MEMORANDUM OF UNDERSTANDING

WHEREAS, The Discharge Planning Committee for the Wisconsin Balance of State Continuum of Care (WIBOSCOC) and Click or tap here to enter text. Hospital located at Click or tap here to enter text. of cityClick or tap here to enter text., State Click or tap here to enter text. Zip-code Click or tap here to enter text. have come together to implement a pilot program that encompasses connections to prevent discharging individuals into homelessness.

WHEREAS, by policy and procedures implemented, developed and maintained through collaboration of a Medical Facility, and/or, Mental Health Facility, and/or, Corrections/Jail and/or, Foster Care. Incorporated will be a review of policies and procedures as well as provide information and ideas to foster these initiatives.

WHEREAS, through discussions with Click or tap here to enter text. of Click or tap here to enter text. hospital and The Discharge Planning Committee formed by the WIBOSCOC and the partnering agencies have agreed to move forward with a pilot program setting forth a step by step plan to be able to discharge individuals into a shelter, emergency shelter with provided levels of care as deemed by medical provider so that no person shall be discharged into homelessness from above mentioned facilities.

NOW, THEREFORE, a pledge to maintain in the community ongoing efforts and adjustments for quality and seamless transition of services to patients/consumers/clients in connection to being housed in the most appropriate setting with the necessary and prescribed level of care that is the least restrictive and allows freedom of choice and access to necessary services.

NOW THEREFORE, we agree the seamless transition will include entry into the coordinated entry system.

NOW THEREFORE, the agreed upon goal that encompasses individuals served be allowed access to services and support to safe, emergency shelter and shelter facilities with medical needs being assessed and implemented as deemed by medical professional and qualified staff for care.

NOW THEREFORE, we agree to remain actively involved in monthly Discharge Planning Committee meetings to collaborate and update our policies and procedures and examine the best possible outcome to the level of care of clients/patients/consumers and access to shelter be it emergency, transitional or temporary shelter facilities.

NAME:

AGENCY: & COUNTY SERVED

SIGNATURE: