

# COMMUNITY MEMORANDUM OF AGREEMENT

## Integrated Referral and Intake System

Will County Health Department All Our Kids (AOK) Network



This Memorandum of Agreement ("Agreement") is between Partnering Agencies (PAs) within Will County.

### Purpose

Partners within Will County are collaborating to link families to community resources, facilitate partnerships, streamline communication around referrals, and close the referral communication loop for participating organizations.

In order to do so, PAs within Will County will utilize Integrated Referral and Intake System (IRIS), a web-based referral application that supports warm handoffs and improves communication among partners by streamlining the referral process, closing the communication loop for referring organizations, and giving communities a clear data driven picture of partner capacity.

This Agreement describes the sharing of data within Will County. PAs agree to participate in a data partnership with all partnering agencies that sign this Agreement.

### Data

1. IRIS input consists of a limited amount of personally identifiable demographic information on individuals, children, and families; information relevant to the referral such as contact information and services request; information contained in measurement and assessment instruments; and information about referrals made and the outcome of those referrals (herein referred to as "Data").
2. The Will County PAs shall follow all federal, state and local laws and regulations applicable to collection, sharing and distribution of the Data.

### How Data May be Used

1. To fulfill AOK grant requirements and provide Illinois Department of Human Services (IDHS) with referral data for use as determined by IDHS.
2. To generate de-identified, aggregate level reports to improve communication, coordination, and client service delivery.
3. By PAs for internal Continuous Quality Improvement and other service and program improvement initiatives.
4. For purposes of scholarly research and analysis, including use in professional presentations and publications by Illinois Department of Human Services, the University of Kansas Center for Public Partnerships and Research (KU-CPPR), and/or PAs, using only de-identified and aggregate level data.

### Protection of Data

**PAs agree to the following safeguards for protection of data:**

1. Ensure that all IRIS users understand and acknowledge the confidentiality of referral data, and the trust and confidence Will County Health Department's AOK Network has placed in them by providing access to and contact with this information. All IRIS users must electronically sign an IRIS Confidentiality and Data Security Agreement before accessing the application.
2. Exercise the utmost diligence to protect and safeguard confidential and proprietary information as well as personally identifiable client level information.
3. Notify all PAs within Will County Health Departments AOK IRIS Network and Illinois Department of Human Services within ten days upon discovering any breach or suspected breach of security or of any disclosure of the data to any unauthorized individual or entity.

4. Obtain approval from any other PA whose IRIS data they use for scholarly research and analysis or professional presentation purposes. Reports, presentations or other materials produced by PAs using IRIS data shall include the following disclaimer, *“The views expressed and conclusions drawn are solely those of the authors/presenters and do not reflect an endorsement by or view of Will County Health Department.”*
5. Use and access the data solely for the purposes stated in this Agreement.

#### **Term and Termination**

1. Participation in this Agreement is effective upon completion of the signature page.
2. Parties may voluntarily terminate their participation in this Agreement by sending thirty (30) days' written notice to the Community Champion, who currently is Rebecca Anderson, or the designee of the Will County Health Department.
3. The Will County Health Department, through its Community Champion, who currently is Rebecca Anderson, or its designee reserves the right to terminate a PA's participation in this Agreement in the event that the PA is found to have violated this Agreement. Subject to the provisions of Paragraph 4 below, the Community Champion, Rebecca Anderson, or the designee of the Will County Health Department will send the PA thirty (30) days' written notice of such termination.
4. If a PA violates this Agreement by a breach of any provision of the Protection of Data provisions of this Agreement, the Will County Health Department, through its Community Champion, who currently is Rebecca Anderson, may terminate this Agreement immediately, upon written notice to PA.
5. The Community Champion, Rebecca Anderson, or their designee will notify all parties when any organization/program is added to or removed from this Agreement and from Will County's IRIS.
6. Upon voluntary or involuntary termination of your participation in this Agreement, your ability to share your agency's data in IRIS and your ability to access data of other agencies in this Agreement will be terminated.

THE PARTIES, through their duly authorized representatives, assent to the terms and conditions of this Agreement and have executed it as of the date shown on the Signature Page.

Signature Page

COMMUNITY MEMORANDUM OF AGREEMENT

Will County Health Department AOK Network  
Integrated Referral and Intake System

THE PARTIES, through their duly authorized representatives, assent to the terms and conditions of this Agreement and have executed it as of the date shown below.

|                      |                  |
|----------------------|------------------|
| Participating Agency | Mailing Address: |
| Name                 |                  |
| Title                |                  |
| Signature            | Phone Number     |
| Date                 | Fax Number       |

*The agency’s completed signature page should be mailed or scanned and emailed to the Community Champion, Rebecca Deang, or their designee. Your ability to share data in IRIS will not become effective until a signed signature page has been received.*

WILL COUNTY HEALTH DEPARTMENT

BY: \_\_\_\_\_  
Rebecca Anderson, Community Champion

Rebecca Anderson  
Will County Health Department  
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[randerson@willcountyhealth.org](mailto:randerson@willcountyhealth.org)