**Inter-county Agreement**

      County Human Services is aware of and a party to the placement of      (DOB:     ), a resident of      County at the following location in       County at      .

In the event that said resident is detained in       County under the emergency detention provisions of Chapter 51 or 55, it is the responsibility of       County to immediately notify       County of the circumstances of the detention and to include the following information: date, time, actions leading to the detention, detention facility, probable cause hearing date and time if known, the clinical staff person responsible for the care and treatment of the resident at the detention facility, and a contact person for       County. It is the responsibility of       County to work collaboratively with the       County Corporation Counsel, the treatment team of the detention facility and       County staff to implement any court orders occurring as a result of the probable cause or final hearing proceedings.       County assumes financial responsibility for mental health services/staff costs associated with the detention and any ancillary services (such as transportation services) provided as a result of the detention itself, and as ordered by the court from the first day of the detention on.      County further agrees to have the cost of said services billed directly to it.

This agreement shall remain in effect until replaced by another agreement which is negotiated by representatives of both counties.

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(authorized board representative)

Placing County: \_\_\_\_      County\_\_\_\_\_\_

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

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(authorized board representative- receiving county)

Receiving County: \_\_\_      County\_\_\_\_\_\_

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