



Memorandum of Understanding

Rivendell Behavioral Services of Kentucky, and Allen County Public School District

This agreement is designated to improve collaboration between Rivendell and Allen County School District with the goal of increased efficiency while supporting individuals in need of behavioral health services. Parties are of this understanding agree to work together in the most efficient, professional, and supportive manner to serve the students of the Allen County School District.

To accomplish the above both parties agree:

- Individuals should be treated in the least restrictive, but most appropriate level of care given their individual condition.
- Individual client/student personally identifiable information will be maintained in a confidential manner in accordance with HIPAA.
- Each agency agrees to comply with all state and federal regulations that govern the services provided by their agency and/or may affect the relationship between the two.

Rivendell Behavioral Health Services will agree to provide:

- Partial Hospitalization services to those students who meet the criteria of the program.
- Programming includes individual therapy, group therapy, medication management, case management.
- Patients will receive four hours of intense group therapy each day. They will also visit with a medical provider on a weekly basis.
- The program will run from 8:30 -12:30 Monday – Friday each week.
- Meal will be provided for breakfast and lunch before and after programming.

Allen County School District agrees to provide:

- Transportation to and from the partial hospitalization program each day.
- Students to remain enrolled within the school district as virtual students.

This service agreement is entered by and between Rivendell Behavioral Health Services and Allen County school district, is made effective on 18th day of November 2024.

The period of service shall be for one year effective the date of this agreement. Options for extensions of this service agreement will be made mutually by both Rivendell Behavioral Health and Allen County School District prior to the end date of the agreement.

This agreement may be modified in writing at any time by the parties by mutual agreement.



The parties to this Agreement understand they are responsible for their own actions or inactions and have acknowledged by signing this agreement that each party is responsible and will hold the other party harmless for liability for personal injury, property damage, or other liability arising out of the acts or omissions of any employee of the respective party concerning the provisions asserted in this contract.

This Agreement will go into effect as of the date signed by both parties. Either party may terminate this MOU without cause or penalty, on thirty (30) days written notice to the other party.

Rivendell Behavioral Health Services

Allen County School District

Position

Position

Signature

Signature

Date

Date