CLINTON COUNTY 708 MENTAL HEALTH BOARD

**AGREEMENT FOR INTERAGENCY COOPERATION**

**Fiscal Year 2021-2022**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ does hereby affirm its commitment to cooperation in the planning, delivery and evaluation of comprehensive mental health, developmental and substance abuse services for the residents of Clinton County. In demonstration of this commitment, the above named agency agrees to:

1. Provide services in the most appropriate manner and at locations accessible to

residents in Clinton County.

2. Make services available to all persons in need thereof who reside in

Clinton County, without discrimination on the basis of race, color, religion,

national origin, ancestry, gender, marital status, sexual orientation, physical

condition, previous mental condition or ability to pay.

3. No qualified person shall be discriminated against in any manner prohibited by

law, or by reason of sexual orientation with respect to the privilege of

employment in the agency.

4. When programmatically feasible, establish or maintain a charge for services based

upon a consumer’s ability to pay, or if fees are prohibited by a major funder, the

agency should solicit consumer/family donations.

5. Receive for service eligible consumers referred by other agencies, subject to the

above named agency’s admission policy and procedures.

6. Transfer or refer consumers without delay to other mental health, developmental

disabilities and substance abuse agencies whenever such a transfer or referral is

clinically indicated and is in the best interest of the consumer, and when informed

consent has been obtained from the consumer or when legally prescribed

voluntary commitment procedures have been observed.

7. Make available, upon obtaining consent for release of information, necessary clinical information concerning a consumer, which was obtained by the above named agency to those responsible for that consumer’s care within another mental health, developmental disabilities or substance abuse agency.

8. When service from more than once agency is indicated, and with consumer

consent, collaborate with other agency(ies) in service planning and delivery or through consultation, and allow access to consumer in residential or day setting

when practicable and clinically indicated.

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9. Recognize the Clinton County Mental Health Board (CCMHB) as the

designated unit of local government for mental health, developmental disabilities

and substance abuse planning, coordination and priority setting.

10. Provide input into the development of CCMHB’s One and Three-Year Plan.

11. Provide those elements of comprehensive mental health, developmental

disabilities and substance abuse services, which are contained in the Agency

Program and Financial Plan, and maintain facilities for these purposes.

12. Cooperate with other mental health, developmental disabilities and substance

abuse agencies and such other agencies as appropriate in developing and

maintaining an integrated program of mental health, developmental

disabilities and substance abuse services for residents of Clinton County.

13. Develop and maintain with those agencies with whom the above named agency

has a significant amount of service interaction written working agreements

specifying at a minimum the areas of interaction between the agencies, procedures

for carrying out these interactions in an efficient and effective manner and any

contractual obligations. These agreements are to be reviewed by participating

agencies at least every three years.

14. Keep the CCMHB informed of any perceived needs for changes in the system

of available mental health, developmental disabilities and substance abuse

services and any agency plans to address those needs including applications for

new or for substantially increased revenue from other funders.

15. Collect and make available to the CCMHB and other appropriate agencies

statistical, evaluation, progress, cost and other information necessary to assure

compliance with the Agreement.

Approved this \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_\_\_

Signature:

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# Chief Executive Officer