**Memorandum of Understanding (MOU)**

**2022-2023**

**Children’s Home of Northern Kentucky/CHNK Behavioral Health and BOONE COUNTY SCHOOLS**

This service agreement represents the intent of **Children’s Home of Northern Kentucky/CHNK Behavioral Health (CHNK)** and **BOONE COUNTY SCHOOLS** to extend its collaboration in providing Partial Hospitalization Services through the 2022-2023 academic year. Its purpose is to establish a commitment between provider and referral source to identify roles from each party for the provision of services to youth with behavioral health issues.

**Children’s Home of Northern Kentucky/CHNK Behavioral Health** will provide a comprehensive assessment, an individualized intervention plan, individual and family sessions, access to case management services, psychiatric medication management, an aftercare plan, and follow-up evaluations. A variety of evidence-based and promising practice interventions will be utilized and administered during the duration of the school day.

**Children’s Home of Northern Kentucky/CHNK Behavioral Health** will provide a skilled intervention team, comprised of bachelors and masters level staff persons per age group. CHNK staff will administer Safe Crisis Management as needed to deescalate or manage behaviors.

**Children’s Home of Northern Kentucky/CHNK Behavioral Health**,a licensed Behavioral Health Services Organization, will be able to bill Medicaid and other insurance providers for approved services. This will allow for services to continue at no charge to the schools. If time is requested by BOONE COUNTY SCHOOLS beyond what the insurance company is willing to authorize, payment will be discussed between CHNK and BOONE COUNTY SCHOOLS and agreed upon prior to the service being rendered.

As part of the aftercare planning, the youth and families will have access additional community-based services, such as intensive outpatient, targeted case management, psychiatry, group therapy and residential treatment. The aftercare plan will be communicated to the home school, and administered in collaboration with them, but within the bounds of HIPAA.

**BOONE COUNTY SCHOOLS** agrees, where it deems appropriate and beneficial, to present Partial Hospitalization as an option to parents and/or students. With parent/student consent, BOONE COUNTY SCHOOLS will refer students to CHNK to determine each student’s eligibility for Partial Hospitalization services. Students may also be referred from outside partners of CHNK.

Consistent with the requirements of Kentucky law, BOONE COUNTY SCHOOLS agrees to convene meetings to review parent/student requests for home instruction to facilitate students’ receipt of Partial Hospitalization services. Additionally, BOONE COUNTY SCHOOLS agrees to provide home instruction to their students as required by state regulations. Alternatively, the school may develop an alternative plan to provide education to the student outside of treatment hours that is consistent with their procedures and in accordance with state law.

Either party can cancel or make written request to amend the agreement with a 30 days’ notice.

The signatures below confirm the partnership in the provision of Outpatient Services as outlined above.

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Signature Date

BOONE COUNTY SCHOOLS

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Signature Date Children’s Home of Northern Kentucky/CHNK Behavioral Health