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**Crisis Hotline:** 702-646-4981

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## Memorandum of Understanding

Between

SafeNest

and

### ThrivePoint Academy of Nevada (TPAN)

This Memorandum of Understanding (MOU) sets for the terms and understanding between ThrivePoint Academy and SafeNest to serve and assist victim-survivors of power-based violence.

### Background

AB245 has a straightforward goal- to create safe campuses by reducing instances of power-based violence and increasing student resources should they experience these forms of violence. Throughout the interim, the Nevada Coalition to End Domestic and Sexual Violence was approached by parents and student victim-survivors who were let down by the current systems and lack of procedures. They shared that in the aftermath of their trauma, they were never connected to an advocate and were unaware of all their options, their rights, or the critical resources that existed in their community to help them.

#### Purpose

This MOU stands as evidence that SafeNest and ThrivePoint Academy of Nevada intends to collaborate toward the mutual goal of providing maximum available assistance for students of ThrivePoint Academy and their families. ThrivePoint Academy and SafeNest agree to collaborate in improving the physical, psychological, emotional and social safety of all students and families. To this end, each agency agrees to consider working together by coordinating and providing access to services and support provided by SafeNest.

We are committed to upholding the rights of victims and ensuring their voices are heard. Through compassionate guidance, comprehensive resources, and proactive initiatives, we strive to cultivate a safer, more equitable community where victims

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are respected, supported, and empowered to rebuild their lives, all while utilizing a trauma-informed and response approach.

## Specifically:

ThrivePoint Academy agrees to the following:

1. TPAN staff will complete the referral form provided by SafeNest for students and/or families thought to be in need of services provided by SafeNest in a prompt manner.

2. TPAN staff will submit referrals to the appropriate designated Front Desk SafeNest staff member directly at 702-877-0133, frontdesk@safenest.org.

3. Will work to provide a streamlined process for potential students referred to by SafeNest by working directly with SafeNest personnel to remove delays and barriers in the enrollment process.

4. Will begin the process of making adjustments to the ThrivePoint Academy's Lottery & Admissions Policy to make students referred by SafeNest included as priority enrollments if/when a waiting list is being enforced.

5. Will fully participate in meetings with SafeNest to assess and improve the collaborative process.

SafeNest agrees with the following:

1. Coordinate quarterly meetings with ThrivePoint and SafeNest Vice President of Advocacy & Collaborations. These meetings will be focused on assessing and improving the collaborative process.

2. Perform the following functions, as needed, once a referral is made by ThrivePoint Academy:

a. Establish contact with victim/survivor involved in domestic violence or sexual assault-related crimes that are referred over by ThrivePoint Academy in a timely manner.

b. Assess the needs of victims/survivors and perform any necessary crisis intervention.

c. Provide victims/survivors with appropriate information, referrals, and facilitated access to other community services.

d. Prepare victims/survivors for and provide them with the essential support throughout the process as needed, including criminal justice and/or civil legal advocacy.

# Confidentiality

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SafeNest and ThrivePoint Academy agree that all records are the property of the provider, records are maintained inside the provider's offices and records can be accessed via authorized release of information signed by the client or by court order. The only exceptions to confidentiality are:

- Permission to release information is granted to victim/survivor after informed consent is provided in writing utilizing SafeNest's Client Limited Release of Information (ROI) document.
- There exists a court order requesting specific information.
- Where disclosure is required by law.
- Special circumstances where child or elder abuse are disclosed.

Reporting

ThrivePoint Academy staff will coordinate with SafeNest staff to ensure that students and families are able to participate in programs that they qualify for and both agencies will regularly follow up with victims/survivors to ensure resources are appropriate as long as permission to release information is granted by the victims/survivors after informed consent is provided in writing utilizing SafeNest's Client Limited Release of Information Document.

#### **Funding**

This MOU is not a commitment of funds.

#### Duration

This MOU is at-will and may be modified by mutual consent of authorized officials from either partner. This MOU shall become effective upon signature by the authorized officials from both organizations and will remain in effect for one year from the date of the signing of this document. This agreement may be terminated with 30 days' notice from/to the other party. No element of this agreement will be construed to comply with any form of financial or monetary obligation or liability, or to confer on one party the capacity to represent or act as an agent of the other.

Contact Information SafeNest

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3900 Meadows Ln. Las Vegas, NV 89107 (702) 877-0133 frontdesk@safenest.org

ThrivePoint Academy of Nevada Vince Medina Principal 3802 Meadows Ln. Las Vegas, NV 89107 (702) 844-8854

vincent.medina@thrivepointnevada.com

Both agencies will agree to provide a continuous flow of communication between the two agencies with appropriate written authorization of the Limited Client Release of Information document.

We, the undersigned, as authorized representatives of ThrivePoint Academy and SafeNest do hereby approve this document.

Vince Medina

Principal

ThrivePoint Academy

Tara Bakhtavar

Vice President of Advocacy & Collaborations

SafeNest



Refer	al Form for Sa	feNest & ThrivePoint Acade	my
Referral Date:			
Referring Agency: ( SafeNest	•	ePoint Academy	
Referral Information	<u>on</u> ;		
Student		DOB	
Parent/Guardian			
Address:			
PHONE		EMAIL	
		SAFE TO LEAVE MESSAGE? SAFE TO EMAIL?	
BEST DAYS & TIM	ES TO CONTAC	CT	
Brief Description	of services ne	eded:	
•			
Referring Advocate	e/Staff		
Referring Advocate	e/Staff Phone #_	9	
Referring Advocate	e/Staff Email		

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