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

Jeffrey A. Meyers
Commissioner

Marilyn G. Doe
Director

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June 21, 2017

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

For consideration on the Consent Calendar, authorize the Department of Health and Human Services, to enter into an educational tuition agreement and to pay said costs in an amount of \$4,000.00 as follows:

Institution:	The Dartmouth Institute for Health Policy and Clinical Practice 74 College Street Hanover, NH 03755
Course Title(s):	Master of Public Health (MPH)-Online
Course Date(s):	Begin: 08/01/2017 End: 07/31/2019
Employee:	Lissa Sirois
Funding Source:	05-95-95-953010-56770000-066-500544
Total Cost of Course(s):	\$16,804.00
State Share:	\$4,000.00
Source of Funds:	Employee Training, 66% General and 34% Federal

EXPLANATION

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.

The employee has been employed by the Department of Health and Human Services for almost ten years in the Division of Public Health Services. The employee recently accepted a position of Administrator for the Nutrition Services Section within the Division of Public Health Services after 9 years as a Health Promotion Advisor. The employee's daily responsibilities as Administrator of the Section include grant management for five federal grants from the United States Department of Agriculture. As well as, interpret federal and state statues, rules and policies to plan, establish, evaluate and modify operational procedures in all areas of the Section and contract agency function.

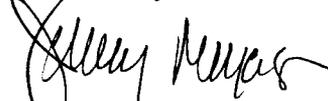
This graduate course, Masters in Public Health (MPH)-Online at the Dartmouth Institute for Health Policy and Clinical Practice focuses on the development of essential quantitative and analytic skills, foundational knowledge about how health care systems function and how they can work better. This course work will contribute to the employee's value in the position by increasing her skills, knowledge and training needed to fix health system performance through quality improvement, leadership, health policy and research. In addition, the employee will share this knowledge and expertise with the rest of the Section so that others will benefit from her participation in this course work.

This online Master of Public Health is part of the employee's broader goal of increasing knowledge in public health systems and performance. A degree in Public Health will further build her skill and expertise through advanced learning opportunities that will allow for greater leadership in the Division and the Department.

This course will not be taken on State time.

Attached is a fully executed Educational Tuition Agreement for your review.

Respectfully submitted,



Approved by: Jeffrey A. Meyers
Commissioner



THE STATE OF NEW HAMPSHIRE
EDUCATIONAL TUITION AGREEMENT

Agreement dated this 22 day of June 2017 by and through the Department of Administrative Services (hereinafter referred to as the "State) and Lissa Sirois (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 \$4,000, which monies shall be used for the purpose of enrolling the Recipient in: Masters of Public Health- Online Program (course name), which course(s) is being offered by The Dartmouth Institute For Health Policy and Clinical Practice, Gisele School of Medicine at Dartmouth and which course(s) shall commence on 08/01/ 2017 and terminate on 07/31/ 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) [Signature]
(printed name) Lissa Sirois

THE STATE OF NEW HAMPSHIRE
(signature) [Signature]
(printed name, title) _____

State of New Hampshire, County of Merrimack :

On this the 22 day of June, 2017, before me, Richelle R. Swanson, the undersigned officer, personally appeared, Lissa Sirois (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