



Jeffrey A. Meyers  
Commissioner

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

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January 18, 2019

His Excellency, Governor Christopher T. Sununu  
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 \$960.00 as follows:

Institution:	Southern New Hampshire University 2500 North River Road Manchester, NH 03106
Course Title(s):	Communication Skills for Human Service Professionals
Course Date(s):	Begin: 03/04/2019 End: 04/28/2019
Employee:	Yvette Martinez
Funding Source:	05-95-95-953010-56770000-066-500544
Total Cost of Course(s):	\$960.00
State Share:	\$960.00
Source of Funds:	Employee Training, 100% General

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**EXPLANATION**

This course, Communication Skills for Human Service Professionals, will benefit the employee and the Department by broadening Ms. Martinez's perspectives and expanding her communication skills. This course will provide knowledge and skills to effectively, efficiently, and compassionately communicate both orally and in writing. Clear articulation of the issues, conflict resolution, and establishing rapport with other professionals and clients in a broad variety of settings, programs, and organizations will be discussed. This will allow Ms. Martinez to communicate more readily with the diverse clients she serves every day.

Yvette Martinez has been employed by the Department of Health and Human Services for 1.5 years as a full time employee and is currently a Family Service Specialist I in the Division of Housing & Economic Stability, Bureau of Family Assistance. Yvette's duties in this position include assessing the whole-person needs of clients and referring them to other social service, employment, education, health, or vocational rehabilitation agencies to ensure their needs are met. Assisting clients in emergencies such as homelessness, loss of utilities, and lack of childcare. Clients are interviewed on the phone, in person, and in varied community locations in order to obtain pertinent information to determine and clarify eligibility for assistance. These duties entail applying complex and changing federal and state policy, in addition to the consistent and accurate application of rules and regulations. May also entail testifying at Administrative Appeal Hearings and/or court proceedings. Successful completion of the program will add to the overall strength of the Department to perform its mission to the residents of New Hampshire.

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.

This course will not be taken on State time.

Attached is a fully executed Tuition Agreement for your review.

Respectfully submitted,



Jeffrey A. Meyers  
Commissioner



THE STATE OF NEW HAMPSHIRE  
EDUCATIONAL TUITION AGREEMENT

JAN 24 2019

Human Resources

Agreement dated this 18th day of January, 2019 by and through the Department of Health and Human Services (hereinafter referred to as the "State) and Yvette Martinez (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 \$960.00, which monies shall be used for the purpose of enrolling the Recipient in: Communication Skills for Human Service Professionals (course name), which course(s) is being offered by Southern New Hampshire University and which course(s) shall commence on March 4, 2019 and terminate on April 28, 2019.
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 paragraph 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 without personal liability, and the Recipient, have hereunto set their hands on the date first above written.

RECIPIENT

(signature)

*[Handwritten signature of Yvette Martinez]*

(printed name) Yvette Martinez

NOTARY

State of New Hampshire, County of Hillsborough

On this the 18<sup>th</sup> day of January, 2019, before me, [Signature], the undersigned officer, personally appeared, Yvette Martinez (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

THE STATE OF NEW HAMPSHIRE

(signature)

[Handwritten signature of Lori Weaver]

(date)

2-1-19

(printed name, title)

Lori Weaver  
Associate Commissioner