**Board Memo**

**DATE:** 11/30/2021

**AGENDA ITEM DETAILS:**

**School/Department**

Student/Community Services

**Product Vendor or Grant Issuer**

Ramey Estep/Regroup Addendum

**Product or Grant Name**

Provision of Day Treatment Services at RISE and other Boone County Schools

**Date/Term (Beginning and End Dates/Year)**

January 2022-May, 2022

**APPLICABLE BOARD POLICY:**

10.3. 9.21

**DESCRIBE USE OF CONTRACT/PURCHASE/AGREEMENT**

The original MOU was approved on 11/11/21. Given the increased behavior and mental Health issues inour schools, we woul like to add the Day Treatment Component to the MOU.

Day Treatment Services will consist of an initial comprehensive assessment at a location convenient to the family, including the youth’s home school, RE office or telehealth. After Day Treatment Services are shown as medically necessary and needed authorizations are obtained from the youth’s insurance, a comprehensive treatment plan will be developed. Day Treatment Services will primarily include group therapy, behavior management and social skills training, and independent living skills training, but may also include individual and/or family therapy, if the need arises based on severity and complexity of individual case issues. RE Day Treatment therapists will work in collaboration with the youth’s individual educational program plan or Section 504 plan, when applicable. Day Treatment will be provided in collaboration with BCS and RE, targeting children/youth placed in a school setting where RE will be providing the mental health providers and BCS providing an educator(s).

**FUNDING FOR PURCHASES AND OTHER REQUESTS:**

**Total Cost**

$0

**Funding Source**

Parent/student medicaid and private insurance

**\*If more than one funding source, list below along with amount or percent for each source**

Click or tap here to enter text.

**IF THIS IS A GRANT, ENTER AMOUNT TO BE AWARDED:**

NA

**RECOMMENDATION:**

I recommend the board approve the Memorandum of Understanding Addendum, as presented

**CONTACT PERSON: (submitter)**

Kathleen G. Reutman