



**DUPAGE
COUNTY**

Community
Development
630-407-6600
Fax: 630-407-6601

Family Center
422 N. County Farm Rd.
Wheaton, IL 60187
630-407-2450
Fax: 630-407-2451

Housing Supports
and Self-Sufficiency
630-407-6500
Fax: 630-407-6501

Intake and Referral
630-407-6500
Fax: 630-407-6501

Senior Services
630-407-6500
Fax: 630-407-6501

COMMUNITY SERVICES

630-407-6500
Fax: 630-407-6501
csprograms@dupageco.org

www.dupageco.org/community

211 of DUPAGE MEMORANDUM OF UNDERSTANDING

This Agreement is entered into and made on _____ by and between DuPage County Department of Community Services 211 of DuPage, located at 421 N. County Farm Road, Wheaton, IL 60187, herein referred to as Contact Center and

_____ located at _____
herein referred to as the Agency; together referred to as the parties.

Whereas 211 of DuPage, recognizing the enormous community benefit of establishing a central point to access health and human services, have entered into an operating agreement with 211 Illinois establishing 211 covering DuPage County.

Whereas community service agencies within the coverage area of the Contact Center seek to assist the public with health and human services needs that can be coordinated and accessed through a centralized contact center.

Now therefore, the parties agree as follows.

Responsibilities

211 of DuPage will:

1. Provide the citizens of the area served with a 211-contact center — an easily accessible, comprehensive information link — 24 hours a day/7 day a week/365 days a year — to the wide range of health and human services available to them.
2. Ensure that all 211 operations follow the requirements and standards of the National Alliance of Information of Referral Systems (AIRS).
3. Provide comprehensive Information and Referral services to residents of the coverage area, including assessment of caller's needs and community resources available to likely address those needs.
4. Provide referrals to the Agency according to the following service availability:

The Agency will:

1. Provide above identified services and/or resources to referred individuals as they are available to meet identified needs.
2. Refer individuals back to the Contact Center when unable to provide for the identified needs.



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3. Update the Contact Center as resources or capacity change.
4. Complete an annual comprehensive review of this agency's resource record(s) with the Contact Center.
5. Provide the additional services listed below:

Term: The Agreement is effective on _____ and remains in effect until _____. The Agreement will automatically renew for additional one-year terms unless otherwise amended or terminated by either party with 60 days' notice.

Ownership and Control: The parties agree this agreement does not establish or indicate any affiliation, partnership, contractual relationship nor does it create any liabilities between the parties.

Public Relations: The parties agree that advertising, promotions, and publications using the other parties' brand, name or logo shall first have the other parties written approval.

Notice: It is agreed that communication and/or notification pursuant to this agreement shall be deemed to have been duly given if personally delivered, received by postal service, or delivered via the electronic management software.

Mary A. Keating
Director
DuPage County Department
of Community Services

Date

Executive Director

Date