

# CHILD-SPECIFIC CONTRACT

(Residential Treatment Care - TX)

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# CHILD-SPECIFIC AGREEMENT

This Agreement ("Agreement") is entered into as of the <u>17<sup>th</sup></u> day of <u>October</u> 2019, between Arrow Child and Family Ministries ("Arrow") and <u>THE COLLIN COUNTY JUVENILE PROBATION DEPARTMENT</u>, ACTING THROUGH THE COLLIN COUNTY JUVENILE BOARD ("Payor").

## SERVICE DESCRIPTION:

Arrow shall provide the following services for A. J. G. DOB: 04/24/2004 ("Client"):

Arrow will provide at the request of the Payor, the following services to the identified client. These services will\include but are not limited to:

# <UPDATE THIS LIST OF SERVICES BASED ON AGREED UPON SERIVCES FOR THIS CLIENT>

- Cooperation with the Payor to effect post-placement supervision and support to the identified foster parents, including visits to the home a minimum of once per month
- At least monthly written progress reports
- Referral and oversight of the rapy services for the family and individually
- Participation in all meetings with the Payor, foster parent, Client and any other person(s) designated by any of the parties, by telephone or webinar
- · Regular review of the case progress with all parties through treatment and service planning
- · Ensuring that Client's medical, health, psychiatric and dental needs are addressed
- Assisting Payor and Client in developing effective aftercare plans
- Supporting Client in academic setting and assisting in preparation for further education asdesired
- · Social and vocational support and assistance
- · Psychiatric referrals and consultations to ensure quality care

## Performance of Services:

Arrow shall commence services on <u>October 17</u>, 20<u>19</u> and shall complete Services on or before <u>April 16</u>, 20<u>20</u>, ("Expected Completion Date"). The agreement may only be extended thereafter by mutual agreement, unless terminated earlier by operation of and in accordance with this Agreement.

#### **Reporting Protocol:**

Arrow will report directly to (name) <u>H. LYNN HADNOT</u>, in connection with the performance of the duties under this Agreement and shall fulfill any other duties reasonably requested by Payor and agreed to by the Arrow. Arrow shall keep Payor informed about the status of responsibilities and duties as outlined in the agreement.

# Termination:

If Client does not remain in placement with the identified foster parent, this contract will be cancelled on the day established for Client's discharge between the Department and Arrow. Either party hereto may terminate this agreement for any reason upon submission of written notice to the other party at least 30 days prior to the effective date of cancellation.

#### WRITTEN REPORTS:

Arrow will provide the following written materials as required by Arrow, Federal and/or State regulatory

guidelines:

- Initial Service Plans and Reviews
- Serious Incident Reports
- Medical and Psychiatric documentation

# FEE ARRANGEMENT:

Payor shall pay Arrow for the services as follows:

A daily rate of \$\_277.37\_\_\_\_\_ per day.

#### FEE SCHEDULE:

Billing statements will be submitted to the Payor by Arrow on a monthly basis. Statements will be submitted to the Payor no later than 10 days following the conclusion of the month in which services were provided. Payment for services will be paid by Payor to Arrow within <u>30 days</u> of receipt of the billing statement.

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EXECUTED on October 18, 2019
Arrow
Name of IndividualKellee Walker Scott Lundy
Signature
TitleVice President of LX Programs-Foster Care, Adoption, CSTPresident/CEO
Date 10/18/2019
Payor
Name of Entity COLLIN COUNTY JUVENILE PROBATION
Name of Individual H. LYNN HATMOT
Signature
Title
Date 0070BER 17, 2019

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