BEACON LIGHT BEHAVIORAL HEALTH SYSTEMS
WARREN COUNTY SCHOOL DISTRICT
LETTER OF AGREEMENT

WHEREAS, Beacon Light Behavioral Health Systems in connection with Warren/Forest County Human Services provides Mental Health and Alcohol, Tobacco, and Other Drug services; and

WHEREAS, the Warren County School District provides public educational services for Warren County;

NOW THEREFORE, Beacon Light Behavioral Health Systems supports the Student Assistance Program initiative and philosophy and agrees to provide full time staff to act as the Mental Health and A.T.O.D. liaisons to the Warren County School District Student Assistance Program. Beacon Light Behavioral Health Systems will assure that they have the required Student Assistance training and group facilitator training as they become necessary and available. On-going staff development will occur through other various trainings and community resources.

Beacon Light Behavioral Health Systems further agrees that the responsibilities of these individuals as the Mental Health and A.T.O.D. liaisons to the Student Assistance teams are as follows:

1. The agency liaison will attend a minimum of two Student Assistance team meetings per month per school for the purpose of: a.) general consultation and education to the team on Mental Health and A.T.O.D. issues, b.) assisting in interpretation of the liaison's screening results on individuals, and c.) to assist in defining a plan of action in response to identified areas of concern as needed.

2. Will perform general assessments of students identified as possible referrals for mental health and other drug concerns. A Student Assistance Program Assessment is not to be confused with a clinical intake or psychiatric evaluation. The process of a full evaluation and enrolling in treatment will occur as initiated by the student and parent, with the service provider of their choosing.

3. Will co-facilitate psycho-educational groups with one staff member when a group is identified by the Student Assistance team, dependent on funding and availability of staff. Will NOT provide on-site Mental Health or A.T.O.D. treatment or therapy.

4. Will assist Student Assistance team members in coordinating formal and informal interventions with students and their families.

5. Will abide by all relevant school related confidentiality regulations when functioning as a member of the Student Assistance team.

6. Will abide by all relevant Mental Health and A.T.O.D. confidentiality regulations when functioning as a Beacon Light Behavioral Health Systems Mental Health or A.T.O.D.

program staff person for the purpose of screening and referral to community- based Mental Health or Alcohol, Tobacco, or Other Drug services.

7. Will provide accountability reports to the Warren County School District as follows:

   a. An annual report for the July 1 – June 30 school year. The annual report will be delivered to the Assistant Superintendent or district school safety administrator by July 31 of each year.

   b. A monthly report due on the 15th of the month following the month of report.

   c. The monthly and annual accountability reports will include at a minimum pertinent data regarding services to students and schools and data describing the services provided as outlined in Beacon Light Behavioral Health Systems responsibilities 1 through 5 listed in this agreement.

Beacon Light Behavioral Health Systems further agrees that the Student Assistance Program Mental Health and A.T.O.D. liaisons can be utilized for further on-site screening of individuals as to Mental Health and Alcohol, Tobacco, and Other Drug Program needs for the purpose of facilitating referrals to community-based services. Liaisons will work with individual school teams and parents to pinpoint students in need of these services. For students returning from psychiatric in-patient, Children and Youth placement, or Drug/Alcohol rehab, consultation and referral for aftercare services would be considered a Mental Health or A.T.O.D. function rather than a S.A.P. function liaison function. In order for these activities to be completed, the Warren County School District agrees to the following:

1. School District personnel are required to inform parents and obtain permission for referrals to service-providing agencies for students, including up to the age of 18. Students who are at least 14 years of age may self-refer to mental health agencies without parent contact or permission. Students of any age may self-refer to any Alcohol, Tobacco, or Other Drug program.

2. The Warren County School District will provide a private interviewing room for said activities in each of the participating S.A.P. schools, conducive to interviewing adolescents and/or family members.

3. Parent Permission must be obtained in order for liaisons to conduct a Mental Health or A.T.O.D. screening.

4. Parent Permission must be obtained in order for students to attend educational groups facilitated by liaisons.

5. A Release of Information form must be properly completed in order to enable communication between liaisons and S.A.P. team members as to the results of the screening procedure. If a signed Release of Information form is NOT obtained, specific screening results cannot be shared with the S.A.P. teams. However, the liaisons will be able to indicate whether the individual is receiving Mental Health or A.T.O.D. treatment.

6. All documentation resulting from the screening and referral process to community-based Mental Health or A.T.O.D. services will be considered Mental Health or A.T.O.D.

records. Subsequently, these records will be maintained within the Mental Health and/or A.T.O.D. programs and will be subject to their regulations regarding confidentiality.

7. Students deemed appropriate for a MH or A.T.O.D. screening will be seen by the liaison within a two-week period provided that necessary parental consents have been obtained.

8. Liaisons will provide aftercare educational services, on an individual or group basis, to students returning to school from a psychiatric in-patient, Children and Youth placement, or Drug/alcohol rehab. The number of contacts will be dependent upon the student's presenting needs. As always, Parent Permission must be obtained to participate and a Release of Information must be signed in order for liaisons to update the S.A.P. team on the student's progress.

Beacon Light Behavioral Health Systems, in connection with Warren County Human Services, and the Warren County School District further agree that:

1. Crisis and Emergency Mental Health needs are to be referred to the Warren County Human Services Emergency/Crisis system by calling 726-2100 (weekdays 8:30a – 4:30p) and 723-2800 (after hours).

2. The Warren County School District will provide the Warren County CASSP Coordinator with data regarding the Student Assistance Program as required by the Department of Health, Education, and Public Welfare.

3. Beacon Light Behavioral Health Systems and the Warren County School District will utilize the Conflict Resolution Process if problems occur between agencies.

The effective dates of the agreement are from July 1, 2006 through June 30, 2007 and will be reviewed annually. Changes can be proposed and incorporated as an amendment at any time during the year with the agreement and the signature of both parties. Individuals signing this document concur with and are willing to comply with the terms of this Letter of Agreement:

Beacon Light Behavioral Health Systems
Chief Operating Officer

F-W Human Services Director

Beacon Light Behavioral Health Systems
Program Administrator

F-W Human Services SCA Director

Warren Co. School District
S.A.P. Coordinator

F-W Human Services MH Director

Warren Co. School District
Superintendent

Warren County School District
School Board President