



**CONTRACT / AGREEMENT ROUTING FORM**

**NO STUDENT CONTACT**

SCCOE Staff Contact	Name	Email	Extension
Questions about this contract should be sent to:	Brenda Arroyo	brenda_arroyo@sccoe.org	x6504

**Directions**

Steps listed below must be completed *sequentially*.  
 \*Services cannot be initiated until the contract is fully approved.

1.  Check applicable category to verify compliance with AR 3310. Attach Purchasing Verification.
 

<input type="checkbox"/> RFP / Bid	<input type="checkbox"/> Sole Source	<input type="checkbox"/> N/A
<input type="checkbox"/> Best Source (\$3,000 - \$92,600)	<input type="checkbox"/> Verified by Purchasing (required) _____	
2.  Contractor and SCCOE contract originator reach agreement about scope of work and compensation.
3.  Prepare a contract.
4.  Gather initials verifying review of draft contract and identified funding source:
 

<input checked="" type="checkbox"/> Initiator <sup>DS</sup> <i>Bll</i>	<input checked="" type="checkbox"/> Director <sup>DS</sup> <i>N/A</i>	For Construction/Design and Leases Only:	For Software/Technology Purchases Only:
<input type="checkbox"/> Manager <i>N/A</i>	<input checked="" type="checkbox"/> Chief <i>EM</i>	<input type="checkbox"/> General Services Director _____	<input type="checkbox"/> Information Systems Ctr Director _____
5.  SCCOE contract originator completes the contract packet and gathers required attachments.
 

<input type="checkbox"/> Auto Liability	<input type="checkbox"/> General Liability Insurance Certificate:
<input type="checkbox"/> W-9	<input type="checkbox"/> Additional Insurance Endorsement
<input type="checkbox"/> Proof of Workers' Compensation Insurance	<input type="checkbox"/> Molestation / Sex Abuse Endorsement
6.  Contractor to review and sign the contract.  
 Initial    Date Approved
7.  \_\_\_\_\_ Risk Management to review, initial, and return to contract originator for final contract signature.
8.  \_\_\_\_\_ Obtain appropriate signature on contract per thresholds listed below.
 

<input type="checkbox"/> \$0 - \$2,999: SCCOE Director
<input checked="" type="checkbox"/> \$3,000 - \$99,999: SCCOE Chief
<input type="checkbox"/> \$100,000 & Over: Superintendent
9.  \_\_\_\_\_ Return to Risk Management to obtain an RM #. Risk Management returns to originator.
10.  \_\_\_\_\_ Contract originator creates the requisition using assigned RM # to generate a PO.

**Contract Information**

Contract Type	<input type="checkbox"/> Professional Services Agreement <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> MOU <input type="checkbox"/> Lease Agreement: <input type="checkbox"/> Construction / Design <input type="checkbox"/> New <input type="checkbox"/> Technology <input type="checkbox"/> Renewal
Contractor's Name	Mountain View Whisman School District (SLS)
Service Type / Brief Description	Suicide Prevention Partnership (Kognito)

**Compensation & Terms**

*Anticipated Start Date	7/1/20	End Date	6/30/21
Total Contract Amount	\$ 4,529.00		



Mary Ann Dewan, Ph.D.  
County Superintendent of Schools

**MEMORANDUM OF UNDERSTANDING  
BETWEEN  
SANTA CLARA COUNTY OFFICE OF EDUCATION/SAFE & HEALTHY SCHOOLS  
AND  
MOUNTAIN VIEW WHISMAN SCHOOL DISTRICT (SLS)**

Santa Clara County Office of Education (SCCOE) Safe & Healthy Schools and MOUNTAIN VIEW WHISMAN SCHOOL DISTRICT (SLS) agree to follow the roles and responsibilities as it relates to implementing a School-Based Suicide Prevention and Crisis Intervention Partnership. The terms and conditions for this collaboration are described below.

**I. TERMS OF MOU**

This agreement shall commence on July 1st, 2020 and shall end on June 30, 2021.

**II. RESPONSIBILITIES**

A. The School District shall:

1. Recruit/identify a district-level Kognito/Suicide prevention training and implementation lead.
2. District leads will ensure that staff will complete Kognito simulations or ensure rollout of the "Friend2Friend" simulation for students, as outlined on **page 1** of the **County of Santa Clara Schools for Suicide Prevention (S4SP) Partnership 2020-21 Partnership Agreement**.
3. Provide the number of teachers and staff District will train using Kognito Health Simulation.
4. Coordinate a district team to receive technical support and to facilitate meetings with appropriate district and school staff, to receive Stanford/HEARD Alliance technical support.
5. Provide upon invoice the Cost Share for the Kognito Annual Licenses, Cost of Licenses Only, not to exceed **\$4,529.00**.

B. SCCOE/ SAFE & HEALTHY SCHOOLS shall:

1. Serve as a pass-through for MOUNTAIN VIEW WHISMAN SCHOOL DISTRICT (SLS) Cost Share for the Kognito Annual Licenses, Cost of Licenses only.
2. Enter into a contract with the Santa Clara County Behavioral Health Services to provide the funding for the matching Kognito Annual License cost share as well as MOUNTAIN VIEW WHISMAN SCHOOL DISTRICT (SLS) share of fees associated with service/set-up, custom surveys and training.
3. Enter into a Licensing Agreement with Kognito Solutions LLC on behalf of MOUNTAIN VIEW WHISMAN SCHOOL DISTRICT (SLS) to provide annual user licenses for MOUNTAIN VIEW WHISMAN SCHOOL DISTRICT (SLS) staff.

**III. COMPENSATION**

- A. MOUNTAIN VIEW WHISMAN SCHOOL DISTRICT (SLS) shall pay SCCOE/SAFE & HEALTHY SCHOOLS for each of the above items, **total not to exceed \$4,529.00** by due date.
  - a. The term of this MOU will begin July 1st, 2020 extending until June 30, 2021.
  - b. This MOU may be terminated by the District at any time prior to the date of expiration if such decision is reported by signatory in written note. A refund of MOUNTAIN VIEW WHISMAN SCHOOL DISTRICT (SLS) Cost Share will not be issued upon termination of MOU.
  - c. During the time, the MOU is in effect, the parties may amend the term of the MOU to improve the effectiveness of the district implementation of this partnership. The amendments shall be in writing.
  - d. Unless otherwise stipulated, any amendments to this MOU will take effect when signed by MOUNTAIN VIEW WHISMAN SCHOOL DISTRICT (SLS) and Santa Clara County Office of Education.
  
- B. MOUNTAIN VIEW WHISMAN SCHOOL DISTRICT (SLS) shall make payment within 30 days of receiving each invoice.

**IV. INSURANCE/HOLD HARMLESS**

- A. Insurance: SCCOE and District shall maintain a certificate of insurance in the business office of each respective office.
- B. Indemnity: SCCOE and District shall each hold one another harmless from and against any and all claims arising from the work performed herein.

**V. APPROVALS**

This agreement shall become effective upon its approval by the undersigned.

<b>DISTRICT</b>		
Cathy Baur /		
Printed Name/Title	Signature	Date

<b>SCCOE</b>		
Printed Name/Title	Signature	Date

<b>SCCOE USE ONLY:</b>	
Initiator: <u>Bl</u>	
Manager/Director: <u>N/A</u>	
Chief: <u>EM</u>	



**County of Santa Clara Schools for Suicide Prevention (S4SP) Partnership  
2020-21 Partnership Agreement**

*Thank you for your participation in the S4SP partnership with the Behavioral Health Services Department's Suicide Prevention Program, School-Linked Services, and the County Office of Education.*

**< PAGE 1 OF 2: CONFIRM YOUR PLANS >**

- 1. Please confirm your district-level Kognito/suicide prevention training implementation lead(s)** *(responsible for attending meetings; creating and implementing rollout plan; championing Kognito training to schools; ensuring completion of trainings; acting as liaison to County):*

Name(s): \_\_\_\_\_ Cathy Baur \_\_\_\_\_

Email(s): \_\_\_\_\_ cbaur@mvwsd.org \_\_\_\_\_

Phone number(s): \_\_\_\_\_ 650-526-3545 \_\_\_\_\_

- 2. How many teachers, staff and/or students are you committing to train in the Kognito health simulation programs during the 2020-21 school year?** *Note: New staff should complete the "At-Risk" simulation included in your district's license.*

	High School Educators		Middle School Educators		Elementary School Educators		Early Childhood Educators		Other Staff	
	New	All	New	All	New	All	New	All	New	All
At-Risk										
Trauma-Informed										
Bullying Prevention			15	100	15	185			5	30
Postvention (Resilient Together)										
LGBTQ (Step In, Speak Up)										
Students: Indicate grade level(s) and classes where you will rollout (e.g. Health, PE)										
Friend2Friend										

- 3. What are some ways you will support Kognito trainings with additional suicide prevention and mental health trainings/programs (especially in Tier 1)?**

*Specify activities*

<input type="checkbox"/>	Parent education and trainings	Mental Health – Youth Panel – This event had to be cancelled this year due to school closure and I would like to offer it again even if we have to do it virtually.
<input type="checkbox"/>	Other student mental health trainings	
<input type="checkbox"/>	Student mental health clubs	
<input type="checkbox"/>	Other Tier 1/SEL efforts	Looking at auditing SEL programs at each site next year and possibly moving to one program for all elementary sites and one for both middle schools.

<input type="checkbox"/>	Tier 3 suicide prevention training for mental health professionals/Crisis Response Team	Continued Development of teams and protocols. This stopped when school closed this year.
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**2: CONFIRM YOUR COMMITMENTS >**

**1. Pricing**

For all participating districts:

- Kognito will give a 23% group discount off the license cost.
- The Suicide Prevention Program will pay for the Kognito set-up fee (\$25,000), cost for custom evaluation surveys (\$6,000), and the full contract amount for the HEARD Alliance team’s technical support.
- For School-Linked Services districts: The County Suicide Prevention Program will cover 50% of the district’s discounted license cost.

Your district will be required to pay the full amount listed below to the County Office of Education.

District	District Cost
MOUNTAIN VIEW WHISMAN	\$4,529

**X I agree to pay the listed district amount to the County Office of Education (COE). COE will follow-up with a formal agreement for funds transfer.**

**2. Kognito Training Implementation**

District leads will ensure that staff will complete Kognito simulations, or ensure rollout of the “Friend2Friend” simulation for students, as outlined on page 1.

**X I agree to facilitate rollout of the Kognito training across my district, myself and by working with school leads.**

**3. Stanford/HEARD Alliance Technical Assistance**


This partnership allows for access to consultation from the Stanford/HEARD Alliance team. These consultations will advise school staff on their suicide crisis response and prevention protocols, along with support on broader school-based prevention efforts.

**X My district and schools agree to receive technical support and to facilitate meetings with appropriate district and school staff, to receive HEARD Alliance technical support.**

Please sign and date below. Send the completed form to Suicide Prevention Program Coordinator, Jasmine Lopez, at [jasmine.lopez@hhs.sccgov.org](mailto:jasmine.lopez@hhs.sccgov.org).

Name: Cathy Baur

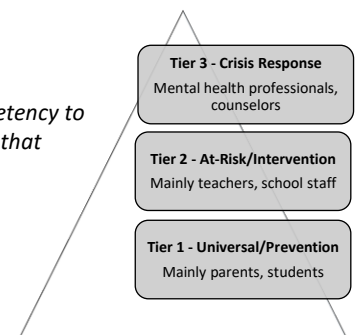
Date 5/26/20

Signature: 

\* \* \* \*

*Kognito health simulations use role-play with virtual people to increase the learner’s comfort and competency to manage critical conversations in the areas of mental health, bullying, or related non-academic areas that impact social and emotional wellness, attendance, school climate, and academic success.*

<https://kognito.com/>





Santa Clara County  
Office of Education



COUNTY OF SANTA CLARA  
**Behavioral Health Services**

*The **HEARD Alliance**'s mission is to increase collaboration among primary care, mental health, and educational professionals, to enhance the community's ability to promote well-being, to treat depression and related conditions, and to prevent suicide in adolescents and young adults. The HEARD Alliance developed the [K-12 Toolkit for Mental Health Promotion and Suicide Prevention](http://www.heardalliance.org/help-toolkit/) ([www.heardalliance.org/help-toolkit/](http://www.heardalliance.org/help-toolkit/)), based on youth suicide prevention and mental wellness efforts in Palo Alto.*

In Process