



Board Meeting Date: September 11, 2023

Title: Contract for Independent School District 273 Client Assignment Confirmation Agreement with ProCare Therapy for Chelsey Williams in a COTA position Monday through Thursday 7:30-3:30.

Type: Consent

Presenter(s): Jody Remsing

Description: The purpose of this Agreement is to create an agreement between ISD 273 and ProCare to have Chelsey Williams work in the capacity of a COTA position.

Recommendation: Approve the attached Client Assignment Confirmation for ProCare Therapy.

Desired Outcomes from the Board: Approve the attached Client Assignment Confirmation with ProCare Therapy.

Attachments: Client Assignment Confirmation with ProCare Therapy.

ADDENDUM A
Client Assignment Confirmation



This Client Assignment Confirmation is entered into and executed as of the signature date below and supplements the Client Services Agreement between the Client and New Direction Solutions, LLC dba ProCare Therapy ("ProCare"). Client will pay ProCare for hours worked by Consultant on the following terms:

Assignment Details

ProCare Consultant: Chelsey Williams PID: *

School District Name (Client): Edina Public School District

Start Date: 08/28/2023 End Date: 12/31/2023

Start and End dates are subject to change based on the credentialing and licensure process as well as adjustment in the school district's calendar

Position: COTA

Bill Rate: \$76.00 Minimum Hours: 32.5

Overtime Rate: 1.5 times Bill Rate

Billing Workweek: Monday – Friday

Miscellaneous: M-Th 7:30-3:30

Sales tax or gross receipts tax will be added to professional fees if required or allowed by state law and client is not a tax-exempt entity.

If ProCare 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 agrees that it will not directly or indirectly, personally or through an agent or agency, contract with or employ any Consultant introduced or referred by ProCare for a period of (12) months after the latest date of introduction, referral, or end of contract placement. If Client or its affiliate enters into such a relationship or refers Consultant to a third party for employment, Client agrees to pay an amount equal to \$22,500 or thirty-five (35) percent (whichever is greater) of the Consultant's first year's annual salary, including any signing bonus, as agreed upon at the time of hiring. Payment is due and payable to ProCare upon start date.

Option of virtual services will be offered by ProCare in lieu of onsite services

All precautions will be taken by the Client to create a safe and healthy environment

Account Representative Information: Carina Hoff
carina.hoff@procaretherapy.com
813-219-1063

By: 120811 - Edina Public School District

Print Name: Jody Remsing

Title: Director of Student Support Services

Date: 8/28/23

By: New Directions Solutions, LLC dba ProCare Therapy

Print Name: _____

Title: _____

Date: _____

***Terms and conditions outlined in this Client Assignment Confirmation will be considered agreed upon by all parties unless ProCare is notified of changes by Client within forty-eight (48) hours of client's receipt of this Client Assignment Confirmation.**