

This Memorandum of Understanding is between Community Counseling Services, 2458 Stetzer Street, Bucyrus, Ohio 44820 (hereafter "CCS") and The Galion City Health Department, 113 Harding Way East, Galion, Ohio 44833 (hereafter "the Department").

**PURPOSE OF THIS MEMORANDUM OF UNDERSTANDING.** This purpose of this Memorandum of Understanding is to establish an agreement for space at the Department to be used by CCS in providing mental health counseling services.

**AGREEMENT PERIOD.** Beginning on or about May 1, 2014 through June 30, 2015. Either party may terminate this MOU upon thirty (30) days' prior written notification to the other party.

**SCOPE OF SERVICES:** CCS will provide comprehensive mental health services to individuals residing in Crawford County.

**CCS WILL PROVIDE THE FOLLOWING:**

1. Provide a licensed counselor or licensed social worker to serve the consumers of Crawford County for the purpose of mental health counseling services
2. Provide written documentation to show the date and times of scheduled appointments (minus consumer names or other identifying information)
3. Follow the hours of operation for the Department
4. Follow all Protected Health Information laws, and confidentiality will be assured at all times under this MOU
5. Use Department facilities in a reasonable manner consistent with tenant duties under Ohio law

**THE DEPARTMENT WILL PROVIDE THE FOLLOWING:**

1. Office space for confidentiality of the individual
2. Contact CCS when the Department is closed (i.e. holidays, training days, etc.)

**BOTH PARTIES WILL PROVIDE THE FOLLOWING:**

1. Both CCS and the Department shall comply with all applicable laws of local, state, and federal governments.
2. Both CCS and the Department shall not discriminate against any client, patient, or use of service because of race, color, sex, religion, national origin, creed, marital status, age, Vietnam era or disabled veteran status, or the presence of any sensory, mental, or physical handicap.

PAYMENT. There is no payment by either party for the use of this office space.

LIABILITY. Each party agrees to be responsible and assume liability for its own wrongful and/ or negligent acts or omissions or those of its officials, officers, agents, or employees to the fullest extent required by law, and further agrees to save, indemnify, defend, and hold the other party harmless from any such liability. It is further provided that no liability shall attach to the Department by reason of entering into this agreement except as expressly provided herein.

GENERAL: This Memorandum of Understanding constitutes the entire understanding and agreement between CCS and the Department with regard to matters herein, and supersedes any and all previous agreements, whether written or oral among the parties. This Memorandum may be amended only in writing signed by all parties hereto. Nothing herein shall create or be deemed to create any relationship of agency, joint venture, or partnership between CCS and the Department.

The Galion City Health Department

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

Title: \_\_\_\_\_

Community Counseling Services

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

Title: \_\_\_\_\_