

**Wellness Management Services**  
of Trinitas Regional Medical Center

**Proposal Submission:**

**Union High School Student Support Program**

Re: RFP July 2016 Entitled:

**“Request for Proposal to Provide Professional  
Services The Area of Student Support for 2016  
– 2017 School Year”**

Submitted by:  
Dr. Rodger Goddard  
Director, Wellness Management Services  
Chief Psychologist  
Trinitas Regional Medical Center  
[rgoddard@trinitas.org](mailto:rgoddard@trinitas.org) 973 670 2070

## **Wellness Management Services of Trinitas Regional Medical Center**

**Providing Consultation and Training to Improve the Health of Individuals and  
Organizations**

July 29, 2016

To:

James J. Damato, General Counsel,  
Township of Union Board of Education,  
2369 Morris Avenue  
Union, New Jersey 07083  
Re: Proposal / Contract

Dear James Damato,

Enclosed please find our proposal in response to the RFP posted for the 2016 to 2017 school year.

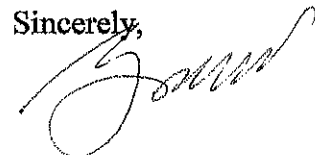
The attached proposal is being submitted for the RFP for bid to provide professional services in the area of student support for 2016 – 2017 school year.

Attached to the proposals please also find a copy of a contract should we be awarded permission to deliver services. Alternately, your school could provide a contract for signing. Also enclosed as per the request in the RFP please find copies of: a) Trinitas Regional Medical Center's Certificate of Employee Information Report, b) our NJ Business Registration Certificate, c) W 9 and d) our Insurance Certificate and the resume / vitas of the people who will be delivering services. If awarded the contract as per the request in the FRP we could supply a statement that we shall indemnify, defend and hold the district harmless from any and all liabilities for any claims which may arise as a result of the engagement of the Company and/or please let this letter serve as such a statement.

Please notify me immediately at (973) 670-2070 if there is anything missing from our submission and/or you need any other materials at this date.

Thank you for your close consideration of our submission.

Sincerely,



Dr. Rodger Goddard  
Chief Psychologist  
Director, Wellness Management Services  
(973) 670-2070  
rgoddard@trinitas.org

# **WELLNESS MANAGEMENT SERVICES**

## **OF TRINITAS REGIONAL MEDICAL CENTER**

# **Proposal to Provide Professional Services in the Area of Student Support for 2016 – 2017 School Year**

## **I. Submission to Union Township Schools FRP Posted Summer, 2016**

---

This proposal is submitted in response to Union Township Schools “The Request to Provide Professional Services – The Area of Student Support for 2016 – 2017 School Year”.

## **II. Background:**

---

**The present proposal concerns the following issues:**

1. Union High School for many years has been dealing with students who have intense problems that interfere with their academic achievement or the achievement of other students. These problems include (but are not limited to) students who are: learning challenged, under motivated, disruptive, aggressive, emotionally troubled, socially alienated, ADHD, classified, non classified, self harming, suicidal and/or rule breaking students. The social, emotional, behavioral and learning difficulties of these students put them at risk of failure or functioning below their academic potential.
2. Trinitas Regional Medical Center has provided Union High School with a Student Support Program and Drop In Center for the past school years 2009 – 2016 that has successfully helped these at risk students in need of direction, guidance, support, conflict resolution, anger management and individual skill building.
3. The Board of Education of the Township of Union is seeking proposals for the continued provision of these services to provide ongoing support to high school students in need of guidance to assist in their academic success.

## **III. Proposal: Provision of Professional Services to the Union High School for Student Support – A UHS Student Support Program**

---

It is proposed that a clinical team consisting of a NJ licensed psychologist (over 25 years licensed in the state of NJ) and a Ph.D. licensed psychologist from Trinitas Regional Medical Center Department of Behavior Health and Psychiatry continue to provide student support, skill building counseling, intervention, teacher guidance, administrator consultation, program development, parent support, conflict resolution and psycho-educational group instruction services to help any Union High School students in need, to improve their academic and personal success.

#### **IV. Background and Credentials of the Trinitas Consultation Team:**

Dr. Rodger Goddard has served as Chief Psychologist and Director of Psychology Internship Training at Trinitas Hospital for the past 27 years. Dr. Goddard created and directs Wellness Management Services, a consultation and training program for improving the success of schools and corporations. Dr. Goddard has overseen the programs and work of psychologists in the hospital and school programs for the past 27 years including. Dr. Goddard has provided training, consultation and direct services to over 300 schools in Northern New Jersey in the past 27 years. Dr. Goddard has specific knowledge and experience in the needs of Union Township Schools having provided extensive training and services to the district over the past 8 years. In the past 8 years, Dr. Goddard has guided the implementation of the Student Support and Success Programs at Union Township Schools. The programs have targeted improving the academic achievement, success and behavioral skills of at risk students in all Union Township Schools. Dr. Goddard would be overseeing, directing and supervising the work of the Trinitas Ph.D. psychology clinician in addition to directly guiding and consulting with teachers, administrators, guidance educational staff, students and parents of Union High School to further the goals of the Student Support Program (see attached resume). Dr. Goddard has been licensed as a psychologist in the state of NJ for over 27 years.

Dr. Jamie Stillwell, a licensed psychologist, has extensive training and experience in the treatment of adolescent social, emotional, academic and psychiatric disorders and problems. She has worked for the past three years as the primary clinician directing and conducting the student support services at Union High School (see attached resume).

#### **V. Program Objectives**

**Student Achievement & Success Skill Building:** The objective of the program would be to provide student support through the delivery of direct services, and to assist Union High School staff to: 1) improve the academic, behavioral, social and communication functioning and success skills of UHS students in need, 2) maintain at risk, emotionally troubled and/or disruptive students in Union High School classes, and, 3) help students to receive their education in the least restrictive environment possible without resorting to more intensive intervention or unnecessary or inappropriate suspensions or restrictive placement. The program would specifically help many students to build and use learning, academic, emotion control, behavior, social, academic, anger management, conflict resolution, and school success skills.

**Staff, Teacher & Guidance Counselor Support & Consultation:** The program would also help to: 1) improve the student guidance skills of Union High School teachers, 2) assist Union High School administrators in dealing with at risk, disruptive and emotionally troubled students and setting up and maintaining effective policies, procedures, interventions and structures to support these students in the classroom, and, 3) assist high school guidance counselors in providing counseling and student support services to help at risk HS students.

## **VI. Program Summary Information From the 2015 – 2016 School Year**

The UHS Student Support Program provided by Trinitas has helped students to improve their academic and personal success skills for several years. The following is a brief summary of services provided during the past year by Trinitas Staff to UHS students, staff and parents. The services have included:

- Individual counseling, group sessions, parent / family services and skill building sessions were used to address and overcome student barriers to academic achievement and school success.
- On average, 35-45 sessions with students were conducted in a typical week. The length of student time receiving services varied from one session to several months.
- Over 90 students received services during the 2015 - 2016 school year (116 students received services during the 2015-2016 school year, 140 students received services during the 2015-2016 school year, 137 students received services during the 2012 - 2013 school year).
- The frequency of individual student sessions is extremely variable ranging from once per day to once per month or on an as-needed basis. For students who need checked-in on multiple times a week, coordination and communication with the guidance counselor was conducted. In general coordination between student support services, guidance, administration and teachers
- Approximately 5 to 15 parents are spoken to each week and 15 to 25 teachers are consulted with each week. Administrators, counselors, special service staff, nurses and teachers are consulted with on a daily basis.
- The program conducted individual counseling and skill building addressing the barriers to success in the classroom. Specific goals are identified during the counseling sessions. Goals and progress are monitored through evaluating of student grades and/or contact with teachers.
- Individual sessions addressing student behavioral and emotional difficulties were conducted. These manifest in a variety of different ways and tend to affect more than one area of a student's life: academic, social, familial, self-confidence, health, and motivation to succeed.
- Students were referred to the Student Support Program by the Vice Principals, Guidance Counselors, Child Study Team, Teachers, and Parents. Some students have also sought out help on their own or were informed about the Program by a fellow student.
- Students were either called down from class/lunch for a session or seek out the Student Support Counselor when in distress or need support. Sessions are also conducted after school.
- Contact with administration, counselors, teachers, and parents occurred to aid the skill building process.
- A Coping Skills group was conducted weekly for students with intense anxiety, sadness or interpersonal conflicts.
- An Anxiety group was conducted for students whose primary struggle was with anxiety, panic or excessive worry as well as avoidance that causes some level of impairment.
- Small group and 2 student counseling involving skill building instruction or conflict resolution was been provided.
- Consultation was provided on a regular basis to teachers, administrators and guidance counselors to coordinate referrals, promote student goal achievement, provide appropriate

referrals to outside mental health personnel and aid in problem solving student crisis. Close work with the school Vice Principals, Guidance Counselors, and occasionally the Child Study Team has taken place for receiving of referrals and sharing information.

Consultation was provided to teachers, guidance counselors and administrators to collaborate on plans to assist students in meeting their key goals to promote success in school.

Classroom management, handling of students with emotional difficulties, and improving student motivation consultations were provided to teachers on a frequent basis. Mediation and facilitation of communication between student and teacher was also conducted.

Classroom observations and interventions were used to gather behavioral information to target the student goals relevant to individual students and to advise teachers on effective strategies with students. Teachers received consultation concerning the use of effective interventions to improve student motivation and behavior and to minimize disruption to the rest of the class. Assistance was provided to handle student disruptions by removing the student from the situation for counseling, and then following up with the teacher later on.

Check-in sessions were conducted at the beginning of and during the school year with teachers to remind them of the method of having students obtain services which involves getting signed, notarized parent permission for their child's receipt of services.

Psychology teachers invited the Student Support Counselor to do a presentation on the field of psychology and her experience in graduate school and entering the field.

Family and parent face to face and telephone consultation meetings were conducted on a frequent basis to strengthen communication, support, guidance and problem solving for parents to promote their child's school success.

Following family sessions, consultation sessions and student progress updates were conducted via telephone with parent(s). Updates are increased when parents inquire.

Parent training sessions were offered to educate parents about adolescence, communication, building motivation in their children and other relevant issues and several parents take advantage of this by coming into the school or talking over the phone.

Linking students to community resources: Information was provided to parents regarding counseling services and outside support resources for students and parents.

The program aided school staff and special services personnel in the task of facilitating referrals to outside mental health facilities such as psychiatrists, inpatient treatment programs, outpatient treatment, partial hospitalization and drug rehabilitation programs. In addition, the program refers students to the special services crisis team for evaluation when a student is at risk or in crisis. Communication with community mental health workers (e.g., psychiatrists, therapists...) who were treating students who also were receiving services from the Student Support Program was conducted to collaborate on treatment and help school staff regarding the most important issues and effective interventions with referred students.

Consultation and/or support in managing and resolving crisis situations was provided. Urgent issues consisted of, but were not limited to, explosive students, emotional distress, conflict between students, HIB issues, family issues, self-harm behaviors, disruptive classroom behaviors, and recent evaluations due to suicidal ideation.

Drop in counseling and consultation was provided as part of the program to address urgent issues that emerged unexpectedly throughout the school day. Often counselors or teachers requested support in talking to a student or refer students and accompany them to the program office. Immediate parent contact takes place to get notarized parent permission for seeing students.

A Freshman Skill Building Presentation program was conducted during the school year. The program consisted of freshman attending once a month presentations in the auditorium to instruct them in using specific success skills (e.g., communication, conflict resolution, emotional control, goal setting and achieving...). Handouts with practice sheets were distributed and students were encouraged to return a completed practice sheet in exchange for a chance to win prizes.

Two professional development presentations for the faculty and staff were provided by Dr. Jamie Stillwell. The first was on Dealing with Crisis in Schools and the second presentation was on Burn-out and Self-Care.

Students were generally referred with academic and/or school motivation problems as their primary difficulty.

Monitoring of progress through success charts and contact with teachers was performed. Conflict resolution skill building was used to improve student anger management, resolution of social difficulties and relationship problem solving skills. The program offers a comprehensive approach for students to build their conflict resolution skills.

## **VII. Proposed Program Services and Benefits:**

---

In the 2016 to 2017 school year Trinitas Regional Medical Center staff proposes the continuation of the Student Support Program services. These services would include:

- 1) **Individual Student Psycho Educational Skill Building Instruction and Counseling:** Direct services to guide UHS students in building their academic, learning, behavior, social, emotional, communication and personal success skills. These services to be delivered in both individual and group sessions / modalities.
- 2) **Student Supportive Counseling Services:** Provide direct services to students having difficulties with academics, motivation, learning, anger, emotional turmoil, self harm, conduct, social, grief and loss and other issues that interfere with their academic and personal success. These sessions to be delivered in both individual and group modalities.
- 3) **Provide At Risk Student Consultation to Help Teachers Manage At Risk Students in the Classroom:** Provide ongoing guidance, direction and consultation to teachers and school staff concerning strategies for helping individual at risk students to succeed in the classroom.
- 4) **Alternatives to Suspension and Expulsion Intervention:** Help teachers and administrators to provide aggressive and disruptive students with alternative ways to guide students who provoke other students and teachers. Help decrease the potential for serial suspension without improvement of disruptive and asocial student behavior.
- 5) **Anger Management and Conflict Resolution Training and Skill Building:** In similarity to the previous years the program would target providing anger management skill training and conflict resolution interventions to Union High School students.
- 6) **Teacher Instruction:** Assist in training teachers in verbal de-escalation, conflict resolution, effective classroom management, diffusion of student disruption and positive behavioral guidance skills.

- 7) **Administration Consultation to Prevent and Reduce Student Disruption:** Consult with administrators and teachers to implement policies and procedures to prevent and avoid student disruption and the eroding of classroom instruction time.
- 8) **Parent Support Services:** Provide parent support services to engage parents as partners in improving the behavior, communication and academic achievement of UHS at risk students.
- 9) **Training of School Counselors, Psychologists and Social Workers:** The Student Support Program will help to train and guide school staff in program services and the use of effective interventions with students in need of support services (e.g., co leading of groups, ongoing consultation with the above mentioned school staff to improve intervention and support service effectiveness, instruct school staff in turn key techniques and methods to help improve the academic and behavioral success of at risk students...).

## **VIII. Consultation Services, Program Format and Potential Component Areas:**

**Program Scope:** The program would be provided to all Union High School students, teachers, guidance staff, administrators and parents in need of services during the school year 2016 – 2017.

**Program Components:** The program would consist of implementing some or all of the following elements dependent on the exact needs of staff, teachers, administrators and students. The program is flexible and, therefore, the exact components to be implemented would be based on which services are determined to be the most effective in improving the success of the at risk UHS students in need of services.

**Drop In Support Center:** Maintenance of the Student Support Center where students can make appointments or drop in for individual and group support sessions. The Center would have an atmosphere conducive to confidentiality, self disclosure and support. Student support services would still be contingent on obtaining notarized parent consent.

**Individual Guidance and Counseling Services:** Individual student psycho educational skill building counseling sessions would be offered to students in need.

**Skill Building Group Services:** Depending on the needs of students and the school students would be able to attend psycho-educational skill building groups on different topic areas (e.g., school success, peer relations, anger / conflict management, anxiety control, coping skill improvement...). Teachers could refer students to the groups that correspond to a student's need (e.g., Anger Management, Conflict Resolution Skill Building Group, Behavior Improvement, Positive Communication...). The groups can cover different topics to help at risk students cope with personal difficulties and emotional needs. Group skill instruction sessions may include conflict resolution, positive communication, meditation / self calming training, positive eating and nutrition, the danger of drugs, time management skills, etc.

**Administration, Teacher & Staff Consultation:** Consultation with administration, special services, guidance, nursing, teachers and crisis interventionist staff on strategies for handling individual student problems and creating policy and procedures for controlling and helping at risk students.

**Conflict Resolution Intervention:** Conflict management services (e.g., assessment, referral and follow up of students having conduct, conflict, school refusal, aggressive behavior and other non life threatening yet disruptive to others or the school environment problems).



**Parent Coaching and Counseling:** Individual parent counseling and coaching sessions.

**Assessment and Referral Services:** Assessment of students referred to the Student Support Drop Center and help in guiding these students toward appropriate services when needed.

**Teacher Disruptive Student Classroom Management Skill Building Instruction and Consultation:** Provide guidance to teachers in the use of effective classroom and disruptive student management skills.

**Alternatives to Suspension Services:** The Support Program provides aid to help students in danger of repeated suspensions to learn the skills necessary to avoid fights, problems and trouble and improve their communication and academic success skills.

**Guidance Counselor and UHS Staff Training in Providing Student Support Services:** Helping and training UHS staff in strengthening services to help the high number of at risk students succeed in the high school.

**Component Flexibility:** The exact type and number of the above services provided (e.g., groups, individual services, consultations, parent coaching...) and the exact participants (e.g., at risk students, teachers, staff, administrators, parents...) would be dependent on the needs of the students, high school, teachers, guidance staff, the principal, vice principals and Special Services.

#### **IX. Consultation and Training Program Title:**

---

The Union High School Student Support Program

#### **X. Program Time Frame:**

---

The program would be delivered for the Union Township school year 2016 – 2017.

#### **XI. Cost for Counseling and Clinical Services to be Provided by Trinitas Hospital Wellness Management Services Staff**

---

Wellness Management Services would provide student counseling, teacher consultation, guidance counselor support, administrator consultation, program facilitation, training and the other services outlined above. All consultant preparation time, materials development, transportation time, telephone contacts, incidental meetings, copying, paper use and materials development are included in the pricing below. Services would be billed on a monthly basis throughout the 10 month school year. The total program cost would be \$ 82,000. On site services would include teacher, staff, administrator, parent coaching, family therapy and student counseling. Off site services would include materials development, staff program planning sessions, telephone parent coaching, telephone contacts, facilitator transportation time, administration activities and so on. A breakdown of fees based on services to be provided by Wellness Management Consultants follows:

<b><u>Services or Items to be Provided:</u></b>	<b>Staff to Provide Service:</b>	<b>Number of Hours per week)</b>	<b>Extension for the school year</b>
<b><u>Senior Consultation &amp; Services:</u></b> On site program guidance and consultation activities, school staff & teacher consultation and training, student intervention and counseling and other program activities as per list above, and off site services including staff supervision, program materials development, program administration, etc. (e.g., staff telephone consultation, training materials development, student skill building handouts, teacher instruction materials...).	Dr. Rodger Goddard	2 hours / week	\$4,000
<b><u>Clinician Consultation &amp; Services:</u></b> On site provision of student counseling and support services, school staff consultation and training, student intervention and program involvement activities and limited off site program activities (e.g., parent and staff telephone consultation, training materials development, student skill building handouts, teacher instruction manuals...).	Trinitas licensed Psychologist	37.5 hours per week	\$76,000
<b><u>Clerical and administrative costs:</u></b> (e.g., typing, telephone calling, billing, program assistance services, copying time...)			\$2,000
<b><u>Materials costs:</u></b> (e.g., handouts, manuals, computer usage, curriculum materials, copying costs...)			Included in above
<b><u>Transportation and commuting time cost</u></b>			Included in above
<b><u>Total:</u></b>			82,000

Certification **8128**

**CERTIFICATE OF EMPLOYEE INFORMATION REPORT**  
**RENEWAL**

This is to certify that the contractor listed below has submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 et. seq. and the State Treasurer has approved said report. This approval will remain in effect for the period of **15-MAY-2016** to **15-MAY-2019**

**TRINITAS REGIONAL MEDICAL CENTER**  
**225 WILLIAMSON STREET**  
**ELIZABETH NJ 07207**



*Ford M. Scudder*  
**FORD M. SCUDDER**  
Acting State Treasurer



## STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE

**Taxpayer Name:** TRINITAS REGIONAL MEDICAL CENTER  
**Trade Name:**  
**Address:** 225 WILLIAMSON ST  
ELIZABETH, NJ 07202-3625.  
**Certificate Number:** 0087027  
**Effective Date:** October 12, 2000  
**Date of Issuance:** July 11, 2016

**For Office Use Only:**  
20160711154322648

**Request for Taxpayer  
Identification Number and Certification**

Give Form to the  
requester. Do not  
send to the IRS.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.  
**Trinitas Regional Medical Center**

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:  
 Individual/sole proprietor or single-member LLC  
 Limited liability company. Enter the tax classification (C=D corporation, S=S corporation, P=partnership) ▶  
 Other (see instructions) ▶ **Medical Center 501c(3)**

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  
 Exempt payee code (if any) \_\_\_\_\_  
 Exemption from FATCA reporting code (if any) \_\_\_\_\_  
*(Applies to accounts maintained outside the U.S.)*

5 Address (number, street, and apt. or suite no.) ▶  
**225 Williamson Street**

6 City, state, and ZIP code  
**Elizabeth, NJ 07207**

7 List account number(s) here (optional)

Requester's name and address (optional)

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number	
or	
Employer identification number	
2	2 - 3 6 0 1 6 7 8

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here      Signature of U.S. person ▶ *[Signature]*      Date ▶ **1-09-15**

**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

**Purpose of Form.**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1099 (home mortgage interest), 1099-E (student loan interest), 1099-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
07/14/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> MARSH USA, INC. 445 SOUTH STREET MORRISTOWN, NJ 07960-6454  100649--16-17	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): E-MAIL ADDRESS:	FAX (A/C, No):	
	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
<b>INSURED</b> Trinitas Regional Medical Center 225 Williamson Street Elizabeth, NJ 07207	<b>INSURER A:</b> Princeton Insurance Company		42226
	<b>INSURER B:</b>		
	<b>INSURER C:</b>		
	<b>INSURER D:</b>		
	<b>INSURER E:</b>		
	<b>INSURER F:</b>		

**COVERAGES**                      **CERTIFICATE NUMBER:** NYC-008154129-06                      **REVISION NUMBER:** 9

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CH00000031	06/09/2016	06/09/2017	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 1,000,000
							PRODUCTS - COMP/OP AGG	\$ 1,000,000
								\$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED      RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE	OTH-ER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
A	Hospital Professional Liability			CH00000031	06/09/2016	06/09/2017	Each Medical Incident	1,000,000
							Annual Aggregate	3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Union Board of Education is an Additional Insured with respect to professional services in the area of student support for the 2016-2017 school year.

<b>CERTIFICATE HOLDER</b>  Township of Union Board of Education 2369 Morris Avenue Union, NJ 07083	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE of Marsh USA Inc. Cathy VanOrden <i>Cathy VanOrden</i>
--	---



State of New Jersey  
DEPARTMENT OF BANKING AND INSURANCE

CERTIFICATE ORDER

**GRANTING EXEMPTION  
FROM  
INSURING LIABILITY FOR COMPENSATION**

JUNE 1, 2015

**ID#: W1689**

**ORIGINAL EXEMPTION DATE  
07/13/2012**

THIS CERTIFIES THAT, TRINITAS REGIONAL MEDICAL CENTER, A CORPORATION ORGANIZED UNDER THE LAWS OF AND AN EMPLOYER SUBJECT TO THE PROVISIONS OF TITLE 34, CHAPTER 15, ARTICLE 5, OF THE "REVISED STATUTES" OF THIS STATE, KNOWN AS THE "COMPULSORY INSURANCE LAW", HAVING REASONABLY SATISFIED ME IN ACCORDANCE WITH SECTION 77 OF SAID CHAPTER AS TO FINANCIAL ABILITY TO PAY COMPENSATION HAS BEEN DULY EXEMPTED BY ME FROM INSURING THE LIABILITY ARISING OUT OF TITLE 34, CHAPTER 15, OF THE "REVISED STATUTES" IN THIS STATE UNTIL JUNE 30, 2016.

**KENNETH E. KOBYSLOWSKI  
COMMISSIONER OF BANKING AND INSURANCE**





Department of the Treasury  
Internal Revenue Service

P.O. Box 2508  
Cincinnati OH 45201

In reply refer to: 0248303541  
Dec, 29, 2008 LTR 416BC E0  
22-3601678 000000 00 000  
00013561  
BODCI TE

TRINITAS REGIONAL MEDICAL CENTER  
A NEW JERSEY NONPROFIT CORPORATION  
225 WILLIAMSON ST  
ELIZABETH NJ 07202-3625256



002674

Employer Identification Number: 22-3601678  
Person to Contact: Dee Anna Jarmon  
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your request of Dec. 16, 2008, regarding your tax-exempt status.

Our records indicate that a determination letter was issued in August 1998, that recognized you as exempt from Federal income tax, and discloses that you are currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records also indicate you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(v).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

*Michele M. Sullivan*

Michele M. Sullivan, Oper. Mgr.  
Accounts Management Operations I



DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
WASHINGTON, D.C. 20224

Date: DEC 28 1989

Trinitas Hospital  
c/o St. Elizabeth Hospital  
225 Williamson Street  
Elizabeth, NJ 07207

Employer Identification Number:  
22-3601678  
Issuing Specialist:  
Steve Jankowitz-ID No. 50-03610  
Toll Free Customer Service Number:  
877-829-5500  
Accounting Period Ending:  
December 31  
Foundation Status Classification:  
501(c)(1) & 170(b)(1)(A)(iii)  
Form 1990 Required:  
Yes

Dear Applicant:

Based on the information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in the section(s) indicated above.

Please notify the Ohio Employee Plans/Exempt Organizations (EP/EO) Customer Service office if there is any change in your name, address, sources of support, purposes, or method of operation. If you amend your organizational document or bylaws, please send a copy of the amendment to the Ohio EP/EO Customer Service office. The mailing address for that office is: Internal Revenue Service, EP/EO Customer Service, P.O. Box 2508, Cincinnati, OH 45201.

You are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act.

If you are involved in an excess benefit transaction, that transaction might be subject to the excise taxes of section 4958 of the Code. In this letter we are not determining whether any of your present or proposed arrangements would be considered an excess benefit transaction resulting in tax under section 4958. Additionally, you are not automatically exempt from other federal excise taxes.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of Code sections 2015, 2106, and 2522.

Donors (including private foundations) may rely on this ruling unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your 509(a) status as indicated above, donors (other than private foundations) may not rely on the classification indicated above if they were in part responsible for, or were aware of, the act that resulted in your loss of such status, or they acquired knowledge that the Internal Revenue Service had given notice that you would be removed from that classification. Private foundations may rely on the classification as long as you were not directly or indirectly controlled by them or by disqualified persons with respect

- 2 -

Tinnitus Hospital

to them. However, private foundations may not rely on the classification indicated above if they acquired knowledge that the Internal Revenue Service had given notice that you would be removed from that classification.

Contribution deductions are allowable to donors only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fund-raising events may not necessarily qualify as fully deductible contributions, depending on the circumstances. If your organization conducts fund-raising events such as benefit dinners, shows, membership drives, etc., where something of value is received in return for payments, you are required to provide a written disclosure statement informing the donor of the fair market value of the specific items or services being provided. To do this you should, in advance of the event, determine the fair market value of the benefit received and state it in your fund-raising materials such as solicitations, tickets, and receipts in such a way that the donor can determine how much is deductible and how much is not. Your disclosure statement should be made, at the latest, at the time payment is received. Subject to certain exceptions, your disclosure responsibility applies to any fund-raising circumstance where each complete payment, including the contribution portion, exceeds \$75. In addition, donors must have written substantiation from the charity for any charitable contribution of \$250 or more. For further details regarding these substantiation and disclosure requirements, see the enclosed copy of Publication 1771. For additional guidance in this area, see Publication 1391, Deductibility of Payments Made to Organizations Conducting Fund-Raising Events, which is available at many IRS offices or by calling 1-800-TAX-FORM (1-800-828-3676).

In the heading of this letter we have indicated whether you must file Form 990, Return of Organization Exempt from Income Tax. If "Yes" is indicated, you are required to file Form 990 only if your gross receipts each year are normally more than \$25,000. If your gross receipts each year are not normally more than \$25,000, we ask that you establish that you are not required to file Form 990 by completing Part I of that Form for your first year. Thereafter, you will not be required to file a return until your gross receipts exceed the \$25,000 minimum. For guidance in determining if your gross receipts are "normally" not more than the \$25,000 limit, see the instructions for the Form 990. If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of \$20 a day is charged when a return is filed late, unless there is reasonable cause for the delay. The maximum penalty charged cannot exceed \$10,000 or 5 percent of your gross receipts for the year, whichever is less. For organizations with gross receipts exceeding \$1,000,000 in any year, the penalty is \$100 per day per return, unless there is reasonable cause for the delay. The maximum penalty for a 1 organization with gross receipts exceeding \$1,000,000 shall not exceed \$50,000. This penalty may also be charged if a return is not complete, so please be sure your return is complete before you file it. Form 990 should be filed with the Ogden Service Center, Ogden, UT 84201-0127.

The law requires you to make your annual return available for public inspection without charge for three years after the due date of the return. You are also required to make available for public inspection a copy of your exemption application, any supporting documents, and this exemption letter to any individual who requests such documents in person or in writing. You can charge only a reasonable fee for reproduction and actual postage costs for the copied materials. The law does not require you to provide copies of public inspection documents that are made widely available, such as by posting them on the Internet (World Wide Web). You may be liable for a penalty of \$20 for each day you do not make these documents available for public inspection (up to a maximum of \$10,000 in the case of an annual return).

Trinitas Hospital

You are not required to file federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

Please use the employer identification number indicated in the heading of this letter on all returns you file and in all correspondence with the Internal Revenue Service. Because this letter could help resolve any questions about your exempt status, you should keep it in your permanent records. If you have any questions about this letter, or about filing requirements, excise, employment, or other federal taxes, please contact the Ohio EP/EO Customer Service office at 877-829-8600 (a toll free number) or correspond with that office using the address indicated above.

Sincerely,

*Marvin Friedlander*

Marvin Friedlander  
Manager, Exempt Organizations  
Technical Group 1

Enclosure:  
Pub. 1771

# WELLNESS MANAGEMENT SERVICES

*Trinitas Regional Medical Center – Department of Behavioral Health and Psychiatry*

## CONTRACT: AGREEMENT FOR STUDENT SUPPORT SERVICES

### Opening:

**This agreement, made this 15th day of August, 2016**

**Between**

**Wellness Management Services  
of Trinitas Regional Medical Center  
Department of Behavioral Health and Psychiatry  
655 East Jersey Street  
Elizabeth, New Jersey 07206  
Tax ID #: 22 360 1678**

**and**

**Union Township Public Schools  
1000 Caldwell Ave.  
Union, New Jersey 07083**

### Scope of the Work / Conditions:

**It is agreed that Wellness Management Services will provide the following:**

**Program Title:**

**The Union High School Student Support Program**

**Program Services:**

Provide student counseling, skill building, individual and group counseling, assessment, psycho educational presentations, individual and group parent guidance and teacher, staff and administrative support and guidance at Union High School during the school year September, 2016 to June, 2017.

**Program Objectives:**

To improve the academic, social, learning and behavioral skills of at risk Union High School students. To provide support and guidance to High School students identified as having personal, behavioral and/or emotional difficulties.

**Description of Specific Program Services to be Delivered:**

**Drop In Support Center:** Maintenance of the Student Support Center where students can make appointments or drop in for individual and group support sessions – The Center would have an atmosphere conducive to confidentiality, self disclosure and support.

**Individual Psycho Educational Skill Building and Counseling:** Individual ongoing student skill building and counseling sessions.

**Conflict Intervention:** Management of student conflict.

**Group Support Sessions:** Weekly support groups covering different topics to help at risk students cope with personal difficulties and emotional needs (e.g., anger management, loss and bereavement, overcoming anxiety and stress, building positive coping and success skills...).

**Psycho Educational Skill Building Instruction Presentations:** Student Presentations to be given in classes or in the Student Support Center. Presentation content would be based on student and school needs (e.g., Teenage health issues, Planning for your future, Good Friends – Bad Friends; how to know the difference, Dealing with relationship Problems, Dealing with Difficult Emotions, Conflict Resolutions Skills...).

**Parent Counseling and Coaching:** Individual parent support sessions to help parents improve their children's academic, personal and school success.

**Assessment and Referral Services** Aid school staff in identifying and evaluating student difficulties and providing effective support services to help overcome at risk student problems.

**Administration, Teacher & Staff Consultation:** Consultation with administration, special services, guidance, nursing, teachers, security and crisis interventionist staff on strategies for handling individual student problems and creating policy and procedures for controlling and helping at risk students.

The exact type and number of the above services provided (e.g., groups, individual, presentations, consultations) and the exact participants (e.g., at risk students, teachers, staff, administrators) would be dependent on the needs of the students, teachers, the principal, vice principals, Special Service staff and the high school.

**Program Staff:**

1 full time psychologist (i.e., 37.5 hours per week for program and administrative activities) will provide services for Union High School. Additional 2 hours / week services and program guidance, supervision, monitoring and administration to be provided by Dr. Rodger Goddard as detailed in the included proposal.

**Program Location:**

Most services to be delivered on site at Union High School in Union, N.J.  
Some support and administrative services to be delivered off site (e.g., staff supervision, parent guidance, communication services via telephone, e-mail and Internet, materials development...).

**Program Time Period / Term:**

The school year commencing in September, 2016 and ending in June, 2017.

**Program Participants:**

At risk students, high school teachers, school staff and parents at Union High School.

**Cost:**

\$ 82,000 for the school year including all services, materials, materials development and transportation costs.

**Payment Terms:**

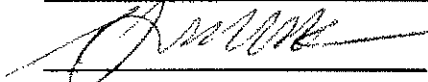
Total payment to be divided up into 10 equal monthly payments, payable 14 days after the end of the previous month's services.

**Signed:**

**For Wellness Management Services of Trinitas Regional Medical Center:**

Rodger Goddard, Ph.D.

Director, Wellness Management Services

 (Signed)

7/20/16 (Date)

**For Union Township Schools President Board of Education**

\_\_\_\_\_ (Name)

\_\_\_\_\_ (Title)

\_\_\_\_\_ (Signed)

\_\_\_\_\_ (Date)

