Health, Inc. Title
_____ Client Printed Name	_____ Soliant Health, Inc. Printed Name
_____ Client Title	_____ Soliant Health, Inc. Title

**\*Terms and conditions outlined in this Client Assignment Confirmation will be considered agreed upon by all parties unless Soliant is notified of changes by Client within forty eight (48) hours of client's receipt of this Client Assignment Confirmation. If no changes are needed, a signature response is not required.**

## STATE RETIREMENT SYSTEM NOTICE

This notice is intended to clarify the manner of payment in contemplation of a Contractor Employee's mandatory or permissive participation in a state teacher retirement system, school employees retirement system, and/or any similar or successor system applicable to the professionals provided by Contractor.

Client acknowledges and agrees that if formal notice is required to be given to any Contractor Employee that participation in any such retirement system/pension is either: 1) permitted by Contractor Employee's election; or 2) is required by law, then Client is solely responsible for providing such notice to Contractor Employees and fulfilling all associated administrative duties.

Client shall immediately notify Contractor if any Contractor Employee is required to, or voluntarily elects to participate in any such system. In such event, Client shall advise Contractor of the withholding obligation percentages (both employer and employee share) so that invoices to Client and payment to the Contractor Employee may be adjusted accordingly. The parties agree that Client shall withhold and pay to the retirement/pension both the employee and employer shares. The parties agree that the applicable employee and employer shares paid to the system by the Client shall be deducted from the amount owed to the Contractor by the Client hereunder. The parties agree that the applicable employee share paid to the system by the Client shall be deducted from the amount due the Contractor Employee by the Contractor.

The Client and Contractor expressly acknowledge and agree that if any Contractor Employee is required to, or elects to participate in a retirement system/pension, the Client shall be solely responsible for: 1) creating an account for contractor employee with the appropriate retirement system/pension; 2) all present and/or future obligations to make employee and employer cash payments/ contributions to the retirement system/pension as required by law and/or set by the retirement system/pension; and 3) otherwise administering all employer functions pertaining to the Contract Employees' interest in retirement system/pension.

By way of example of how the invoicing/payment will be adjusted, if Contractor charges the Client \$100.00 for services rendered by Contractor's Employee, if Contractor pays the Contractor Employee \$50.00 for the provision of these services, and if Contractor Employee elects to participate in the retirement system, the Client shall withhold and remit to the appropriate system or pension 13% of the employee's pay (\$6.50) as the employee's share, and 14% of the employer's pay (\$7.00) as the employer's share (assuming employee and employer contributions are 13% and 14%, respectively). Consequently, Contractor would invoice Client for \$86.50, and Contractor would pay (subject to other applicable withholdings) \$43.50 to Contractor Employee.