

**Call to Order**

**1 New Items:**

1.A Collaborative Management Program MOU - \$85,500 - Department of Human Services  
(167) CMP

1.B Exemption Request for Rodeo Ticket Schedule - Department of Human Services  
Luz Sandoval, Samantha McNeely, Jennifer Gribble

**2 Discussion Items:**

2.A Jessica Schart - CMP

**Adjourn**

# COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

## SFY 2024-2025

This Agreement is made between the following statutorily Mandated Partners and Non-Mandated Partners to the Collaborative Management Program, each of which may herein be referred to individually as a “Party” or collectively as the “Parties”:

### MANDATED PARTNERS

1. **KIT CARSON COUNTY DEPARTMENT OF HUMAN/SOCIAL SERVICES**, located at 252 S. 14<sup>th</sup> Street Burlington, CO 80807;
2. **THIRTEENTH JUDICIAL DISTRICT PROBATION DEPARTMENT**, located at 251 16<sup>th</sup> St., Suite 301, Burlington, CO 80807;
3. **THIRTEENTH JUDICIAL DISTRICT COURT**, located at 1650 Donelan, Suite 301 Burlington, CO 80807;
4. **KIT CARSON COUNTY HEALTH DEPARTMENT**, located at 252 S. 14<sup>th</sup> Street Burlington, CO 80807;
5. **BURLINGTON RE-6J SCHOOL DISTRICT(S)**, located at 2600 Rose Avenue Burlington, CO 80807;
6. **BETHUNE R-5 SCHOOL DISTRICT(S)**, located at 145 3<sup>rd</sup> Avenue Bethune, CO 80805;
7. **STRATTON R-4 SCHOOL DISTRICT(S)**, located at 219 Illinois Avenue Stratton, CO 80836;
8. **HI-PLAINS R-23 SCHOOL DISTRICT(S)**, located at 350 Patriot Drive Seibert, CO 80834;
9. **ARRIBA FLAGLER C-20 SCHOOL DISTRICT(S)**, located at 421 Julian Avenue Flagler, CO 80815;
10. **CENTENNIAL MENTAL HEALTH CENTER COMPREHENSIVE BEHAVIORAL HEALTH SAFETY NET PROVIDER**, located at 1291 Circle Dr., Burlington, CO 80807;
11. **BEHAVIORAL HEALTH ORGANIZATION (“BHO”) or REGIONAL ACCOUNTABLE ENTITY (“RAE”)**, called NORTHEAST HEALTH PARTNERS located at 710 11<sup>th</sup> Ave, Suite 203 Greeley, CO, 80631;

# COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

# SFY 2024-2025

12. **DIVISION OF YOUTH SERVICES (“DYS”)**, located at 700 West 84<sup>th</sup> Ave., Suite 700, Thornton, CO 80260 ;
13. **DESIGNATED MANAGED SERVICE ORGANIZATION FOR THE PROVISION OF TREATMENT SERVICES FOR ALCOHOL AND DRUG ABUSE PURSUANT TO SECTION 27-80-107, C.R.S. (“MSO”), called SIGNAL BEHAVIORAL HEALTH NETWORK** located at 6130 Greenwood Plaza Blvd., Greenwood Village, CO 80111 ;
14. **COMMUNITY DOMESTIC VIOLENCE PROGRAM PURSUANT TO 26-7.5-104 C.R.S. IF REPRESENTATION FROM SUCH PROGRAM IS AVAILABLE, called FIRST STEP RECOVERY** located at 595 14<sup>th</sup> St. Burlington, CO 80807 .

## NON-MANDATED PARTNERS

15. **EAST CENTRAL BOARD OF COOPERATIVE EDUCATIONAL SERVICES (EC BOCES)**, located at 820 2<sup>nd</sup> St., Limon, CO 80828. (Voting)
16. **PRAIRIE FAMILY CENTER**, located at 1040 Rose Ave., Burlington CO 80807. (Voting)
17. **BURLINGTON POLICE DEPARTMENT**, located at 480 15th St, Burlington, CO 80807. (Voting)
18. **KIT CARSON COUNTY SHERIFF DEPARTMENT**, located at 1650 Donelan St., Suite 103, Burlington, CO 80807. (Voting)
19. **BABY BEAR HUGS**, located at 201 S. Main St., Yuma, CO 80759 (Voting)
20. **CENTENNIAL AREA HEALTH EDUCATION CENTER (CAHEC)**, located at 2105 Clubhouse Dr suite a, Greeley, CO 80634. (Voting)
21. **13<sup>th</sup> JUDICIAL DISTRICT COLORADO YOUTH DETENTION CONTINUUM (CYDC)**, located at 411 Main St., Suite 201, Fort Morgan 80701. (Voting)

WHEREAS, Colorado Revised Statutes (C.R.S.) Section 24-1.9-102(1)(a) authorizes the county department of human services/social services to enter memorandums of understanding with specific agencies for the purpose of promoting a collaborative system of local-level interagency oversight groups and individualized service and support teams to coordinate and manage the provision of services to children and families who would benefit from integrated multi-agency services; and

# COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

## SFY 2024-2025

WHEREAS, the undersigned desire to enter into an agreement for the collaboration of services to families and children who would benefit from integrated multi-agency services; and

WHEREAS, the undersigned agencies include all of the agencies required by statute.

NOW THEREFORE, in consideration of the premises and mutual promises and covenants herein contained, and for their mutual benefit, the Parties agree as follows:

**Term of the Agreement.** This Memorandum of Understanding (MOU) shall be effective beginning July 1<sup>st</sup>, 2024 and shall expire June 30<sup>th</sup>, 2025.

**Renewal of MOU.** The Parties may renew this MOU annually, subject to mutual agreement. Each Party reserves the right to elect not to renew the MOU after the expiration of the current term. If any Party intends not to renew the MOU, it should give notice of such intent at least thirty (30) days prior to the expiration of the Agreement.

**I. Oversight Group.** The Parties agree that there is hereby created an Interagency Oversight Group (IOG) as authorized by C.R.S 24-1.9-102, that is identified locally as *Kit Carson County IOG*, whose membership shall be comprised of a local representative of each Party to this MOU. Membership requirements, the status of each Party as a voting member or advisory member, procedures for election of officers, procedures for resolving disputes, and procedures for the development of subcommittee groups can be found in the By-Laws/Procedure Guide (“By-Laws” or “Guide”) attached hereto as a labeled **Appendix A**. By signing this MOU, the Parties agree to follow and review these by-laws annually to ensure all statutory and rule mandates are met. Any changes to the by-laws are considered a revision to the MOU and shall require new submission to the State with new signatures of all mandated and non-mandated partners.

**II. Target Population.** In recognition of the goals of the Collaborative Management Program (CMP), children, youth, and families across systems are identified and served according to their contact with collaborative programs. The CMP target population consists of at-risk children and youth ages birth through twenty-one (21) years of age and their families who would benefit from a multi-system integrated service plan or multisystem approach. An Individualized Service and Support Team (ISST) includes two (2) or more system representatives that are present to assist a child/youth/family with developing an integrated service plan directed by family needs. The ISST identifies goals and facilitates collaboration and is a family-driven model for service planning. The child/youth/family members are present at and participating in the development of their plan. *Kit Carson County IOG* serves their target population(s) directly through an ISST(s) called: *ISST and Family Engagement Meetings (FEM)*.

*Kit Carson County IOG* may also serve children, youth, and families within their communities through the Collaborative Management Program by providing multi-system prevention program(s). The target population for these prevention programs consists of at-risk children and

# COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

**SFY 2024-2025**

youth ages birth through twenty-one (21) years of age and their families who would benefit from a multisystem approach. A multisystem prevention program must include two (2) or more system representatives that establish a program that facilitates collaboration and address needs not currently provided within the community. *Multi-system Prevention Programs named: MV Connect and Resource Connect*.

**III. Services.** As authorized by Section 12 CCR 2509-4-7.303.32(A), Counties may elect to participate in CMP by entering a Memorandum of Understanding (MOU) that is designed to promote a collaborative system to coordinate and manage the provision of services to children, youth, and families who would benefit from an integrated multi-system approach to service and service delivery. The Parties agree to provide the following specific services, subject to the availability of funds for which the collaborative has authority as specified below.

**Services Defined:**

- The CMP's ISST is called *ISST*. It functions as an integrated service planning model with specific policies and procedures recorded in the attached Appendix B.
- The CMP's ISST is called *FEM*. It functions as an integrated service planning model with specific policies and procedures recorded in the attached Appendix B.
- The CMP provides a prevention program through *MV Connect* prevention program. The description is attached as a labeled Appendix B. Prevention programs are mandated to meet at least one of the following: 1) multi-systemic approach; 2) multiple disciplines involved in the development or enhancement of the program; 3) multiple agencies involved in the delivery of the services; 4) program developed to reduce bifurcated services; or 5) joint approach benefiting children, youth and or families.
- The CMP provides a prevention program through *Resource Connect* prevention program. The description is attached as a labeled Appendix B. Prevention programs are mandated to meet at least one of the following: 1) multi-systemic approach; 2) multiple disciplines involved in the development or enhancement of the program; 3) multiple agencies involved in the delivery of the services; 4) program developed to reduce bifurcated services; or 5) joint approach benefiting children, youth and or families.

**IV. Authorization to Contribute Resources and Funding.** Each Party represents that it has the authority to approve the contribution of time, resources, and funding to solve problems identified by *Kit Carson County IOG* to create a seamless, collaborative system of delivering multi-agency services to children and families. The resources and funding to be contributed are identified in Section V: Funding Sources.

# COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

## SFY 2024-2025

**V. Funding Sources.** Funding identified in this MOU may be a carryover from previous funding or savings, additional funding provided to the CMP program or any funds directed towards CMP. Additional funding may become available during the term of this MOU and the Parties agree to comply with any terms, conditions and restrictions on the funding made available to them. The Parties agree to financial risk sharing where commitments to support programs exceed the remaining monies available. The fiscal agent for *Kit Carson County IOG* is Arriba- Flagler Colorado School District #20 (defaults to County Human Services/Social Service Departments) and by signing here \_\_\_\_\_ (signature of fiscal agent) agrees to assume financial risk. The financial risk defaults to the fiscal agent unless otherwise stated here N/A. For this reason, *Kit Carson County IOG* projects a conservative budget based on currently available resources.

Table of Resource Pooling SFY 2023-2024		
CMP Carry Over/Reserve Funds	\$100,000	
Party	IN-KIND	CASH
1. COUNTY DEPARTMENT OF HUMAN/SOCIAL SERVICES	\$6,500	\$0
2. JUDICIAL DISTRICT PROBATION DEPARTMENT	\$3,000	\$0
3. JUDICIAL DISTRICT COURT	\$1,000	\$0
4. HEALTH DEPARTMENT	\$20,000	\$0
5. Burlington RE-6J SCHOOL DISTRICT	\$6,000	\$0
6. Bethune R-5 SCHOOL DISTRICT	\$3,000	\$0
7. Stratton R-4 SCHOOL DISTRICT	\$4,000	\$0
8. Hi-Plains R-23 SCHOOL DISTRICT	\$3,000	\$0
9. Arriba-Flagler C-20 SCHOOL DISTRICT	\$10,000	\$0

# COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

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10. Centennial MENTAL HEALTH CENTER	\$4,000	\$0
11. Northeast Health Partners BEHAVIORAL HEALTH ORGANIZATION ("BHO") or REGIONAL ACCOUNTABLE ENTITY ("RAE")	\$3,000	\$0
12. DIVISION OF YOUTH SERVICES ("DYS")	\$1,500	\$0
13. Signal Behavioral Health DESIGNATED MANAGED SERVICE ORGANISATION FOR THE PROVISION OF TREATMENT SERVICES FOR ALCOHOL AND DRUG ABUSE PURSUANT TO SECTION 27-80-107, C.R.S. ("MSO")	\$1,500	\$0
14. First Step Recovery COMMUNITY DOMESTIC ABUSE PROGRAM PURSUANT TO 26-7.5-104, C.R.S. ("DVP")	\$1,000	\$0
15. East Central Board of Cooperative Education (EC BOCES). NON-MANDATED	\$ 2,000	\$0
16. Prairie Family Center NON-MANDATED	\$10,000	\$0
17. Burlington Police Department NON-MANDATED	\$2,000	\$0
18. Kit Carson County Sheriff's Department NON-MANDATED	\$1,500	\$0
19. Baby Bear Hugs NON-MANDATED	\$1,500	\$0
20. Centennial Area Health Education Center (CAHEC) NON-MANDATED	\$2,000	\$0
21. 13 <sup>th</sup> Judicial District Colorado Youth Detention Continuum (CYDC) NON-MANDATED	\$2,000	\$0
<b>TOTALS</b>	<b>\$85,500</b>	<b>\$0</b>

**Approximate total contribution = \$185,500**

### VI. Reinvestment of Funds Saved.

*Kit Carson County IOG* has established a procedure to allow funds received by the CDHS, and allocated pursuant to CRS 24-1.9-104, to be reinvested by the Parties to provide appropriate services to children and families who would benefit from multi-agency services has been approved by the head or director of each Party, as documented in the By-Laws/Guide at *Appendix A, Section 2*.

## COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

**SFY 2024-2025**

The Parties agree by signing this MOU that the *Kit Carson County IOG* will review the CMP budget regularly to ensure that CMP funds are being used to serve children, youth and families that are involved in multiple systems or at risk of involvement in multiple systems. This includes funds being used to serve children, youth and families who are part of an ISST, CMP prevention program or as a mechanism to increase collaboration among Parties.

**VII. Collaborative Management Processes.** Pursuant to section 24-1.9-102(2)(e), C.R.S., *Kit Carson County IOG* has established a collaborative management process addressing risk sharing, resource pooling, performance expectations, outcome monitoring, and staff training. This management process shall be utilized by the ISSTs and CMP Prevention Programs when providing services to children and families serviced by the parties to this MOU, designed to reduce duplication and fragmentation of services, increase the quality, appropriateness, and effectiveness of services delivered to families, and encourage cost sharing among services providers. All of which can be found in the By-laws/Procedure Guide attached as *Appendix A and C*. **By signing this MOU, the Parties agree to follow and review these by-laws annually to ensure all statutory and rule mandates are met.**

### **VIII. Collaborative Management Program Elements.**

Pursuant to section 24-1.9-102(2)(e), the parties agree to implement collaborative management processes (VII) in order to:

- A. Reduce duplication and eliminate fragmentation of services provided to children, youth and families who would benefit from integrated multi-agency services. The Parties will reduce duplication and fragmentation of services by: holding ISSTs which include all systems involved or potentially involved with the family and sharing each system's goal with the family to determine how to reduce duplication and fragmentation and create an integrated plan for the family. This will also include sharing of funds. Through prevention programs, ensure children, youth, and families are connected to services with no wrong door.
- B. Increase the quality, appropriateness, and effectiveness of services delivered to children and families who would benefit from multi-agency services, to achieve better outcomes; the Parties will increase the quality, appropriateness, and effectiveness of services delivered through: continuous quality improvement through review of general trends, resource utilization, and surveys completed in the schools, other data collected through the KCC IOG, ISSTs, and prevention programming. KCC IOG will also engage and assist with securing funding for services and programming.
- C. Encourage cost sharing among service providers. The Parties will encourage cost sharing through: addressing funding needs and issues at ISSTs, prevention programming, and IOG meetings as well as collaboration on grants to serve the needs of Kit Carson County.



## COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

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### IX. Process Measures.

Please select all the process measures that the CMP site will attempt to achieve. Each CMP site must select at least three (3).

- X IOG meeting attendance (all partners signing MOU attending 75% of the time at 75% of scheduled meetings);
- X Family agency or member participation on the IOG as a voting member;
- X Seventy-five (75%) percent of the agencies contribute resources at a service level, either in-kind or actual funds;
- X Use of Evidence Based or Evidence Informed practices;
- X Process of Continuous Quality Improvement used by the IOG;
- X Evidence of cost-sharing
- X *Cost acquired by organizations within the MOU to serve a child, youth, and/or family when the items are tangible will be logged into the data information system.*

### X. Data.

The Parties agree to use either the State-provided Efforts to Outcomes (ETO) database and/or the Comprehensive Child Welfare Information System (CCWIS)/Trails for data collection for CMP-served clients. ETO shall be used for non-child welfare children, youth, and families to track participation. Trails or CCWIS databases shall be used for all Child Welfare CMP-served children, youth, and families.

The Parties agree by signing this MOU that the attestation statement shall be completed and the Parties shall comply with [Operational Memo OM-DCP-2024-0001](#). The CMP site is responsible for ensuring there is no duplication of clients entered into ETO and/or Trails. Duplication is defined as a child, youth, or family that is counted twice for the same ISST meeting or prevention program and recorded in one (1) or more CMP data system(s). A child, youth or family may be counted for multiple service episodes supported by several multi-system partnerships.

An outcome must be determined and documented for each client supported by an Individualized Service and Support Team (ISST). The CMP State Steering Committee establishes the outcomes and measurements for each CMP site to choose from.

**XI. Confidentiality Compliance.** The Parties agree that State and Federal law concerning confidentiality shall be followed by the Parties and *Kit Carson County IOG*. Any records used or developed by *Kit Carson County IOG*, its members, a listed ISST, or a listed Prevention Program that relate to a particular person are to be kept confidential and may not be released to any other person or agency, except as provided by law. The Parties have developed a release of information that addresses the confidentiality needs of all Parties attached as an [Appendix D](#).

# COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

## SFY 2024-2025

**XII. Termination of MOU.** The Parties acknowledge that withdrawal from this MOU of any Mandated Party shall result in the automatic termination of this Agreement and termination of the collaborative system of delivery of services developed hereunder. The withdrawing Party shall assist the other Parties to achieve an orderly dissolution of the collaborative system with as little disruption as possible in the delivery of services provided to children and families who would benefit from multi-agency services.

- A. Withdrawal/Termination.** Any Party may withdraw from this Agreement at any time by providing 30 days written notice to all other Parties.
- B. For Loss of Funds.** Any Party may withdraw from this Agreement or modify the level of its commitment of services and resources hereunder, in the event of loss or reduction of resources from its funding source identified herein. Any Party withdrawing due to loss of funds will provide notice of withdrawal in writing within 30 days.
- C. Distribution of Funds.** The Parties have established a collaborative management process addressing the distribution of funds if the MOU is terminated as further described in the by-laws/procedure guide. *Appendix A, Section 1, Subsection 13.*

IN WITNESS WHEREOF, the Parties hereto, through their authorized representatives have executed this Memorandum of Understanding and commit to all elements described above, effective for the dates written above. (Please note scanned and electronic signatures, with an attached digital receipt, are acceptable).

### Interagency Oversight Group Members

#### MANDATED PARTNERS

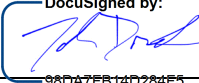
##### 1. COUNTY DEPARTMENT OF HUMAN/SOCIAL SERVICES

Name and Title: Jennifer Gribble, Director of Human Services  
 Address: 252 S 14<sup>th</sup> Street  
 City/State/Zip: Burlington, CO 80807  
 Phone: 719-346-7158 Email: [jennifer.gribble@state.co.us](mailto:jennifer.gribble@state.co.us)

Signature:

##### 2. JUDICIAL DISTRICT PROBATION DEPARTMENT

Name and Title: John Draxler, Chief Probation Officer  
 Agency: 13<sup>th</sup> Judicial District Probation Department  
 Address: 110 North Riverview Road  
 City/State/Zip: Sterling CO 80751  
 Phone: 970-332-5213 Email: [John.Draxler@judicial.state.co.us](mailto:John.Draxler@judicial.state.co.us)

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6/11/2024

# COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

## SFY 2024-2025

### 3. JUDICIAL DISTRICT COURTS

Name and Title: Carl McGuire III; Chief Judge  
 Agency: 13th Judicial District Court  
 Address: 110 N. Riverview Rd  
 City/State/Zip: Sterling CO 80751  
 Phone: 970-522-6565 Email: [carl.mcguire@judicial.state.co.us](mailto:carl.mcguire@judicial.state.co.us)

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### 4. HEALTH DEPARTMENT

Name and Title: Valorie Boyd, Director of Public Health  
 Agency: Kit Carson County Public Health Department  
 Address: 252 S 14<sup>th</sup> Street  
 City/State/Zip: Burlington, CO 80807  
 Contact Person: Valorie Boyd  
 Phone: 719-346-7158 Email: [Valerie.Boyd@kitcarsoncounty.org](mailto:Valerie.Boyd@kitcarsoncounty.org)

Signature: DocuSigned by:  
  
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### 5. BURLINGTON SCHOOL DISTRICT

Name and Title: Shane Walkinshaw, Superintendent  
 Agency: Burlington RE-6J School District  
 Address: 2600 Rose Avenue  
 City/State/Zip: Burlington, CO 80807  
 Contact Person: Shane Walkinshaw  
 Phone: 719-346-5440 Email: [swalkinshaw@burlingtonk12.org](mailto:swalkinshaw@burlingtonk12.org)


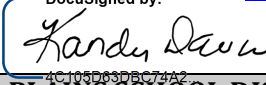
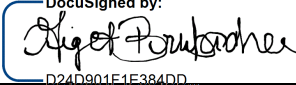
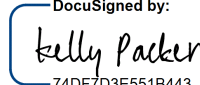
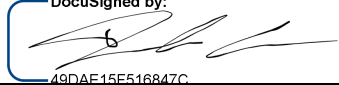
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### 6. BETHUNE SCHOOL DISTRICT

Name and Title: John Haddan, Superintendent/Principal  
 Agency: Bethune R-5 School District  
 Address: 145 3<sup>rd</sup> Avenue  
 City/State/Zip: Burlington, CO 80807  
 Contact Person: John Haddan  
 Phone: 719-346-7513 Email: [jhaddan@bethuneschool.com](mailto:jhaddan@bethuneschool.com)

# COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

## SFY 2024-2025

Signature:  <small>DocuSigned by: 05A808E7467C4A1...</small>	6/11/2024
<b>7. STRATTON SCHOOL DISTRICT</b>	
Name and Title: Kandy Davis, Superintendent Agency: Stratton R-4 School District Address: 219 Illinois Avenue City/State/Zip: Stratton, Co 80836 Contact Person: Kandy Davis Phone: 719-348-5369 Email: <a href="mailto:kdavis@strattonschoools.org">kdavis@strattonschoools.org</a>	
Signature:  <small>DocuSigned by: 4C105D63D6C73A2</small>	6/11/2024
<b>8. HI-PLAINS SCHOOL DISTRICT</b>	
Name and Title: Giget Brubacher Agency: Hi-Plains R-23 School District Address: 350 Patriot Drive City/State/Zip: Seibert, CO 80834 Contact Person: Giget Brubacher Phone: 970-664-2636 Email: <a href="mailto:gigetb@hp-patriots.com">gigetb@hp-patriots.com</a>	
Signature:  <small>DocuSigned by: D24D901E1E384DD</small>	6/17/2024
<b>9. ARRIBA-FLAGLER SCHOOL DISTRICT</b>	
Name and Title: Kelly Packer, Superintendent Agency: Arriba-Flagler C-20 School District Address: 421 Julian Avenue City/State/Zip: Flagler, CO 80815 Contact Person: Kelly Packer Phone: 719-765-4684 Email: <a href="mailto:kpacker@af20.net">kpacker@af20.net</a>	
Signature:  <small>DocuSigned by: 74DF7D3E551B443...</small>	6/11/2024
<b>10. COMPREHENSIVE SAFETY NET BEHAVIORAL HEALTH PROVIDER</b>	
Name and Title: Dante Gonzales, Chief Executive Officer Agency: Centennial Mental Health Center Address: 211 W. Main St. City/State/Zip: Sterling, CO 80751 Contact Person: Phone: 719-346-8183 Email: <a href="mailto:danteg@CentennialMHC.org">danteg@CentennialMHC.org</a> Dante.Gonzales@centennialmhc.org	
Signature:  <small>DocuSigned by: 49DAE15E516847C</small>	6/18/2024
<b>11. REGIONAL ACCOUNTABILITY ENTITY/BEHAVIORAL HEALTH ORGANIZATION</b>	

# COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

## SFY 2024-2025

Name and Title: Kari Snelson, Executive Director

Agency: Northeast Health Partners

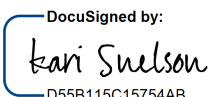
Address: 1300 North 17th Ave

City/State/Zip: Greeley, CO 80631

Contact Person: Raina Ali

Phone: (970) 397-2732

Email: [Kari@nhpllc.org](mailto:Kari@nhpllc.org), [raina@nhpllc.org](mailto:raina@nhpllc.org)

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6/11/2024

### 12. DIVISION OF YOUTH SERVICES

Name and Title: Maria Campos, Regional Director

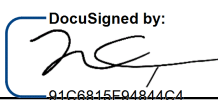
Agency: Northeast Region Office, DYS

Address: 700 West 84<sup>th</sup> Avenue Suite 700

City/State/Zip: Thornton, CO 80260

Contact Person: Richard Knight

Phone: 720-584-1649 Email: [Maria.Campos@state.co.us](mailto:Maria.Campos@state.co.us), [Richard.Knight@state.co.us](mailto:Richard.Knight@state.co.us)

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6/17/2024

### 13. MANAGED SERVICE ORGANIZATION

Name and Title: Daniel Darting, CEO

Agency: Signal Behavioral Health

Address: 6130 Greenwood Plaza Blvd., Suite #150

City/State/Zip: Greenwood Village, CO 80111

Contact Person:

Phone: (720) 263-4857

Email: [ddarting@signalbhn.org](mailto:ddarting@signalbhn.org)

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6/13/2024

### 14. DOMESTIC ABUSE PROGRAM


Name and Title: Sue Campbell, CAC III, Registered Psychotherapist

Agency: First Step Recovery

Address: 595 14<sup>th</sup> Street

City/State/Zip: Burlington, CO 80807

Phone: 719-346-6060 Email: [sue.firststep@gmail.com](mailto:sue.firststep@gmail.com)

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6/18/2024

### NON-MANDATED PARTNERS

### 15. EAST CENTRAL BOARD OF COOPERATIVE EDUCATIONAL SERVICES (ECBOCES)

# COLLABORATIVE MANAGEMENT MEMORANDUM OF UNDERSTANDING

## SFY 2024-2025

Name and Title: Moira Hawks, Assistant Director of Special Education  
 Agency: East Central Board of Cooperative Educational Services  
 Address: 820 2<sup>nd</sup> Street  
 City/State/Zip: Limon, CO 80828  
 Phone: 719-775-2342 Email: [Moirah@ecboces.org](mailto:Moirah@ecboces.org)

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 Signature: *Moira Hawks* 6/11/2024  
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### 16. PRAIRIE FAMILY CENTER- FAMILY EDUCATION AND RESOURCE SUPPORT

Name and Title: Deena Ziegler, Director  
 Agency: Prairie Family Center  
 Address: 1040 Rose Ave.  
 City/State/Zip: Burlington, CO 80807  
 Phone: 719-346-5398 Email: [deena@prairiefamilycenter.com](mailto:deena@prairiefamilycenter.com)

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 Signature: *Deena Ziegler* 6/15/2024  
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### 17. BURLINGTON POLICE DEPARTMENT -LAW ENFORCEMENT

Name and Title: Nate Hill, Chief of Police  
 Agency: Burlington Police Department  
 Address: 480 15th St.  
 City/State/Zip: Burlington, CO 80807  
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DocuSigned by:  
 Signature: *Chief Nate Hill* 6/11/2024  
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### 18. KIT CARSON COUNTY SHERIFF'S OFFICE - LAW ENFORCEMENT

Name and Title: Travis Belden, Kit Carson County Sheriff  
 Agency: Kit Carson County Sheriff's Office  
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 City/State/Zip: Burlington, CO 80807  
 Phone: (719) 346-8934 Email: [Travis.belden@kitcarsoncounty.org](mailto:Travis.belden@kitcarsoncounty.org)

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### 19. BABY BEAR HUGS

Name and Title: Jennifer Deam, Executive Director  
 Agency: Baby Bear Hugs  
 Contact Person: Heather Randolph  
 Address: 201 S. Main St.  
 City/State/Zip: Yuma, CO 80759  
 Phone: (719) 346-8934 Email: [jennifer.deam@babybearhugs.org](mailto:jennifer.deam@babybearhugs.org),  
[heather.randolph@babybearhugs.org](mailto:heather.randolph@babybearhugs.org)

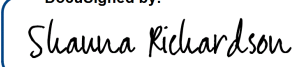
DocuSigned by:  
 Signature: *Jennifer Deam* 6/11/2024  
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**COLLABORATIVE MANAGEMENT  
MEMORANDUM OF UNDERSTANDING**

**SFY 2024-2025**

**20. CENTENNIAL AREA HEALTH EDUCATION CENTER**

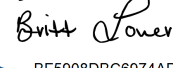
Name and Title: Shauna Richardson, Regional Health Connector – Region 5  
Agency: Centennial Area Health Education Center  
Contact Person: Shauna Richardson  
Address: 105 Clubhouse Drive, Suite A  
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Phone: (970) 330-3608 Email: [srichardson@cahec.org](mailto:srichardson@cahec.org)

Signature: 

6/13/2024

**21. 13<sup>th</sup> JUDICIAL DISTRICT COLORADO YOUTH DETENTION CONTINUUM**

Name and Title: Britt Lover, Rural Director  
Agency: 13<sup>th</sup> Judicial District CYDC  
Contact Person: Britt Lover  
Address: 411 Main St., Suite 201  
City/State/Zip: Fort Morgan, CO 80701  
Phone: (970) 580-8610 Email: [britts@cydc13.com](mailto:britts@cydc13.com)

Signature: 

6/11/2024

## **Appendix A**

### **Policy and Procedures**

#### **Kit Carson County Interagency Oversight Group**

**SFY 2024-2025**



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## **Section 1**

### **Kit Carson County Interagency Oversight Group Collaborative Management Process**

An integrated service system will include the nationally recognized core principles of a System of Care.

The core values are that the system is: child-centered and family-focused, community-based and culturally competent where individuals and families work in partnership with public and private organizations to build on the strengths of each individual.

The ten Guiding Principles are:

1. Access to a comprehensive array of services that address physical, emotional, social, and educational needs.
2. Individualized services that address the unique needs and potential of a child; guided by an individualized service plan
3. Least restrictive, most normative environment.
4. Families are full participants in planning and service delivery.
5. Services are integrated & coordinated across agencies and programs.
6. Case management ensures services are coordinated and responsive to changing needs.
7. Early identification and intervention is promoted.
8. Transitions to the adult service system are smooth.
9. Rights of children are protected and effective advocacy efforts are promoted.
10. Non-discrimination; sensitive & responsive to culture & special needs.

The Kit Carson County Interagency Oversight Group (KCCIOG) has established a collaborative management process to be utilized by individualized service and support teams. The collaborative management process addresses risk sharing, resource pooling, performance expectations, outcome monitoring, and staff training in order to do the following:

- Reduce duplication and eliminate fragmentation of services provided to children and families who would benefit from integrated multi-agency services.
- Increase the quality, appropriateness, and effectiveness of services delivered to children and families who would benefit from multi-agency services, to achieve better outcomes; and
- Encourage cost sharing among service providers

## **Collaborative Management Processes Kit Carson County Interagency Oversight Group (KCC IOG)**

### **Subsection 1 Mandatory House Bill 04-1451 Members**

- Department of Human Services – Kit Carson County Department of Human/Social Services
- 13<sup>th</sup> Judicial District Probation Department
- 13<sup>th</sup> Judicial District Court
- Public Health – Kit Carson County Health Department
- School district – Burlington RE-6J School District
- School district – Bethune R-5 School District
- School district – Stratton R-4 School District
- School district – Hi-Plains R-23 School District
- School district – Arriba-Flagler C-20 School District
- Comprehensive Behavioral Health Safety Net Provider – Centennial Mental Health Center
- Regional Care Entity – Northeast Health Partners
- Colorado Dept. of Human Services Division of Youth Services-Northeast Region
- Management Service Organization (MSO) – Signal Behavioral Health
- Local Domestic Violence Provider – First Step Recovery

### **Subsection 2. Non-Mandatory KCC IOG Members**

*All non-mandatory KCC IOG are voting partners of the KCC IOG.*

- East Central BOCES
- Prairie Family Center
- Burlington Police Department
- Kit Carson County Sheriff's Department
- Baby Bear Hugs
- Centennial Area Health Education Center
- 13 Judicial District CYDC

### **Subsection 3. Membership Requirements**

*(Requirements apply to mandatory voters, approved non-mandatory voting and non-voting advisory members)*

1. The member should have the ability and authority to represent their agency or organization that serves the needs of children and families living within Kit Carson County.
2. The member should have the authority to approve the contribution of time, resources, and/or funding to solve problems.
3. The member should have agreement to serve as the single voting representative from their agency, organization or association approved with voting privileges.
4. The member should attend and actively participate in regularly scheduled meetings 75% of the time.
5. The member should keep a commitment to problem solving and decision making through a consensus model.
6. The member should have the ability to represent the interests and needs of their agency, organization or association and the populations served, while simultaneously viewing services to families and children on a systems-level and understanding the mandates and needs of other partner agencies or organizations.

7. The member should assume personal responsibility in oversight of the project by reading reports, making recommendations and managing conflict in a professional problem-solving manner.
8. The member should assume solution focused responsibility for oversight of the financial status of the project.
9. The member should participate in both short and long-term planning and goal setting.
10. The member should provide input and recommendations.
11. Any records used or developed by the IOG or its members or by the ISST that relate to a particular person are to be kept confidential and may not be released to any other person or agency, except provided by law.
12. The member should assume responsibility to help assure the project remains mission driven.
13. The member should agree to engage in an ethical manner, and follow all pertinent local, state and federal laws.
14. Voting rights may be accorded to non-mandatory members at the discretion of the KCC IOG voting members.
15. Mandatory signers of the MOU may designate a representative by submitting a letter designating an individual or the completion of the proxy form. Designation of a representative must be completed each state fiscal year in written form.

#### **Subsection 4. Election of officers**

1. Officers of the KCCIOG shall be selected annually by a majority vote of its board of directors.
2. Members will nominate four officers to serve as the KCCIOG Board, one Chairperson, one Vice-Chairperson, one Secretary, and one Treasurer.
3. Officers may serve more than one year at the discretion of the members.
4. Vice-chairperson acts in the absence of the chairperson.
5. Yearly elections will take place at the August meeting.

#### **Subsection 5. Dispute Resolution Procedures**

Procedures for resolving disputes by a majority vote of those members authorized to vote are:

1. The dispute must be submitted in writing to the chairperson.
2. The chairperson will attempt to resolve the conflict by facilitating discussion and seeking solution through consensus agreement.
3. If consensus agreement is not achieved, the membership will vote on the issue and recommendations will be made to the department head of each participating agency.

#### **Subsection 6. Subcommittees**

1. Subcommittees will be formed at the discretion of the KCCIOG.
2. Subcommittee members will designate one member as the subcommittee lead member.
3. Subcommittees are formed to review information, make recommendations, draft policies, work on projects or as directed by the members.
4. Subcommittees report back to the KCCIOG.
5. Coordinator will attend each subcommittee scheduled meetings, record minutes, write reports or recommendations made by the subcommittee to be distributed to the whole membership.
6. Members serve voluntarily on subcommittees.

#### **Subsection 7. Risk Sharing (legal and financial)**

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Updated April 2024

Legal and financial risk is fully assumed by the partner agency supplying the service. Those partners or contracted agencies, who receive yearly funding from KCCIOG to provide services, must show in their request for funding that they have the legal and financial means prior to funds being disbursed. At a minimum of two times per fiscal year, KCCIOG will receive an expenditure report compiled by the fiscal agent. The report will include current reserves, expenditures, spending trends, and fiscal sustainability plan.

The KCCIOG has agreed on the process for addressing risk sharing to include understanding and identifying risks, exercising due diligence, encouraging open and honest communication, welcoming requests for support, proposing recommendations, determining appropriate actions (as feasible or required by statute), and monitoring outcomes. Each mandated party to this MOU agrees to maintain insurance or self-insurance throughout the term of this MOU and to assume the risk as determined by their agency for their services and the employees under their supervision. Further, each mandated party agrees to be solely responsible for liability incurred as a result of participation in this MOU based on its own actions or the actions of its employees or other persons under its supervision. No party shall be responsible for liability incurred based on the actions of another party or of persons employed or supervised by another party. All contracted service providers are required annually to sign a state-approved contract that outlines an indemnity agreement, confidentiality commitments, a HIPAA compliance addendum, cyber-security and immigration compliance requirements.

#### **Subsection 8. Fiscal Agent for the KCCIOG**

The Arriba-Flagler Colorado School District #20 shall be the fiscal agent for the KCCIOG. The Arriba-Flagler CSD #20 will maintain fiscal records and insurance in accordance with State and Federal financial regulations. Fiscal reports and budget updates will be submitted to the KCCIOG on a minimum of a quarterly basis.

#### **Subsection 9. Resource Pooling**

Mandated and non-mandated partners of KCCIOG agree to, at a minimum, provide their time at monthly IOG meetings to discuss policy, procedure, best practice, protocol, and community need in Kit Carson County. Additional in-kind sources, such as administrative costs and staff time at collaborative meetings, will be documented in the yearly MOU. At various points, special events and requests may solicit financial funding from KCCIOG or individual members. These situations will be documented in the end of the year report to the Colorado Department of Human Services and full expenditure reports to KCCIOG.

#### **Subsection 10. Performance Expectations**

In 2016, the KCCIOG was formed to address the need for a collaborative approach within the county. There was a common mission to establish collaborative leadership to promote accountable, efficient, cost effective, and coordinated systems to increase the health and well-being of children, youth, and families in Kit Carson County. KCCIOG strives to support programming that focuses on the whole person, recognizes success and note compliance, and provides integrated, family centered services for all age groups. Mandated and non-mandated partners of KCCIOG, as well as agency staff on subcommittees, agree to uphold the mission of KCCIOG and perform functions, tasks and responsibilities associated with the collaboration in accordance with the mission.

#### **Subsection 11. Outcome Monitoring**

6 of 10

Updated April 2024

Outcome monitoring for programming that is supported by KCCIOG either financially or with CMP staff will be reported to the KCCIOG Coordinator at least yearly for analysis and will be presented at an IOG meeting and included in the year-end report. Data will be gathered from existing collections sources that are dependent upon the agency, such as TRAILS for Human Services. Data will be shared with any partner or community member requesting to view information, once all identifying information has been removed that would compromise confidentiality.

**Subsection 12. Staff Training**

Each member agency is responsible to screen for qualifications, provide training and required certification of their staff. Each member agency is encouraged to ensure on-going staff development. The member agencies in the KCCIOG may identify community training opportunities and needs and may provide community training on various topics that the member agencies choose. Trainings will open to all member agency staff and to the general population when appropriate. Presenters will be professionals trained in the field of study or topic being taught.

**Subsection 13. Distribution of Funds upon IOG dissolution**

In the event a mandatory member as defined by statute, 24-1.9-102(1)(a) should resign from the KCCIOG the voting members of the KCCIOG will schedule and meet within 60 (sixty) days of date of the receipt of the resignation notice. The meeting will create a plan for the distribution of any remaining KCCIOG funds within the parameters of the legislation. The meeting must consist of a quorum of voting members of the KCCIOG and approved by a majority present at the meeting. During the 60 day period any funding responsibilities will continue to be paid.

**Subsection 14. Voting Policy**

The KCCIOG will vote on motions presented and that have been seconded. A quorum is required for voting at a meeting and motion will pass with a majority of the voting members present at the meeting voting in the affirmative. Electronic voting by email may be utilized and the motion considered passed when a majority of ALL voting members of the KCCIOG vote in the affirmative.

**Subsection 15. Meeting Frequency Schedule**

The KCCIOG shall schedule a minimum of four (4) meetings per state fiscal year.

## **Section 2**

### **Reinvestment of Moneys Saved**

#### **Subsection 1 Proposed Use of Funds**

In the 2023-2024 State Fiscal Year, the KCC IOG will plan to use the HB1451 monies to fund the following priorities:

- 1) ISST Coordinator: The Coordinator provides the leadership and administration of the Collaborative Management Program in Kit Carson County to assure that the mission, intent, objectives and purposes of HB1451 are effectively carried out. The Coordinator provides outreach to families in Kit Carson County involved in multi-systems in order to build family partnerships and increase family feedback for the purpose of informing the development of a comprehensive system of care. The Coordinator acts as the developer of family involvement and the liaison between families and the KCC IOG. Please see job description in the IOG Handbook.
- 2) Track outcomes and participate in data collection, reporting, and evaluation efforts.
- 3) Family Flex Funds: These funds are used to meet financial needs of multi-system youth and their families. Funding requests must support the family's integrated plan. Approval process is outlined in the Individualized Services and Support Team (ISST) Handbook.
- 4) Funding is also available to support other community outreach activities, training, marketing and staff education (CMP partner agencies) that is deemed appropriate and helpful to meet 1451 goals.
- 5) The IOG or executive committee may identify other needs throughout the year that meet the following guidelines. Priorities are subject to change if the IOG deems appropriate:
  - a. Reduce duplication and eliminate fragmentation of services provided to children or families who would benefit from integrated multi-agency services;
  - b. Increase the quality, appropriateness, and effectiveness of services delivered to children or families who would benefit from integrated multi-agency services to achieve better outcomes for these children and families;
  - c. Encourage cost-sharing among service providers.

#### **Subsection 2. Savings Realized**

- 1) Any moneys resulting from waivers granted by the federal government and any state general fund savings realized as a result of the implementation of services provided to children, youth and families who would benefit from multi-agency services will not automatically be reinvested by parties to KCCIOG. The Director of the Department of Human Services shall determine the portion of the child welfare block grant saving will be retained by the department or be reinvested into KCCIOG funds to provide appropriate services to children, youth and families who would benefit from integrated multi-agency services.

#### **Subsection 3. Incentive Fund Reinvestment**

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Updated April 2024

Incentive funds received by the DHS, and allocated pursuant to CRS 24-1.9-104, will be reinvested by KCCIOG to provide appropriate services to children and families who would benefit from multi-agency services and to support staffing. Requests for funding will be accepted throughout the year for the Incentive Program. Expenditures will be reviewed by the KCC IOG coordinator and when meeting guidelines of \$500 or more, be reviewed by the Finance Committee.

Requests for funding may be used to finance positions, support existing programs and/or services that will benefit children, youth and families. Requests for funding must follow the established format and include thorough explanation of:

- The target population and unmet needs within the community;
- How funding a position, support existing program and/or service will reduce duplication and eliminate fragmentation of services provided to children and families who would benefit from integrated multi-agency services, increase the quality, appropriateness, and effectiveness of services delivered to children and families who would benefit from integrated multi-agency services to achieve better outcomes for these children and families, and encourage cost-sharing among service providers;
- Identified barriers to implementation and plans for sustainability without incentive funds;
- Identified goals, objectives and measurements that will show when a goal/objective has been met;
- Budgetary expenses, fiscal agent and in-kind/matching.

Requests for funding will be in writing and submitted to the KCC IOG Coordinator for review and a recommendation. Recommendations will be submitted to the Finance Committee or KCCIOG at the next meeting for final review and approval. Funding requests that meet criteria may be denied, approved in full, or partially funded by a majority vote of the KCCIOG, once a quorum has been met. Requests for funding may not be considered if funds are not available.



### **Section 3**

#### **Integrated Service and Support Teams (ISST)**

##### **Subsection 1. Two Generation Approach to serving families**

Two generation approaches focus on creating opportunities for and addressing needs of both vulnerable children and their parents together. Research shows that a child's developmental path is influenced by their relationships with the important people in their lives. The two generation approach seeks to address the issues by applying developing a multi-agency service plan to both children and parents.

##### **Subsection 2. Integrated Service and Support Teams**

The ISST Meeting serves to address youth and families as a Tier III service, requiring more intensive involvement. The ISST meets when there is a referral from the ISST for services. The ISST will create an integrated multiple agency service plan that address the needs of both the parents and child. Difficulties may include, but are not limited to, significant mental health/behavioral health concerns, at risk for school failure and/or truancy, or trauma. The ISST may also meet to address youth who are struggling with completing their conditions of Probation or when a youth is returning home to the community after completing their commitment to the Department of Youth Corrections. The goal is to develop a Two Generation Approach transition plan with youth and parents who would benefit from services from multiple agencies in the integrated service plan. The ISST may consist of members from the school district, Department of Human Services, mental health, Probation (as applicable), and Juvenile Service Planning representative (as applicable).

See Appendix B for further description of ISST.

### **Section 4**

#### **Authorization to Contribute Resources and Funding**

Each Party represents that it has the authority to approve the contribution of time, resources, and funding to solve problems identified in order to create a seamless, collaborative system of delivering multi-agency services to children and families. The resources and funding to be contributed are identified in the yearly Memorandum of Understanding (MOU) and include in-kind and cash pooling.

### **Section 5**

#### **Funding Sources**

Funding identified in the yearly Memorandum of Understanding (MOU) can be a carryover from incentive funding or savings, additional funding provided to KCC IOG or any funds directed towards KCC IOG. The Parties agree to financial risk sharing, with commitments to support programs with earned incentive funds and carryover when monies are available. For this reason, KCC IOG projects a conservative yearly budget based on available resources.

## **Appendix B**

### **Kit Carson County Interagency Oversight Group Service Descriptions**

**SFY 2024-2025**

## **Individualized Services and Support Team (ISST) Structure and Principles**

An ISST is a mandated component of the Collaborative Management Program (CMP) legislation via House Bill 04-1451. The Collaborative Management Program is proposed in Kit Carson County for SFY 2023-2024. A key mission of CMP is to coordinate, manage, and integrate the provision of services and supports to children and families across systems.

ISST's are established through the Kit Carson County Interagency Oversight Group (KCC IOG).

### **ISST Goals**

An ISST is a collaboration charged with coordinating and managing the provision of services to children and families who are involved in or would benefit from integrated multi-agency services. ISST meetings are held once monthly to identify needed resources, services, and supports and coordinate, as appropriate, the delivery of services provided by multiple agencies. ISST goals include:

- providing support and/or services to youth who are involved in or who would benefit from integrated multi-agency services
- increasing the quality, appropriateness, and effectiveness of services
- achieving better outcomes for youth who need services
- encouraging cost sharing among service providers
- reducing duplication and fragmentation of services among service providers
- connecting families to services and supports in a 2Gen approach aimed at holistically serving families, increasing positive outcomes, nurturing self-sufficiency, and fostering resiliency based on strengths and assets

### **ISST Members**

ISST members may include representatives from CMP partner agencies: Human/Social Services departments, 13th Judicial District Probation department, Division of Youth Corrections, County Public Health departments, Centennial Mental Health Center, Family Advocacy Organizations, and local school districts. ISST representatives should have the level of authority necessary to participate in all aspects of the ISST including the commitment of resources via flexible funding requests. Additionally, ISST goals are furthered when members have strong collaborative problem-solving skills and are willing to think outside the box to explore and identify new ways of doing business across agencies.

Other community members (e.g., youth/family natural support systems, providers of services, faith-based organizations) may participate in ISST meetings as requested.

### **ISST Member Commitments**

ISST meetings are scheduled by working with the family and partner agencies to set a time. Members are expected to make a good faith effort to attend and actively participate in meetings. The KCC IOG appreciates the dedication and commitment of ISST members in helping to achieve its collaborative goals. If a member has three consecutive absences and has not communicated with the ISST facilitator to notify them of these absences, that member may be asked to nominate an alternate representative from their agency with the time, interest, and skill sets necessary to participate on the ISST.

### **ISST Member Confidentiality Agreements**

The quality and integrity of the ISST process relies heavily on youth and families being assured that the information they share with the ISST will remain confidential. Each ISST member is asked to sign a confidentiality agreement when they attend their first meeting. Confidentiality parameters are also reviewed verbally at each meeting.

Agencies and organization participating in any of the ISSTs included under the KCCCMP agree to share information and data as it relates to the children, youth, and families served by this program. Data collected from these programs is used to analyze these programs against the performance measures, contact referrals, and arrange and coordinate necessary services and resources.

### **ISST Member Decision-Making Processes**

The ISST operates on a consensus-based decision making model. For these purposes, consensus is defined as:

- Although an agreement may not be unanimous, the proposal is acceptable to the majority of ISST members present at the meeting and all can agree to support it.

Consensus works best when all members agree to share relevant information, interests and concerns, seek further information if it isn't immediately available, remain focused on the needs of youth and families, problem-solve within the framework of the 10 guiding principles, and seek to integrate and balance multiple, differing perspectives. Because the ISST is committed to consensus-based decision making, it is important to keep discussions open until proposals have been developed that are acceptable to the majority of those present and that all agree to support. Members who are not present at meetings agree to support the consensus decisions made by those who are present. No single member of the ISST holds blocking or veto power. If the group is unable to reach consensus then the matter will be noted in the meeting minutes as unresolved, and no further actions will be taken. The matter may be brought up at future meetings in order for the group to continue to strive toward consensus.

At times, ISST requests will be emailed to group members between regularly scheduled meetings. Often these requests are for flex funds and are time-sensitive. If a decision on flex funds needs to be made prior to the next regularly scheduled meeting, ISST members will be asked to reply to the request within 24 hours or within the timeframe specified in the email. ISST members who do not respond to the email within the requested deadline are assumed to be in support of the consensus agreement made by those who did; therefore, such agreements will not be open for questioning in future.

### **Youth and Family Eligibility Criteria for ISST Services**

Referred youth should meet the following criteria (families of referred youth are also eligible for services if a need for those services is identified in the plan and supports a positive outcome for an eligible youth):

- require supports or services in areas that limit independence and functioning and which may impede the ability to participate in daily activities at home, school or in the community
- are between the ages of birth to 21 (have not yet had 21<sup>st</sup> birthday)
- are involved in or would benefit from integrated multi-agency services
- are willing to participate in the process on a voluntary basis
- have exhausted all other possible sources of funding first (if asking ISST for financial assistance via flex funds)

### **Making a Referral to ISST**

Referrals will be made to the ISST Coordinator either through the paper form or electronic referral form. The ISST Coordinator will assist the referring party/agency in completing Referral and Release of Information forms. The ISST Coordinator will contact the family to gather additional information regarding the family and work to determine what systems would be helpful to be present at the meeting. Depending on the family and the current systems involved, the ISST Coordinator will schedule an ISST and invite the necessary partners. The goal of the ISST is to reduce bifurcated services by having multiple agencies involved in the development of the plan and the delivery of services.

For referrals coming from KCC DHS, KCC DHS will share information from a child welfare referral with the reporting party redacted. Information from Trails will be shared when it is appropriate for the referral and would assist in families in getting connected to services or service delivery.

### **ISST Flexible Funding Policies and Procedures**

Appendix B: KCC Service Descriptions SFY 2024-2025

Flexible funding is money that is available to help clients and families achieve their goals and become self-sufficient by removing barriers in their lives. Below are policies and procedures for the approval of flex funds to be used for families:

ISST members can approve up to \$500 in flex funds per family per year. The following questions may be used by the ISST to guide deliberations:

- What are the needs of the family?
- Does the need for flex funds align with the family mission and goals?
- Is the need addressed under a goal in the family plan?
- How has the family met this need in the past?
- Have the youth/family's strengths been explored in relation to the identified need?
- Has the team determined the amount of time/money necessary to meet this need?
- Has the team discussed the desired result of meeting this need?
- Has the team discussed a plan for transitioning to family/community supports?
- Will the team regularly review the use of flex funds and transition plans?
- Have all the family, community, system and provider resources been explored?
- Have funds for this need been sought from every other known available source of funding (i.e. are flex funds the last option available to the family)?
- Do the team members agree with the need for flex funds?
- Does the request fit with the goals of the IOG to reduce duplication and eliminate fragmentation of services, and increase the quality, appropriateness, or effectiveness of services?

1. If a need is identified that costs more than \$500, the request will be brought to the Finance Committee for discussion and approval.
2. If approved, the ISST Coordinator OR an ISST member AND the County Fiscal Agent must sign off on the flex funds request.
3. The County Fiscal Agent will be provided with receipt(s) documenting the expenditure of flex funds as soon as possible after the flex funds have been expended.
4. The County Fiscal Agent will monitor expenditures and provide the ISST and KCC IOG with regular updates on expenditures and fund balances.

## **FAMILY ENGAGEMENT MEETINGS (FEM)**

Facilitated Family Engagement Meetings are run by the Department of Human Services (DHS). These meetings are provided to families that have an open child welfare case with DHS, and focus on identifying and working through safety concerns as adequately as possible.

Facilitated Family Engagement Meetings are led by a trained neutral facilitator who is responsible for encouraging open and transparent dialogue. These meetings take on a group decision making approach that allows each family to have a voice to speak on what dynamics and details are struggled with most. This allows for the appropriate promotion of safety and stability. Each meeting ensures that:

1. Clear reasons for child welfare involvement are explained.
2. Case goals are defined and line up with child safety.
3. "Next Steps" are developed to keep the case moving towards the case goals.

FEMs are to include any providers and/or resources who are currently involved with the child, youth, or family or any potential providers who could be beneficial to the family for success. Those present at the FEM then work together to identify strengths, barriers, and next steps for all those involved to help the family succeed. Often agencies involved in FEMs include DHS staff, mental health providers, and legal representatives. Goals include: connecting the children, youth, and family to appropriate resources; reducing bifurcated services; providing services which are culturally appropriate; reducing barriers and building upon strengths; and having all involved informed and working towards common goals.

## **MCKINNEY-VENTO PREVENTION PROGRAM (MV Connect)**

### **WHO**

- The MV Connect will target any students and families identified as eligible for McKinney-Vento through the school system in Kit Carson County.
- Agencies who will be extensively involved in the implementation of this prevention program include any school in Kit Carson County (specifically Burlington School District for year 1), KCC CMP, KCC Family Support Partner, KCC Human Services, Prairie Family Center, and Centennial BOCES.

### **WHAT**

- Purpose: To ensure all youth and families that qualify under McKinney-Vento are connected to resources in the community that can make them successful and avoid issues with attendance, grades, and remaining in the home.
- Throughout the past 2 years of CMP, there has been an increase of children, youth, and families who qualify for McKinney-Vento. However, many of the organizations in the county are unaware of the breadth of resources that are available to these families. Often families who interact with CMP are already identified due to issues with attendance, mental health, or grades. By contacting families early who qualify for McKinney-Vento, we hope to catch these families upstream prior to involvement with other systems.
- Through involvement in this program, we hope to prevent involvement in child welfare referrals as well as meetings for attendance issues.
- The development of this program came through a recognition of the IOG of an increase in families who qualify for McKinney-Vento as well as a recognized unawareness of the resources available to these families, a lack of outreach to families who qualify, and lack of coordination between agencies. Critical in the development was the Burlington School District, Centennial BOCES, CMP Coordinator, and KCC Dept. of Human Services.

### **WHERE**

Appendix B: KCC Service Descriptions SFY 2024-2025

- This program will be housed under the Kit Carson County Collaborative Management Program.
- The school districts will provide KCC CMP with a list of eligible families at the beginning of the school year. As students are identified during the year, the schools will notify KCC CMP.
- KCC CMP will reach out to each family and do a brief screener to determine what needs the family presents with.
  - Depending on the level of needs, this program will connect the families to the appropriate resources in the community or schedule an ISST to bring multiple agencies to the table to address the barriers and strengths of the family.
    - If an ISST is scheduled, it will follow our normal ISST protocol and will likely occur at the school.
    - Contact will be made over phone initially with the family. Should an in-person meeting be needed with the family and the CMP coordinator or the KCC Family Support Partner, a meeting will occur at a location most appropriate for the family. This could include school or community location.

## **WHEN**

- These interventions will take place throughout the whole year as families are identified. This program will be more intensive at the beginning of the school year.
- Updates will be given on this program at every IOG meeting which occurs on a bi-monthly basis. Barriers and successes will occur at every meeting with a more intensive look at the program during the February and April IOG meetings which will include a greater data and evaluation piece.

## **WHY**

- Kit Carson County CMP decided to focus on this prevention program due to an increase in McKinney-Vento eligible students during the past 2 years. The McKinney-Vento representative with Centennial BOCES presented at the IOG meeting in December to provide additional information to the IOG and resources.
- The Burlington School District who has about half the students in Kit Carson County has agreed to provide the McKinney-Vento list to CMP as this is the first year for this prevention program. We hope to work about any challenges or barriers this year and expand to other districts.

## **HOW**

- CMP will be the main contact for reaching out to families who qualify for McKinney-Vento. Either the CMP Coordinator or KCC FSP will connect the families with needed resources in the community. CMP will keep data on the number of families served and agencies connected to.
- This was identified as a needed prevention program as there has been an increase in families who qualify for McKinney-Vento. These families were only identified after DHS referrals or attendance referrals. Our hope is to catch families before referrals are made to more intensive programs.
- We will know when this program is successful when families we engage with are successfully connected to resources and CMP does not receive referrals for families through other avenue such as DHS or attendance issues at school.
- Funding for this program will come for CMP funding and TANF funding. There will be no additional cost of this program as current staff will be used. CMP and FSP will utilize funding available through Centennial BOCES McKinney-Vento, TANF, and CMP to get needs met.
- Multiple systems will be involved as connections to community resources such as housing, Centennial BOCES, family resource center, and KCC DHS will be important.
- Several of the families who have been identified through the CMP processes were already engaged in some resources but not the full extent. One resource in the community did not know that a family qualified and what they were now eligible for. Often if a family's status changed midyear, the resources

they were already working with were unaware and did not know the additional resources they could receive. While all of our school districts have McKinney-Vento liaisons, many are busy with other duties and cannot spend the time needed to really connect these families with resources in order to help them succeed where needed.

- When working with a youth or family who may qualify for McKinney-Vento, there is also a different thought process to think about such as safety, where to do laundry, hygiene, etc. By having this prevention program, we will have someone who thinks about these “non-traditional” needs to assist families.
- Agencies and organization participating in MKV included under the KCCCMP agree to share information and data as it relates to the children, youth, and families served by this program. Data collected from these programs is used to analyze these programs against the performance measures, contact referrals, and arrange and coordinate necessary services and resources.

## **RESOURCE CONNECT (RC) PREVENTION PROGRAM**

### **WHO**

- The RC program will serve any family with children under the age of 21 in the home.
- This program will connect people to a variety of programs in the community such as food delivery, ABA services, mentoring services, and mental health services. Due to this, some of the agencies which will be Prairie Family Center, Colorado Autism Consultants, CASA Advocates for Children, KCC DHS, Workforce Center, Baby Bear Hugs, and Kit Carson County school districts.

### **WHAT**

- The purpose of this program is to connect people in the community with resources that they may be unaware of and help remove barriers to access.
- Often times in our community, people do not know the available resources in our community, what is offered at agencies, and how to connect with them. During the year, CMP gets several referrals just asking for us to reach out to a family and connect them. No ISST is needed, but there would be a potential if the family is unable to connect with the needed resources. This will allow KCC CMP to help a family make a direct connection to resources.
- Often times under this RC program, we will be connecting families to resources in which KCC CMP and its partners have been vital bringing into the community based upon identified gaps. This include the food delivery program, mentoring program, ABA services, and additional mental health services.
- All partners in the KCC IOG were involved in the development of this program and the services that are also involved. Prairie Family Center, Colorado Autism Consultants, Advocates for Children, KCC DHS, Workforce Center, and Kit Carson County school districts were main partners.
- The CMP coordinator has at least bi-monthly meetings with Colorado Autism Consultants, Advocates for Children, Prairie Family Center, and KCC DHS regarding how the program is going and how to make better and meet the community needs.

### **WHERE**

- This program is housed under the KCC CMP with the CMP Coordinator being the main lead.
- Referrals for this program will come under the normal process where a community professional or person will submit a paper or electronic referral form and mark the appropriate program.
  - For referrals coming from KCC DHS, KCC DHS will share information from a child welfare referral in regards to contact information of the caregiver. CMP will get a release signed by the parent for DHS to provide additional information. If the referral is shared, the reporting party will be redacted. Information from Trails will be shared when it is appropriate for the referral and would assist in families in getting connected to services or service delivery with release.



- Agencies and organization participating in any RCs included under the KCCCMP agree to share information and data as it relates to the children, youth, and families served by this program. Data collected from these programs is used to analyze these programs against the performance measures, contact referrals, and arrange and coordinate necessary services and resources.
- Meetings will happen over the phone or in a location convenient for the family in the community.

## **WHEN**

- This program will run all year long and take referrals through the year. Families will be contacted shortly after their referral is received.
- This program will be discussed at every bi-monthly KCC IOG meeting. Participants, resources connected to, barriers, and successes will be reviewed.

## **WHY**

- This services through the KCC CMP has already been occurring as the community recognizes KCC CMP as a place to help direct to resources. By creating this program, it will be more standardized and allow KCC CMP to show the amount of families we actually serve.

## **HOW**

- KCC CMP will be the main contact for this program with the Family Support Partner assisting in reaching out to families and making connections. As the CMP Coordinator will be reviewing the referrals and reaching out to families, this will allow KCC CMP to gather all the necessary data and follow trends.
- This program was created as it was already identified as a service that was provided informally and the KCC IOG desired to receive counts for all the children and families which KCC CMP serves.
- This program will be successful when KCC CMP serves any families and is able to help them make connections to needed resources.
- This program is funded through the KCC IOG in terms of the coordinator salary, KCC DHS TANF funding for the Family Support Partner, grants from Northeast Health Partners to run such programs as the food delivery program and the mentoring program, and other agencies general funding.
- This program is multisystemic as it involves multiple systems throughout the referral process such as schools, KCC DHS, and several community agencies.
- Through the creation of this program, KCC CMP will be able to help direct and assist families in locating and utilizing resources. We will be able to notify the family or other agencies of the resources we are connecting them to and reduce multiple referrals and barriers.

## **Appendix C**

### **Trainings and Outreach**

#### **SFY 2024-2025**

### **KCC IOG Training**

The KCC IOG would like to expand the knowledge and training to organizations within the IOG and those outside of the IOG to better serve children, youth, and their families. The KCC CMP Coordinator will have agencies present on local resources at least 50% of IOG meetings. These will be similar to System 101 forums designed to educate our partners (human services, judicial, schools, human services, behavioral health), about the various systems. Agency Rules, expectations, roles, flexibility and challenges will be discussed. Questions from those in other systems that do not understand how or why systems operate the way they do will be encouraged. Systems 101 may include: Humans Services 101, School Systems in Eastern Colorado 101, Behavioral Health 101, Probation/SB 94 101, and Judicial 101. In the SFY 2023-2024, Kit Carson County IOG seeks to provide trauma informed training to IOG member agencies and other community agencies as desired.

### **KCC IOG OUTREACH**

As KCC CMP continues to expand their reach, KCC CMP and KCC IOG will develop a plan to outreach to the community to provide greater understanding of the services which KCC CMP can provide. This will include things like flyers, articles, sponsoring an award for family advocate and/or family, and hosting general trainings.

**Appendix D**

**Informed Consent to Release Form**

**Authorizing Release of**

**Confidential Information**

**Kit Carson County**  
**Interagency Oversight Group**

**SFY 2024-2025**



# Authorization — Consent to Release Information

**This is a(n)** Choose One: Date of Prior Request (if applicable):

## Agency Requesting Information:

Name of Agency		Name of Agency Representative	
Address of Agency			
City	State <span style="border: 1px solid black; padding: 0 5px;">Choose One</span>	Zip	Email
Phone 1	Phone 2	Fax	Date

## Youth Information

Full Name <span style="border: 1px solid black; padding: 0 5px;">Last Name</span>		First Name	MI	Date of Birth
Mailing Address				
City	State <span style="border: 1px solid black; padding: 0 5px;">Choose One</span>	Zip	Phone	
Type of Identifier: <input type="checkbox"/> SSN <input type="checkbox"/> School ID <input type="checkbox"/> DL <input type="checkbox"/> State ID <input type="checkbox"/> Child Welfare Case # <input type="checkbox"/> Case Report # <input type="checkbox"/> JD#			Identifier:	

## Name of Consenter/Person Authorizing Consent

Name		
Mailing Address		
City	State <span style="border: 1px solid black; padding: 0 5px;">Choose One</span>	Zip
Email	Phone 1	Phone 2
Type of Identifier: <span style="border: 1px solid black; padding: 0 5px;">(Choose One)</span>	Identifiers:	Role: <span style="border: 1px solid black; padding: 0 5px;">(Choose One)</span>

## Authorizes:

- |   |  |  |                                      |                                       |
|---|--|--|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> CDE              | <input type="checkbox"/> District Court  | <input type="checkbox"/> Municipal Probation | <input type="checkbox"/> Attorney/PD | <input type="checkbox"/> GAL          |
| <input type="checkbox"/> CDCW             | <input type="checkbox"/> LEA             | <input type="checkbox"/> District Probation  | <input type="checkbox"/> JAC         | <input type="checkbox"/> NYC          |
| <input type="checkbox"/> OBH              | <input type="checkbox"/> District School | <input type="checkbox"/> Diversion           | <input type="checkbox"/> SB94        | <input type="checkbox"/> County Court |
| <input type="checkbox"/> Municipal Court  | <input type="checkbox"/> Private School  | <input type="checkbox"/> DA                  | <input type="checkbox"/> County DHS  |                                       |
| <input type="checkbox"/> Service Provider |  | <input type="checkbox"/> Other               |                                      |                                       |

## To Release Information To:

- |   |  |  |                                      |                                       |
|---|--|--|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> CDE              | <input type="checkbox"/> District Court  | <input type="checkbox"/> Municipal Probation | <input type="checkbox"/> Attorney/PD | <input type="checkbox"/> GAL          |
| <input type="checkbox"/> CDCW             | <input type="checkbox"/> LEA             | <input type="checkbox"/> District Probation  | <input type="checkbox"/> JAC         | <input type="checkbox"/> NYC          |
| <input type="checkbox"/> OBH              | <input type="checkbox"/> District School | <input type="checkbox"/> Diversion           | <input type="checkbox"/> SB94        | <input type="checkbox"/> County Court |
| <input type="checkbox"/> Municipal Court  | <input type="checkbox"/> Private School  | <input type="checkbox"/> DA                  | <input type="checkbox"/> County DHS  |                                       |
| <input type="checkbox"/> Service Provider |  | <input type="checkbox"/> Other               |                                      |                                       |

## To Receive Information From:

- |   |  |  |                                      |                                       |
|---|--|--|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> CDE              | <input type="checkbox"/> District Court  | <input type="checkbox"/> Municipal Probation | <input type="checkbox"/> Attorney/PD | <input type="checkbox"/> GAL          |
| <input type="checkbox"/> CDCW             | <input type="checkbox"/> LEA             | <input type="checkbox"/> District Probation  | <input type="checkbox"/> JAC         | <input type="checkbox"/> NYC          |
| <input type="checkbox"/> OBH              | <input type="checkbox"/> District School | <input type="checkbox"/> Diversion           | <input type="checkbox"/> SB94        | <input type="checkbox"/> County Court |
| <input type="checkbox"/> Municipal Court  | <input type="checkbox"/> Private School  | <input type="checkbox"/> DA                  | <input type="checkbox"/> County DHS  |                                       |
| <input type="checkbox"/> Service Provider |  | <input type="checkbox"/> Other               |                                      |                                       |

**For the Purpose of:** (Choose One)

## Type of Records/Information Requested:

<b>Education</b> <input type="checkbox"/> School Grades <input type="checkbox"/> School Attendance Records <input type="checkbox"/> School Behavior Reports <input type="checkbox"/> IEP's/504	<b>Substance Abuse</b> <input type="checkbox"/> Treatment History <input type="checkbox"/> Treatment Screens <input type="checkbox"/> Evaluations	<b>Medical</b> <input type="checkbox"/> Current Prescription <input type="checkbox"/> Medical History <input type="checkbox"/> Immunizations <input type="checkbox"/> HIV/AIDS	<b>Mental Health</b> <input type="checkbox"/> MH Intake <input type="checkbox"/> MH Screen <input type="checkbox"/> MH Treatment History <input type="checkbox"/> Diagnosis	<b>Court</b> <input type="checkbox"/> Probation History <input type="checkbox"/> Programs <input type="checkbox"/> Pre-Trial Services <input type="checkbox"/> Other Court Records	<b>Other Records</b> <input type="checkbox"/> Human Service Records <input type="checkbox"/> Child Welfare History <input type="checkbox"/> Other: <b>Please Specify</b>
--	--	--	---	--	--

**Date Range of Youth Records:** From: To:

**Date Range of Authorization/Consent:** From: To:

**How is this information being released?** 
☐ Fax ☐ Email ☐ Telephone ☐ In Person ☐ Other **Please Specify**

Signature of person authorizing consent: Type or print name:	Date:
Signature of youth: Type or print name:	Date:

- ☐ By my signature, I consent to the release of information contained on this form for use by the requesting agency(ies), and I understand that any agency or individual using the confidential information or records obtained will take all necessary steps to protect the confidentiality of the above named youth's identity. I acknowledge that I have been informed of my rights to refuse to sign this form, and any conditions related to my consent or refusal, and that I am entitled to receive a copy of the signed form.
- ☐ Consenter declined release of information. \_\_\_\_\_ [staff initial]  
[Copy Provided to Client]

**Confidentiality Notice for Electronic Transmittal:**

This release, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential information. If you have received this communication in error, please immediately notify the sender. In addition, if you have received this in error, do not review, distribute, or copy the document or attachments.

**Consent Expiration:**

This authorization - consent expires on/no later than DATE, or at end of event, completion of treatment, whichever is less. Length of time consent is valid can be specific by program or provider, or set by length of program/ referral, period of time that records are utilized for specified consent purpose. See specific agency authorization and consent rules for agency specific time frames for record retention.

**Authorization/Consent Period:**

This release shall remain in effect until such time as I provide the (AGENCY) with a written or oral notification to revoke. Exceptions do not cover data that was previously released for specific treatment or referral.

**Copies of Authorization/Consent Valid:**

A copy, photocopy, or facsimile transmission of this release will have the same authority as the original. **Colorado Office of Information Technology Policy Colorado Open Records Act (sections 24-72-201, et. seq.), the laws governing state archives and public records management (sections 24-80-101, et. seq.) or local statute. Governmental entities that agree to conduct a transaction by electronic means may refuse to conduct other transactions by electronic means (see Section 24-71.3-105).**

**Interdepartmental data protocol:**

In Interdepartmental data protocol means an interoperable, cross-departmental data management system and file sharing procedure that permits the merging of unit records for the purposes of policy analysis and determination of program effectiveness. The Interdepartmental data protocol at a minimum shall include protocols and procedures to be used by state agencies in data processing, including but not limited to collecting, storing, manipulating, sharing, retrieving, and releasing data related to the named juvenile. See Colorado Juvenile Risk Assessment (CJRA) C.R.S. § 19-2-922 and Attorney General Model Acts for data exchange- C.R.S. § 19-1-304(2)(a)(XV)

**Non-consensual Release of Confidential Treatment Data:**

Under the State of Colorado and Federal Confidentiality Regulations, no information about the juvenile's participation in treatment can be disclosed without written consent except in the case of medical emergency, child abuse or Court Order.

**Disclosure Notice to Receiving Agencies:**

**THIS INFORMATION HAS BEEN DISCLOSED TO YOU FROM RECORDS WHOSE CONFIDENTIALITY IS PROTECTED BY FEDERAL LAW. FEDERAL LAW PROHIBITS YOU FROM MAKING FURTHER DISCLOSURE OF THIS INFORMATION WITHOUT THE SPECIFIC WRITTEN CONSENT OF THE PERSON TO WHOM IT PERTAINS. IF APPLICABLE, A MINIMUM NECESSARY DETERMINATION HAS BEEN APPLIED TO THIS RELEASE/ AUTHORIZATION. IF YOU HAVE QUESTIONS CONCERNING THIS RELEASE PLEASE CALL (PROVIDER AGENCY PHONE #) OR PLEASE SEND INFORMATION TO: (PROVIDER AGENCY NAME AND ADDRESS AND FAX)**

**Revocation Limitation:**

This release/authorization may be revoked at any time by written notice to AGENCY, except to the extent that action has already been taken to comply with it. Without such revocation, this release/ authorization will expire on (specific date) or if left blank, one year from the date signed, or if included as part of a Court Order or condition of probation, upon the terms specified. Consenter may revoke consent in writing by contacting the releasing agency. This revocation will be recorded in the AGENCY record. HIPAA requires written revocation of an authorization to release HIPAA information (45 CFR § 164.508(b)(5)). Both Part 2 and HIPAA allow the program to make a disclosure for services already rendered in reliance on a signed consent or authorization form. See 42 CFR § 2.31(a)(8) and 45 CFR § 164.508.

**Treatment Data Disclosure Limitation:**

Under the State of Colorado and Federal Confidentiality Regulations, no information about NAMED child's participation in treatment can be disclosed without written consent except in the case of medical emergency, child abuse or Court Order. A substance abuse treatment program is defined as an individual or entity that provides alcohol or drug abuse diagnosis, treatment or referral. In this document, the term "program" includes both individual substance abuse providers and substance abuse provider organizations. See also Colorado Mental Health Treatment records <http://www.leg.state.co.us> (SRS Art 25(Health, Title 1 Administration, Part 8 and Colorado Medical Records Access Laws <http://www.leg.state.co.us/>

**Written/ Verbal Authorization/ Consent:**

This consent must be in writing to be valid, unless consent is for Substance Abuse Treatment – when verbal consent is acceptable. Verbal consent may also be accepted in specific emergency situations. See agency specific policies for more details.

**Electronic Transmission of Personal Information:**

It is a violation of law to electronically transmit any form which contains "Personal information" (a Colorado resident's first name or first initial and last name in combination with any one or more of the following data elements that relate to the resident - Social Security Number (SSN); Driver's license number or identification card number; Account number or credit or debit card number, in combination with any required security code, access code, or password that would permit access to a resident's financial account) when the data elements are not encrypted, redacted, or secured by any other method rendering the name or the element unreadable or unusable. See C.R.S.6-1-716, 1(a)

Preparer's Initials

Consenter's Initials

## **Appendix E**

### **Representative Proxy Form**

**SFY 2024-2025**

Proxy Designation for the  
Kit Carson County Interagency Oversight Group  
HB 04-1451 Collaborative Management Program  
July 1, 2024 to June 30, 2025

I, \_\_\_\_\_, the undersigned Director (the "Director")  
(please print name)

hereby designate \_\_\_\_\_ (the "Proxy") as my proxy with  
(please print name)

respect to my mandatory position on Kit Carson County Interagency Oversight Group  
HB 04-1451 Collaborative Management Program for Kit Carson County. The Proxy may  
not reassign this proxy.

This designation of proxy shall be effective for the monthly meetings, yearly  
strategic planning meeting and subcommittees for the Kit Carson County Interagency  
Oversight Group HB 04-1451 Collaborative Management Program for Kit Carson County  
for the State Fiscal Year 2023-2024, July 1, 2024 to June 30, 2025.

The Proxy shall have full power, as my substitute, to represent our agency and  
vote on all issues and motions that are properly presented at the meeting(s) for which  
this designation of proxy is effective. The Proxy may be revoked in writing by the  
Director at their discretion anytime during the specified fiscal year.

Date Signed: \_\_\_\_\_

Director Signature: \_\_\_\_\_

Name of the Member Agency: \_\_\_\_\_