Step 3
Planning and Coordinating

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After dedicating time to building partnerships and collecting resource information from your asset mapping session, your CIT for Youth steering committee is now equipped with the knowledge and tools needed to begin planning and coordinating CIT for Youth.

**What Is Planning and Coordinating?**
Planning and coordinating is figuring out the “nuts and bolts” of CIT for Youth implementation and developing written guidance on how the CIT for Youth program will play out in the real world. The purpose of planning and coordinating is to answer the “who, what, where, when and how” and to address any challenges to CIT for Youth implementation.

**Why Is Planning and Coordinating Important?**
Since CIT for Youth is a community program, it is important to ensure your community partners are all on the same page and understand their roles and responsibilities. Planning and coordinating allows you to work with your steering committee to determine how CIT for Youth will function and how each community partner will be involved in its implementation.

Equally important, planning and coordinating is needed to figure out where, when and how youth identified through CIT for Youth as needing mental health treatment will receive services: Who will facilitate this process? Where will youth access services and supports? When will youth be directed to mental health services and supports? How will families be involved in this process? The answers to these questions may vary depending on the mental health needs you are addressing and the youth being served. Depending on your community’s demographics, you may want to account for the needs of youth who do not have insurance or are under-insured, youth in military families, youth in rural and frontier communities or other youth with unique needs.

Fortunately, the information gathered during the asset mapping will help inform the planning and coordinating process. The information you collected and the partnerships you formed will help you address these questions and others and overcome implementation challenges.

Simply put, planning and coordinating helps prepare the CIT for Youth program for the various issues that often arise in the real world setting.

**Who Is Involved in Planning and Coordinating?**
The steering committee will be responsible for the planning and coordinating of CIT for Youth. A CIT for Youth coordinator should be designated by the steering committee to take the lead in
facilitating this process and all activities moving forward. The CIT for Youth coordinator can be someone from any of the community partners in the steering committee. The steering committee can also consult with other stakeholders identified during the asset mapping.

**How Do We Plan and Coordinate for CIT for Youth?**

The information gathered during asset mapping will help inform the planning and coordinating process. During this process, the steering committee should address any issues raised during the asset mapping and decide what CIT for Youth will look like in your community.

The table, Planning and Coordinating CIT for Youth, starting on the next page includes issues and questions you may want to address during the planning and coordinating of CIT for Youth. It also includes helpful tools to assist you throughout this process. The case study, Planning and Coordinating in Utah, starting on page 92, provides an in-depth look at how one community successfully planned and coordinated their CIT for Youth program.

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**Important Note**

This manual focuses on just one component of a much larger picture. CIT for Youth does not provide direct services, but instead provides an infrastructure that supports community collaboration and provides schools and communities with a process for responding to youth with mental health needs. Part of the planning and coordinating process is to consider the availability of direct services and how they can be used with CIT for Youth.

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**Complementary Mental Health Services and Supports to CIT for Youth**

Ideally, schools and communities should be developing and implementing an array of services and supports that help to prevent crises by identifying children with mental health needs early and ensuring services and supports are provided. There are many programs and services available that complement CIT for youth, including educational programs for school professionals and families, a wide array of effective home and community-based services, positive behavioral interventions and supports (PBIS) and mental health curricula that reduce stigma and may increase help-seeking behavior among youth. You may want to learn more about these resources as you plan and coordinate for CIT for Youth. Additionally, police officers in communities with CIT for Youth have shared the value of having SROS serve as mentors to youth in school.

In implementing CIT for Youth, Utah developed a menu of a wide array of services and supports to support their community partners and complement CIT for Youth. This list provided the Utah CIT for Youth steering committee with a description of additional resources to implement and advocate for in conjunction with CIT for Youth. This helped them create a full spectrum of home and community-based services and supports for youth and their families.
## Planning and Coordinating CIT for Youth

<table>
<thead>
<tr>
<th>Issues</th>
<th>Questions to Ask</th>
<th>Helpful Tools and Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roles and Responsibilities</td>
<td>• What will be the roles and responsibilities of the four core community partners when CIT for Youth is implemented? What does each community partner need to commit to in order for CIT for Youth to be successful?</td>
<td>Template: Utah’s Memorandum of Agreement on page 97</td>
</tr>
<tr>
<td></td>
<td>• When should families, community members and schools contact CIT for Youth officers?</td>
<td>Template: Utah’s Community Behavioral Contract on page 101</td>
</tr>
<tr>
<td></td>
<td>• What will the role of each community partner be when a youth is experiencing a mental health crisis? What about when a youth is exhibiting early signs of a mental health need?</td>
<td>Case Study: Planning and Coordinating in Utah on page 92</td>
</tr>
<tr>
<td></td>
<td>• How will the community partners coordinate with each other to ensure youth with mental health needs receive the services and supports they need? How will they work together to follow-up with these youth and their families?</td>
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<td></td>
<td>• If a community partner is not fulfilling a commitment, how will this be addressed?</td>
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</table>
### Policies and Procedures
There may be policies and procedures that impact the implementation of CIT for Youth. Community partners need to be aware of these issues and discuss ways to adapt policies and procedures that create a barrier to CIT for Youth implementation.

- Are there any school, law enforcement or mental health policies and procedures that may hinder or impact the implementation of CIT for Youth? How will these be addressed?
- How will privacy and confidentiality concerns be addressed (e.g., do FERPA and HIPAA place restrictions on how information can be shared). Community partners should be aware that these laws are not as restrictive as often assumed. Appendix H of the Virginia Tech Review Panel Report provides a helpful summary of the FERPA and HIPAA privacy laws.

### Resources for Families
Use the information from the asset mapping to develop resources for youth and families on available mental health services and supports.

- What resources should community partners develop and provide to families? Resources could include information on support groups, education programs, health care providers, available mental health services and supports and funding options.
- What information do families need to successfully navigate the mental health system? Are there any existing resource guides or should one be developed?

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| **Policies and Procedures** | - Are there any school, law enforcement or mental health policies and procedures that may hinder or impact the implementation of CIT for Youth? How will these be addressed?  
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Resources at [www.nami.org/citforyouth](http://www.nami.org/citforyouth):  
- Appendix H Summary of Information Privacy Laws and Guidance from U.S. Department of Education |
| **Resources for Families** | - What resources should community partners develop and provide to families? Resources could include information on support groups, education programs, health care providers, available mental health services and supports and funding options.  
- What information do families need to successfully navigate the mental health system? Are there any existing resource guides or should one be developed? | Family Resources  
- NAMI Basics (an education program for parents and caregivers) at [www.nami.org/basics](http://www.nami.org/basics)  
- NAMI Child and Adolescent Action Center at [www.nami.org/caac](http://www.nami.org/caac)  
Resources at [www.nami.org/citforyouth](http://www.nami.org/citforyouth):  
- Mercer County Children’s Resource Guide (New Jersey)  
- Keeping Families Together Resource Guide (Minnesota) |
### Planning and Coordinating CIT for Youth (continued)

<table>
<thead>
<tr>
<th>Resources for Community Partners</th>
<th>Questions to Ask</th>
<th>Helpful Tools and Resources</th>
</tr>
</thead>
</table>
| In order to adequately address the needs of youth and families, community partners may need additional resources, training and/or education. | • What do community partners need to effectively coordinate with each other? Make sure that each community partner knows who to contact at the schools, mental health centers, family organizations and law enforcement agencies involved with CIT for Youth.  
• What resources do law enforcement officers in schools and in communities need to help youth with mental health needs and their families?  
• Do school personnel need any education, training or resources on mental illness?  
• What resources would help community partners prevent mental health crises and behavioral issues in school and at home? | Resources at www.nami.org/citforyouth:  
Sample Resources for Law Enforcement Officers:  
• *Louisiana Pocket Guide*  
• *Utah Prescription Sheet*  
• *Manual: Responding to Children and Youth with Mental Health Needs*  
• *Police Pocket Guide: Responding to Youth with Mental Health Needs*  
Resources for School Personnel  
• *Positive Behavioral Interventions and Supports*  
• *NAMI Parents and Teachers as Allies* |
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<tbody>
<tr>
<td><strong>Mental Health Services and Supports</strong>&lt;br&gt;The asset mapping session should equip you with knowledge of available mental health services and supports. This information will help guide the creation of a referral process for community partners to use.</td>
<td>• What mental health services exist for youth? (You may want to address this question for youth in military families, low-income youth, gay, lesbian, bisexual and transgender (GLBT) youth, youth of cultural and religious affinity groups, youth with dual diagnoses, youth in rural and frontier communities or other youth who are represented in your community).&lt;br&gt;• How will community partners use these services and supports to help youth?&lt;br&gt;• Are their nontraditional services and supports community partners can use to meet the needs of youth with mental health needs? (e.g., complementary and alternative medicine, life skills training, religious-based interventions, etc.).&lt;br&gt;• What additional services and supports can be implemented to complement CIT for Youth?&lt;br&gt;• Who will help families access available mental health services and supports? Often, the advocacy organizations in the steering committee can help support families in accessing care.</td>
<td>Your asset map from the Conducting Asset Mapping step starting on page 49.</td>
</tr>
</tbody>
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Planning and Coordinating CIT for Youth (continued)

### Issues

**Referrals**

It’s important to figure out where youth with mental health needs will go once they are identified and what the referral process will look like.

#### Questions to Ask

- Where will youth in a mental health crisis or with mental health needs be referred? Who will refer them and when?
- How will this referral information be compiled for easy access by community partners, especially law enforcement officers who are on duty?
- What will the referral process look like (e.g., will it be written, computerized, verbal, etc.)? Under what circumstances will officers transport a youth to a mental health treatment center? Who will contact families and when?
- Who will follow up with referrals? Who will report on outcomes of referrals?

#### Helpful Tools and Resources

Your asset map from Step 2 of this manual.

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<tr>
<td><strong>Advocacy</strong></td>
<td>• Are there mental health services and supports currently unavailable in your community that are needed before CIT for Youth is implemented?</td>
<td>Advocacy Tips on page 91</td>
</tr>
<tr>
<td></td>
<td>• What advocacy efforts will be needed to make these mental health services and supports accessible to youth and their families?</td>
<td>NAMI’s State Advocacy website at <a href="http://www.nami.org/stateadvocacy">www.nami.org/stateadvocacy</a></td>
</tr>
<tr>
<td></td>
<td>• What advocacy will be needed to successfully implement CIT for Youth?</td>
<td>Resources at <a href="http://www.nami.org/citforyouth">www.nami.org/citforyouth</a>:</td>
</tr>
<tr>
<td></td>
<td>• If necessary, how can you coordinate with local advocacy groups to advocate for a more effective, broader array of children's mental health services and supports or for CIT for Youth?</td>
<td>• Family Advocacy: Crisis Intervention Programs for Youth: Strengthening Schools and Communities</td>
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<td></td>
<td></td>
<td>• Law Enforcement Advocacy: Promoting Crisis Intervention Programs for Youth in Schools and Communities</td>
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<tr>
<td><strong>Measuring Effectiveness</strong></td>
<td>• How will feedback and data from community partners be gathered? Who will gather it?</td>
<td>Step Five of this manual starting on page 123</td>
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<td>• How will baseline data be collected to measure the effectiveness of CIT for Youth?</td>
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<td></td>
<td>• How will the success of CIT for Youth be measured? What outcomes should be measured? Who will be responsible for measuring this?</td>
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Most likely it will be necessary to advocate for additional mental health services and supports that are necessary to meet the needs of youth with mental health needs and their families.

You will want to create feedback loops and data collection methods to monitor the success of CIT for Youth.
Advocacy Tips

As a result of conducting asset mapping, your steering committee may determine that there are critical resources missing from your community that will make CIT for Youth challenging to implement. Advocacy can help to bring these services and supports to your community. If your steering committee feels that advocacy is outside of the scope of their efforts, you may want to consult with local advocacy groups. On the other hand, if your steering committee is willing and able to tackle advocacy, review the advocacy resources listed in the table, Planning and Coordinating CIT for Youth, on page 85. In addition, communities that have implemented CIT for Youth shared these advocacy tips:

- CIT for Youth can be a catalyst for change. Publicize the success of CIT for Youth to make the case for additional valuable services and supports that are needed. For example, in San Antonio the CIT for Youth program led to plans to expand the availability of mobile crisis units and related services identified during the implementation process.

- Enlist the support of a CIT champion. Judges are especially powerful catalysts for change because they often see youth with mental health needs cycling in and out of their courts and they are aware of the lack of services.

- When advocating for increasing mental health services and supports, enlist the help of law enforcement leaders—sheriffs and chiefs of police—to make a powerful case that serving children with mental health needs reduces burdens on the courts and juvenile justice system. Law enforcement officers are highly respected in communities and can be your greatest promoters of the program.

- Reach out to parent and youth organizations, such as parent/teacher groups and mental health advocacy groups, or graduates from NAMI’s programs, including the NAMI Basics education program. These individuals can provide “boots on the ground” when you need to do a letter writing campaign, contact the media or meet with community officials.

- Apply for grants as a temporary source of cash to fund needed demonstration projects of community-based services and supports. Keep in mind that it can be difficult to sustain grant-funded programs once the money runs out. Your long-term goal should be a dedicated funding stream from state or local governments. See NAMI’s CIT Advocacy Toolkit at www.nami.org/cittoolkit for more information about applying for grants.

- Collect data on the value of CIT for Youth programs to show the cost savings and social benefits of the program. Use compelling personal stories from youth and their families to help make the case for expansion of mental health services and supports.

- Develop a “wish list” of resources that you’d like to see available for youth and families in your community. Keep this long-term vision in mind. You may not accomplish everything at once, but keep your eyes on the prize.
Our CIT for Youth steering committee in Salt Lake City includes the Salt Lake City School District, Valley Mental Health, Inc., Salt Lake City Police Department and NAMI Utah. We worked closely together to plan and coordinate the implementation of CIT for Youth. We had a very successful CIT program in Salt Lake City, which made structuring CIT for Youth easier. However, we still had to spend quality time with our new community partner, the Salt Lake City School District, to get them on board and ready to be a partner. The school district is able to reach out to all the schools in Salt Lake City to promote CIT for Youth. It’s been a huge help having them involved in our steering committee.

The first step we took as a steering committee was to develop a Memorandum of Agreement (MOA) that described what each community partner would bring to the table to help implement CIT for Youth. It also included mutual promises, terms and conditions. A very important component of this MOA is that each community partner identifies personnel to be the primary contact person. The contact person for each community partner works with the others to form a “team” that addresses behavioral issues of identified youth within each school.

Once we had the MOA, we proceeded to develop a Community Behavioral Contract (CBC). This document is very similar to a crisis plan. It outlines what should happen with a student in a mental health crisis or with a behavioral issue and what is expected of each community partner. However, unlike most crisis plans, it is signed by all entities and representatives of the community partners involved in the wraparound services of the child. A copy of the CBC is maintained at the school while another is maintained by the police department dispatch unit. By maintaining copies in these strategic locations, the information can be accessed at any time the youth is struggling with their behavioral issues regardless of whether they are in or out of school at the time.

If you want to learn more about Utah’s CIT for Youth efforts, contact Det. Ron Bruno at ron.bruno@slcgov.com. You can review the MOA on page 97 and the CBC on page 101.
Step 3  
Key Messages

- It is absolutely necessary to determine the “who, what, where, when and how” of CIT for Youth. The biggest challenge may be ensuring that there are mental health services and supports available to youth with mental health needs identified through your CIT for Youth program. This can be particularly difficult when addressing the needs of traditionally underserved youth. Advocacy may be required to get what you need in your community to ensure CIT for Youth is successful and adequately addresses the needs of these youth.

- Your CIT for Youth steering committee should use what they learned from the asset mapping session to successfully plan and coordinate CIT for Youth. It is also important to consider the implementation of additional services and supports that can complement CIT for Youth. These efforts may require the involvement of additional stakeholders.

- Planning and coordinating CIT for Youth requires a team effort. It is important for the steering committee to develop agreements that set up a clear, practical process for CIT for Youth implementation.
Supporting Documents

Templates

Utah’s Memorandum of Agreement
A sample agreement from Utah’s CIT for Youth program that describes the roles and responsibilities of partner organizations.

Utah’s Community Behavioral Contract
A sample contract from Utah’s CIT for Youth program that creates a plan to respond to individual youth who have been identified through the CIT for Youth program.

Additional Resources
(Available online at www.nami.org/citforyouth)
- NAMI Basics, an education program for parents and caregivers
- NAMI Child and Adolescent Action Center
- Keeping Families Together Resource Guide (Minnesota)
- Mercer County Children’s Resource Guide (New Jersey)
- Louisiana Pocket Guide
- Utah Prescription Sheet
- Manual: Responding to Children and Youth with Mental Health Needs
- Police Pocket Guide: Responding to Youth with Mental Health Needs
- Positive Behavioral Interventions and Supports
- NAMI Parents and Teachers as Allies
- NAMI’s State Advocacy website
- Family Advocacy: Crisis Intervention Programs for Youth: Strengthening Schools and Communities
- Law Enforcement Advocacy: Promoting Crisis Intervention Programs for Youth in Schools and Communities
Template: Utah’s Memorandum of Agreement

CRISIS INTERVENTION TEAM (CIT) FOR YOUTH

MEMORANDUM OF AGREEMENT

by and between

SALT LAKE CITY SCHOOL DISTRICT,
VALLEY MENTAL HEALTH, INC.,
SALT LAKE CITY POLICE DEPARTMENT,
and
NAMI UTAH

This MEMORANDUM OF AGREEMENT is made and entered into as of the _____ of __________, 2011, by and between the SALT LAKE CITY SCHOOL DISTRICT, a Utah educational institution, hereinafter referred to as “SCHOOL DISTRICT;” and VALLEY MENTAL HEALTH, INC., a nonprofit corporation of the State of Utah, hereinafter referred to as “VMH;” and the SALT LAKE CITY POLICE DEPARTMENT, hereinafter referred to as “SLCPD;” and the NATIONAL ALLIANCE ON MENTAL ILLNESS UTAH, a nonprofit organization, hereinafter referred to as “NAMI Utah.”

WITNESSETH:

WHEREAS, mental illness is a serious medical condition that affects children and adolescents; and

WHEREAS, a child or adolescent in a mental health crisis is usually behavioral in nature; and

WHEREAS, it is the goals and in the joint interest of the parties hereto that a child or adolescent with a mental illness receives early identification and access to treatment to prevent involvement in the criminal justice system and improve their psychosocial functioning; and

WHEREAS, it is understood that to best achieve these goals that each party will work together and in partnership to provide wraparound support for the child or adolescent.

NOW THEREFORE, in consideration of the following mutual promises, terms and conditions, the parties hereto agree as follows:
1. **TERM OF THIS AGREEMENT:**

   This Agreement is effective as of the date noted above and will be in effect at the will of any party. Any party may terminate this Agreement upon giving (30) days prior written notice to the other parties.

2. **The SCHOOL DISTRICT shall:**

   A. Inform the administration of each school within the Salt Lake City School District of this Agreement and encourage the administration of each school within the Salt Lake City School District to support the goals of this Agreement by working in partnership with identified personnel of all parties.

   B. Encourage the administration of each school within the Salt Lake City School District to identify a member of their staff as the main contact person to work in partnership with the contact person identified by each of the other parties.

3. **VMH shall:**

   A. Provide each school within the Salt Lake City School District access to a mental health professional to act as a consultant and be the main contact person to work in partnership with the contact person identified by each of the other parties.

4. **SLCPD shall:**

   A. Provide each school within the Salt Lake City School District access to a Salt Lake City Police Department School Resource Officer, who will be certified by the Utah Department of Human Services, Division of Substance Abuse and Mental Health as a CIT Officer with additional training in CIT for Youth, to be the main contact person to work in partnership with the contact person identified by each of the other parties.

5. **NAMI Utah shall:**

   A. Provide each school within the Salt Lake City School District access to a NAMI Utah staff member to act as a consultant and be the main contact person to work in partnership with the contact person identified by each of the other parties.

   B. Offer at no cost to any student of the Salt Lake City School District, any family
member of a student of the Salt Lake City School District, or any staff member of the Salt Lake City School District participation in any of the following programs:

**Progression**: support and education for youth aged 15-21.

**NAMI Basics**: education for parents and caregivers of children and youth living with a mental illness.

**NAMI Mentoring**: program for youth and their families to get support and information on resources in their community.

**Hope for Tomorrow**: school-based program for middle school and high school youth, their parents, and teachers to raise awareness about mood disorders, eating disorders, and substance abuse disorders.

**Parents and Teachers as Allies**: in-service program for teachers to provide insight on the early signs of mental illness and information on how parents and teachers can best work together as well as assist teachers understand the “lived experience” of mental illness.

6. **COLLABORATIVE EFFORT**:

The basis of this agreement is to form partnerships by these parties with the focus of early identification of mental illness of a youth or adolescent within the Salt Lake City School District who may become involved in the criminal justice system due to their illness.

By identifying and supporting the contact person of their respective party, the contact persons of the parties can form a “team” to best address the mental health and behavioral issues of the identified youth or adolescent and to assist with access to treatment and support of the youth or adolescent and their family members.

This Agreement is not intended to disregard privacy laws or issues. However, with the understanding that each contact person brings unique resources and a perspective to assist with the wraparound support for a child or adolescent, any available means to share information should be explored and utilized including parental consent.

Additionally, if a crisis/safety plan is deemed to be appropriate, consideration should be given to the utilization of a Community Behavioral Contract (CBC) that
will include the input and signature of each person or representative of each agency involved in support of the child or adolescent. A copy of the CBC should be provided to each entity that may be requested to intervene or take action including the school and SLCPD which will provide support as directed by the CBC including times that the child or adolescent is not in school.

7. LIABILITY:

Each party shall be responsible for its own wrongful acts or negligence, and shall indemnify and hold harmless the other parties for any claims or actions arising from the performance of this Agreement brought against the other parties.

IN WITNESS WHEREOF, the parties have executed this agreement as of the date set forth above.

SALT LAKE CITY SCHOOL DISTRICT

By: ________________________________ DATE: __________
Name and Title________________________________________________

By: ________________________________ DATE: __________
Name and Title________________________________________________

VALLEY MENTAL HEALTH, INC.

By: ________________________________ DATE: __________
Name and Title________________________________________________

SALT LAKE CITY POLICE DEPARTMENT

By: ________________________________ DATE: __________
Name and Title________________________________________________

NAMI UTAH

By: ________________________________ DATE: __________
Name and Title________________________________________________
### Template: Utah’s Community Behavioral Contract

**COMMUNITY BEHAVIORAL CONTRACT**

Home – School – Community

<table>
<thead>
<tr>
<th>Child’s/Youth’s Name</th>
<th>Start Date</th>
<th>Last Updated</th>
</tr>
</thead>
</table>

1. **Need for a Plan**

2. **Goal of this Plan**

3. **Definitions of Unsafe Behavior**

4. **Definitions of Safe Behavior**

5. **School Rules Related to this Plan**

6. **Home Rules Related to this Plan**

7. **Community Rules Related to this Plan**

8. **Plan for Maintaining Safety 24 Hours a Day**
9. Crisis Back-up to this Plan

10. Additional Information or Comments Regarding this Plan

Family Team Signatures

<table>
<thead>
<tr>
<th>Child’s/Youth’s Signature</th>
<th>Date</th>
<th>Wraparound Facilitator’s Signature</th>
<th>Date</th>
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</thead>
<tbody>
<tr>
<td>Parent’s/Guardian’s Signature</td>
<td>Date</td>
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<td>Family Team Member’s Signature</td>
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Notes: