



Kenton County School District | It's about ALL kids.

Issue Paper

DATE:

June 27, 2023

AGENDA ITEM (ACTION ITEM):

Consider/Approve Dixie Heights High School to contract with The Point/Arc of Northern Kentucky and TANK RAMP to provide pre-vocational skills training and transportation for 3 Dixie students for the 2023/2024 school year. Semester I will run from September until December and Semester II will run from January until May.

APPLICABLE BOARD POLICY:

01.1 Legal Status of the Board

HISTORY/BACKGROUND:

Dixie Heights would like to enter into a contract with The Point/Arc of Northern Kentucky to provide pre-vocational skills training and transportation for 3 Dixie students. Students will attend training from September 2023 until May 2024 and will attend two days a week. Transportation will be provided by TANK RAMP. Semester 1 will run from September until December and Semester II will run from January until May.

FISCAL/BUDGETARY IMPACT:

Total cost of transition services for the program is free to all three students this school year. Cost of the RAMP transportation will be \$520.00 for Semester 1 and \$605.00 for Semester II. The cost of the program transportation will be paid using SBDM funds..

RECOMMENDATION:

Approval to Dixie Heights High School to contract with The Point/Arc of Northern Kentucky and TANK RAMP to provide pre-vocational skills training and transportation for 3 Dixie students for the 2023/24 school year.

CONTACT PERSON:

Teresa Catchen



Principal/Administrator



District Administrator



Superintendent

Use this form to submit your request to the Superintendent for items to be added to the Board Meeting Agenda.
Principal—complete, print, sign and send to your Director. Director—if approved, sign and put in the Superintendent's mailbox.

THE POINT/ARC OF NORTHERN KENTUCKY-ZEMBRODT EDUCATION CENTER
CONTRACT FOR TRANSITION SERVICES

School Name/District: Dixie Heights High School / Kenton County School District

Student Name: D.T. and K.O.

Thank you for referring the aforementioned students to The Point/Arc of Northern Kentucky-Zembrodt Education Center Transition Program for the 2023-2024 school year. We are excited about the upcoming school year and all the possibilities that it will bring. Please review the information below as it pertains to the program. We look forward to the year and our continued partnership.

Dates:

Semester I September 5th, 2023— December 20th, 2023

Semester II January 4th, 2024 — May 6th, 2024

Schedule:

☒ Monday, Wednesday 1:00-3:00 p.m.

☐ Tuesday, Thursday, Friday 1:00pm – 3:00pm

Services Requested:

☒ Elevate Job Training

☐ Career Exploration

School contribution:	\$0.00 per student, per semester
Total contribution per semester:	\$0.00 per semester

Cancellation Policy:

Cancellation of services must be made in writing. Should services be terminated, schools are responsible for correspondence with The Point staff and OVR administration.

Thank you for partnering with The Point to prepare high school students for employment opportunities.

Authorizing Signature

Date

Katie Lanham, Education Administrator and Transition Coordinator

Date



**THE POINT/ARC OF NORTHERN KENTUCKY-ZEMBRODT EDUCATION CENTER
CONTRACT FOR TRANSITION SERVICES**

School Name/District: Dixie Heights High School / Kenton County School District

Student Name: Z.S.

Thank you for referring the aforementioned student to The Point/Arc of Northern Kentucky-Zembrodt Education Center Transition Program for the 2023-2024 school year. We are excited about the upcoming school year and all the possibilities that it will bring. Please review the information below as it pertains to the program. We look forward to the year and our continued partnership.

Dates:

Semester I September 5th, 2023 — December 19th, 2023

Semester II January 4th, 2024 — May 3rd, 2024

Schedule:

☐ Monday, Wednesday 1:00-3:00 p.m.

☒ Tuesday, Thursday, Friday 1:00pm — 3:00pm

Services Requested:

☐ Pre-Vocational Skills Training

☒ Career Exploration

School contribution:	\$0.00 per student, per semester
Total contribution per semester:	\$0.00 per semester

Cancellation Policy:

Cancellation of services must be made in writing. Should services be terminated, schools are responsible for correspondence with The Point staff and OVR administration.

Thank you for partnering with The Point to prepare high school students for employment opportunities.

Authorizing Signature

Date

Katie Lanham, Education Administrator and Transition Coordinator

Date



The Point/Arc of Northern Kentucky – Zembrodt Education Center
Kenton County - Dixie Heights High School
Contract for Transportation Services

Transportation Cost: Travel costs will be calculated at the end of each semester. The following is an estimated cost per semester according to the number of days the student(s) is expected to attend class at The Point Arc's Zembrodt Education Center (ZEC). Invoices at the end of the semester will reflect actual charges of RAMP or TANK trips taken.

Semester 1:

	Cost/Trip	Trip #	Costs	Cost/Semester
D.T.				
RAMP To	\$2.50	30	\$75.00	
Return Trip RAMP	\$2.50	30	\$75.00	
Total				\$150.00
K.O.				
RAMP To	\$2.50	30	\$75.00	
Return Trip RAMP	\$2.50	30	\$75.00	
Total				\$150.00
Semester 1 Grand Total				\$300.00

**Semester 2:**

	Cost/Trip	Trip #	Costs	Cost/Semester
D.T.				
RAMP To	\$2.50	34	\$85.00	
Return Trip RAMP	\$2.50	34	\$85.00	
Total				\$170.00
K.O.				
RAMP To	\$2.50	34	\$85.00	
Return Trip RAMP	\$2.50	34	\$85.00	
Total				\$170.00
Semester 2 Grand Total				\$340.00

Total Annual Estimated Transportation Cost to Dixie Heights High School for 2023-2024:
\$640.00

I have read this contract and agree to its terms.

Authorizing Signature/Dixie Heights High School

Date

Katie Lanham, Education Administrator and Transition Coordinator

Date



**The Point/Arc of Northern Kentucky – Zembrodt Education Center
Kenton County - Dixie Heights High School
Contract for Transportation Services**

Transportation Cost: Travel costs will be calculated at the end of each semester. The following is an estimated cost per semester according to the number of days the student(s) is expected to attend class at The Point Arc's Zembrodt Education Center (ZEC). Invoices at the end of the semester will reflect actual charges of RAMP or TANK trips taken.

Semester 1:

	Cost/Trip	Trip #	Costs	Cost/Semester
Z.S.				
RAMP To	\$2.50	44	\$110.00	
Return Trip RAMP	\$2.50	44	\$110.00	
Total				\$220.00
Semester 1 Grand Total				\$220.00

Semester 2:

	Cost/Trip	Trip #	Costs	Cost/Semester
Z.S.				
RAMP To	\$2.50	53	\$132.50	
Return Trip RAMP	\$2.50	53	\$132.50	
Total				\$265.00
Semester 2 Grand Total				\$265.00



Total Annual Estimated Transportation Cost to Dixie Heights High School for 2023-2024:
\$485.00

I have read this contract and agree to its terms.

Authorizing Signature/Dixie Heights High School

Date

Katie Lanham, Education Administrator and Transition Coordinator

Date



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/20/2023

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 have ADDITIONAL INSURED provisions or 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).

PRODUCER Chas. H. Bilz Ins. Agency 909 Wright's Summit Parkway Suite 210 Ft. Wright KY 41011		CONTACT NAME: Amanda Richey, CIC PHONE (A/C, No, Ext): (859) 431-1235 FAX (A/C, No): (859) 431-0437 E-MAIL ADDRESS: AmandaR@BilzIns.com																						
INSURED The Point/ARC of No. Ky., Inc. and The Point Programs 104 West Pike Street Covington KY 41011		<table border="1"><thead><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr></thead><tbody><tr><td>INSURER A:</td><td>West Bend Mutual Insurance</td><td>.15350</td></tr><tr><td>INSURER B:</td><td>ClearPath Mutual Insurance Co</td><td></td></tr><tr><td>INSURER C:</td><td></td><td></td></tr><tr><td>INSURER D:</td><td></td><td></td></tr><tr><td>INSURER E:</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></tbody></table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	West Bend Mutual Insurance	.15350	INSURER B:	ClearPath Mutual Insurance Co		INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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INSURER E:																								
INSURER F:																								

COVERAGES **CERTIFICATE NUMBER:** 23/24 Primary **REVISION NUMBER:**

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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			A11893300	01/01/2023	01/01/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 Professional Liability \$ 1,000,000
	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			A11893300	01/01/2023	01/01/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist BI- \$ 1,000,000
	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			A11893300	01/01/2023	01/01/2024	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> Y	N/A	0018766	05/30/2023	05/30/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 2,000,000 E.L. DISEASE - EA EMPLOYEE \$ 2,000,000 E.L. DISEASE - POLICY LIMIT \$ 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Kenton County Board of Education is included as General Liability Additional Insured when required by written contract.

CERTIFICATE HOLDER

CANCELLATION

Kenton County Board of Education 1055 Eaton Drive Fort Wright KY 41017	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
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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – AUTOMATIC STATUS WHEN
REQUIRED BY WRITTEN CONTRACT WITH YOU**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

- A. Section II - Who is An Insured** is amended to include as an additional insured any person or organization you are required by a written contract to name as an additional insured.
- The written contract must be:
1. Currently in effect or becoming effective during the term of this policy; and
 2. Signed by all parties to the written contract or written agreement prior to the "bodily injury," "property damage," "personal injury and advertising injury."
- B.** The insurance provided to the additional insured is limited as follows:
1. That person or organization is only an additional insured with respect to liability for "bodily injury," "property damage" or "personal and advertising injury" caused in whole or in part, by:
 - a. your ongoing operations performed for the insured at the location designated in the written contract; or
 - b. premises owned or used by you.
- However:
- a. The insurance afforded to such additional insured only applies to the extent permitted by law; and
 - b. If coverage provided to the additional insured is required by a written contract or written agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- C.** With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:
- This insurance does not apply to:
1. "Bodily injury," "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:
 - a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; and
 - b. Supervisory, inspection, architectural or engineering activities.
 2. "Bodily injury" or "property damage" occurring after:
 - a. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
 - b. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principle as a part of the same project.
- D.** As respects the coverage provided under this endorsement, Paragraph **4.b. Section IV – COMMERCIAL GENERAL LIABILITY CONDITIONS** is amended with the addition of the following:
- 4. Other Insurance**
- b. Excess Insurance**
- This insurance is excess over:
- Any other valid and collectible insurance available, procured by or on behalf of the additional insured whether primary, excess, contingent or on any other basis unless a written contract specifically requires that this insurance be either primary or primary and noncontributing. Where required by written contract, we will consider any other insurance maintained by the additional insured for injury or damage covered by this endorsement to be excess and noncontributing with this insurance.

If no written contract specifically requires primary or noncontributory coverage, then this insurance is excess, as a condition of coverage, the additional insured shall be obligated to tender the defense and indemnity of every claim or suit to all other insurers that may provide coverage to the additional insured, whether on a contingent, excess or primary basis.

When this insurance is excess, we will have no duty under Coverage **A.** and Coverage **B.** to defend the insured against any "suit" if any other insurer has a duty to defend the insured against that "suit". If no other insurer defends, we will undertake to do so, but we will be entitled to the insured's rights against all those other insurers.