Memorandum of Understanding for the Crisis Outreach and Support Team Between the Lake County Sheriff's Office(LCSO), and County of Lake, dba Lake County Health Department (LCHD)

1. Purpose

The Crisis Outreach and Support Team is a collaboration between the LCSO and the LCHD. Its purpose is to establish communication with residents who have had recent contact with law enforcement related to a mental health interaction or crisis or opioid overdose (or naloxone save) and if needed, provide support and referral to community resources to stabilize their health. This MOU describes the responsibilities of each party and working procedures for coordination of team operations.

2. Term of MOU

The term of this MOU shall commence upon signature of both parties and shall continue for a period of one (1) year, unless earlier terminated as provided herein. The MOU shall automatically renew for a maximum of three (3) successive one-year terms (each a "Renewal Period") absent thirty (30) days prior written notice of nonrenewal by either party to the other.

Scope of Services

The Crisis Outreach and Support Team members will consist of a sworn law enforcement non-probationary deputy from the LCSO and a behavioral health clinician from the LCHD.

LCSO

The LCSO will provide a full-time deputy to serve as a member.

The team will use a LCSO vehicle assigned to the deputy for transportation.

The vehicle will be unmarked, equipped with a back seat cage, and be operated only by LCSO team members.

The deputy assigned to the team must have successfully completed CIT training, have a basic understanding of the Illinois Mental Health Code, recognize drugs (legal and illegal) and their effect on people, have knowledge of community services available throughout the region, and have an interest in creating with a healthy and stable environment for all Lake County residents.

LCHD

The LCHD will provide a behavioral health clinician for at least twenty (20) hours per week.

Work hours for the behavioral health clinician will vary depending on activity.

The LCSO and the LCHD will coordinate the scheduling of days for placed personnel and select dates/times that are satisfactory to both parties.

4. Definitions

- Crisis Intervention Team (CIT) Members who have successfully completed a forty (40) hour training program and received certification in crisis intervention techniques.
- Mental Health Crisis An active situation where a person's normal coping mechanisms have become overwhelmed causing that person to pose an immediate and significant risk to himself/herself or others.
- Mental Health Interaction A situation where a law enforcement officer encounters an individual with a known or suspected mental illness during the course of their official duties.
- Mental Illness (405 ILCS 5/1-129) A mental or emotional disorder that substantially impairs a person's thought, perception of reality, emotional process, judgment, behavior, or ability to cope with the ordinary demands of life, but does not include a developmental disability, dementia or Alzheimer's disease absent psychosis, a substance abuse disorder, or an abnormality manifested only by repeated criminal or otherwise anti-social conduct.

Opioid Overdose – A life-threatening reaction from the use of an opioid.

5. Policy

The primary responsibility of the Crisis Outreach and Support Team is to follow-up and coordinate services for persons who were previously involved in a crisis. The team will review Mental Health Interaction (MHI) reports and reports of non-fatal drug overdose or Naloxone reversals and determine based on agreed criteria, if the subject of the report will benefit from such services.

If the team determines that an individual will benefit from services, the team will contact the individual by phone or in person. Both the deputy and the behavioral health clinician will attend all initial meetings with any individual.

The deputy shall:

- 1. Make an introduction and state the purpose of the team and the reason for the contact.
- 2. Introduce the clinician, describe the services the clinician may provide, and ask if they wish to speak with the clinician.
- 3. Provide a calm and safe environment for all involved parties.
- 4. Provide a resource card should the person refuse services.

If services are accepted, the behavioral clinician shall:

- 1. Conduct a mental health screening or assessment.
- 2. Review available resources and benefits.
- 3. Provide information about available resources and benefits and help to link them to those services.

The parties recognize that they may encounter individuals in actual crisis. In that event, the parties will take steps to stabilize the situation and determine an immediate course of action.

5. Records

All parties will retain records for each contact on appropriate databases. These records and all records and information obtained by the team shall be considered confidential. The parties agree to comply with all federal, state, and local laws regarding the privacy or the confidentiality of patient information including, but not limited to, the Health Insurance Portability and Accountability Act ("HIPAA") (45 C.F.R. Part 160, et seq.), the Health Information Technology for Economic and Clinical Health Act ("HITECH") (42 U.S.C. §§300jj et seq.; §§17901 et seq.), the Confidentiality of Alcohol and Drug Abuse Patient Records regulations (42 C.F.R. Part 2) and the Mental Health and Developmental Disabilities Confidentiality Act (740 ILCS 110/1, et seq.).

Executed and agreed on the date(s) indicated below by an authorized representative of each of the parties to this MOU.

LAKE	COUNTY HEALTH DEPARTMENT
By:	JERRY NORDSTROM, MBA
- J.	DIRECTOR
	THE PROPERTY OF THE PARTY OF TH

Undersheriff

LAKE COUNTY SHERIFF'S OFFICE