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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF THE COMMISSIONER

Lori A. Weaver
Commissioner

Morissa Henn
Deputy Commissioner

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April 1, 2025

Her Excellency, Governor Kelly A. Ayotte
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, to enter into an educational tuition agreement and to pay said costs in an amount of \$1,900.00 as follows:

Institution:	Bay Path University 588 Longmeadow Street Longmeadow, MA 01106
Course Title(s):	Trauma and Crisis Intervention
Course Date(s):	Begin: 05/05/25 End: 08/17/25
Employee:	Biram Saidybah
Funding Source:	05-95-95-953010-56770000-066-500544
Total Cost of Course(s):	\$2,985.00
State Share:	\$1,900.00
Source of Funds:	Employee Training, 20% Federal, 80% General

EXPLANATION

This education will benefit the Department of Health and Human Services (DHHS) and Biram Saidybah by improving the overall efficacy and efficiency of the employee's work. Biram will incorporate the knowledge gained from this course into the current position by advancing key concepts, theories, and models related to trauma and crisis intervention. The focus on how trauma and crises affect individuals, groups, and communities, with particular attention to vulnerable populations, aligns with the Office of Health Equity's mission to ensure all individuals have meaningful access to services.

This course, *Trauma and Crisis Intervention*, will benefit the Department and the employee by providing resources and guidance on assessment and treatment planning through case study evaluations and discussion forums. With additional resources, Biram will be better equipped to develop, implement, and advocate for appropriate behavioral health services. The knowledge gained will directly inform Biram's work in designing training modules, evaluating service delivery systems, and engaging with community stakeholders to identify and address gaps in care.

Biram has been employed by the Department of Health and Human Services for two and a half (2.5) years in the current position of 21-1090 MISC SOC SVC SPECS-6 (Behavioral Health Cultural and Linguistic Competence Coordinator) with the Office of Health Equity. This employee provides technical assistance, develops and delivers training, and collaborates with internal teams and external partners to ensure that services are accessible and responsive to the needs of all New Hampshire populations. Biram also contributes to strategic planning, program evaluation, and community engagement efforts that align with the mission of the Office of Health Equity and the whole of DHHS.

The Department of Health and Human Services encourages and supports employees who wish to further their professional growth through continuing education in disciplines that are mutually advantageous. Successful completion of the course will add to the overall strength of the Department to perform its mission for the residents of New Hampshire.

This course will not be taken on State time.

Attached is a fully executed Tuition Agreement for your review.

Respectfully submitted,



LW Lori A. Weaver
Commissioner



THE STATE OF NEW HAMPSHIRE
EDUCATIONAL TUITION AGREEMENT

Agreement dated this 01 day of April 2025 by and through the Department of Health and Human Services (hereinafter referred to as the "State") and Biram Saidybah (hereinafter referred to as the "Recipient"). The State and the Recipient do hereby mutually agree as follows:

1. The State shall pay to the named institution the sum of 1900, which monies shall be used for the purpose of enrolling the Recipient in: Trauma and Crisis Intervention (course name); which course is being offered by: Bay Path University and which course shall commence on 05/05/2025 20 25 and terminate on August 17 20 25
2. The Recipient shall complete and achieve a passing grade in each course named in paragraph 1.
3. Should the Recipient fail to complete or achieve a passing grade in each course named in paragraphs 1, the Recipient shall pay to the State the sum set forth in paragraph 1, provided, however, that if more than one course is named in paragraph 1, the amount which shall be paid to the State shall be calculated on a pro rata basis.
4. Upon the satisfactory completion of the courses named in paragraph 1, the Recipient shall continue in the employ of the State in his/her current position (or in such other position, at equal or greater compensation, to which he/she may be assigned) for a period of six (6) months.
5. The Recipient shall work in any area of the State to which he/she may be assigned, provided that such assignment will not constitute a severe hardship to said Recipient.
6. Should the Recipient breach any of the conditions set forth in paragraphs 4 and 5, the Recipient shall pay to the State a sum equal to all monies previously paid by the State for the Recipient pursuant to the Agreement, provided, however, that the Recipient shall receive a credit for each month in which he/she is employed by the State subsequent to the date upon which the named course(s) are satisfactorily completed, the value of said credit to be calculated on a pro rata basis.
7. The Recipient shall not raise any setoff or counterclaim against the State in any action brought by the State to collect any amount due under this agreement.
8. Should any amount be found to be due the State in any action brought against the Recipient pursuant to this Agreement, the State shall, in addition to said amount, be entitled to an award of costs and a reasonable amount in "attorney" fees.

IN WITNESS WHEREOF the representatives of the State, in his/her official capacity only, and with _____ liability, and the Recipient, have hereunto set their hands on the date first above written.

RECIPIENT [Signature]
(signature) _____
(printed name) Biram Saidybah



NOTARY State of New Hampshire, County of Hillsborough
On this the 1st day of April, 2025, before me, Kimberly Vey, the undersigned officer, Notary Public,
Biram Saidybah (recipient) known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes herein contained.

In witness whereof I hereunto set my hand and official seal.
[Signature]
Notary Public/Justice of the Peace Signature

THE STATE OF NEW HAMPSHIRE
DHHS Commissioner or Designee Signature [Signature]
(printed name, title) Ann H. Landry, Assoc. Commissioner
(date) 4/1/25