



MEMORANDUM OF UNDERSTANDING & AGREEMENT

Aliviane, Inc. is committed to providing comprehensive substance use and other mental health disorder services for residents living in West Texas (Region 10), which includes the counties of El Paso, Brewster, Culberson, Jeff Davis, Hudspeth, and Presidio. To accomplish these goals, we must rely on community resources to provide much needed services that are beyond the scope of this organization and/or to augment the services provided by Aliviane, Inc. **This document represents a record of agreement to provide individuals with program services listed below between Aliviane, Inc. programs and the following partnering agency:**

Name of Partnering Agency/Organization/ School/Program:

El Paso County-Community Service Dept

Check Aliviane, Inc. applicable program services:

- | | | | | |
|--|--|--------------------------------|---|---|
| <input checked="" type="checkbox"/> PRIDES | <input type="checkbox"/> PRC Region 10 | <input type="checkbox"/> HMHL | <input type="checkbox"/> WCR | <input type="checkbox"/> YRRC |
| <input type="checkbox"/> PRIDES - Rural | <input type="checkbox"/> EPAPC | <input type="checkbox"/> AOPC | <input type="checkbox"/> CCC | <input checked="" type="checkbox"/> RBI |
| <input checked="" type="checkbox"/> Strengthening Families | <input type="checkbox"/> PADRE | <input type="checkbox"/> OTC | <input type="checkbox"/> Por Mi Familia | <input type="checkbox"/> RCOP-I |
| <input checked="" type="checkbox"/> IMASTAR | <input type="checkbox"/> PATH | <input type="checkbox"/> YFOPC | <input type="checkbox"/> RSS | <input type="checkbox"/> PPW |

Description of services provided by Aliviane Inc.

General Description	Specific Deliverables
PRIDES provides problem identification and referral as needed. PRIDES may provide prevention education skills utilizing Life Skills curriculum, prevention presentations and information dissemination.	PRIDES may provide referrals as necessary, information during prevention education sessions, positive alternatives, prevention presentations and scheduled events.
Strengthening Families provides problem identification and referral as needed. Strengthening Families may provide prevention education skills utilizing the Strengthening Families curriculum, prevention presentations and information dissemination.	Strengthening Families may provide referrals as necessary, information during prevention education sessions, positive alternatives, prevention presentations and scheduled events.
IMASTAR provides problem identification and referral as needed. IMASTAR may provide prevention education skills utilizing Positive Action curriculum, prevention presentations and information dissemination.	IMASTAR may provide referrals as necessary, information during prevention education sessions, positive alternatives, prevention presentations and scheduled events.
Rural Border Intervention (RBI) Provides problem identification and referrals as needed. RBI can provide indicated services to identified youth and family members. RBI can and will provide education skills using evidence-based curriculum and Case Management services can be provided for problem	RBI may provide ATOD activities, information dissemination during health fairs and scheduled events.

identification, assessment, and referral for follow up as necessary.			
<input type="checkbox"/> Referral	<input type="checkbox"/> Transportation	<input type="checkbox"/> Communication	<input type="checkbox"/> Financial Assistance
		<input type="checkbox"/> Case Management	<input checked="" type="checkbox"/> Presentations/Sessions

Description of services provided by Partnering Agency/Organization/School/Program

General Description	Specific Deliverables
Provide coordinating support for Aliviane prevention and intervention services by allowing the use of space (classrooms) for sessions and presentations and activities. This includes engaging the community and outreach.	<p>El Paso County Community Service Dept. will provide space at the Agua Dulce Center (Self Help Center) for services and <u>assist</u> with community outreach and recruitment.</p> <p>Space reserved as requested but dependent on availability for 2024.</p>

<input type="checkbox"/> Referral	<input type="checkbox"/> Transportation	<input type="checkbox"/> Communication	<input type="checkbox"/> Financial Assistance	<input type="checkbox"/> Case Management	<input type="checkbox"/> Presentations/Sessions
-----------------------------------	---	--	---	--	---

This MOUA indicates that a referral relationship exists and will abide by the Occupations Code, Title 3, Subtitle A, Chapter 102, Subchapter A, Sec. 102.001. This MOUA does not indicate any contract, liability, or endorsement between both partnering entities. Both entities will mutually provide information regarding services provided, admission and eligibility criteria, non-duplication of services, and any other information necessary for effective placement of individuals within the guidelines of client confidentiality as specified by State and Federal laws and regulations, specifically the Federal Regulations on Confidentiality of Alcohol and Substance Abuse Patient Records (Federal Register, General Provisions Title 42, Chapter 1, Part 2), Health Insurance Portability and Accountability Act (HIPAA), and any other requirements as mandated by existing protocols. The parties will comply with all applicable law, administrative orders, and any rules or regulations relating to the services provided in this MOUA.

This MOUA recognizes that referred individuals are responsible for any fees or payments if any apply. Aliviane, Inc. has no liability or responsibility for such fees or payments, unless arranged in advance, in writing, by an official of Aliviane, Inc. with authority to authorize such payment. In addition, the County of El Paso has no liability or responsibility for such fees or payments. This agreement will be in effect for one year from the date of full execution or may be terminated by either entity with thirty (30) days written notice. This MOUA may be renewed upon mutual agreement of the parties. **The parties acknowledge and agree to follow the requirements of the County of El Paso Policy and Facility/Community Room Use form approved by The County of El Paso Commissioners Court on September 28, 2015 (attached).**

Signature: _____

Name: Ricardo A. Samaniego
 Title: County Judge
 Entity: County of El Paso
 Phone: 915-546-2098
 Email: c.guzman@epcounty.com
 Date: _____

Signature: _____

Ivonne Tapia, MA, LCDC, LPC-S, ACPS
 Name: _____
 Title: Chief Executive Officer
 Entity: Aliviane, Inc.
 Phone: 915-782-4000
 Email: itapia@aliviane.org
 Date: _____