Allen County Family and Children First Council

SERVICE COORDINATION MECHANISM
2016

Helping Families Flourish

Allen County Family and Children First Council

Service Coordination Mechanism

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In addition:

Addendum A – Referral Form

Addendum B – Commitment to Service Coordination / Authorization for Information Sharing

Addendum C – Wraparound confidentiality / attendance signature page

Addendum D – Family Strengths / Needs Assessment

Addendum D-1 - Family Strengths / Needs Assessment and Cultural Discovery Questions

Addendum E – Case Summary for Intersystems Committee

Addendum E-1 – Family Team Planning Worksheet

Addendum F – Crisis / Safety Plan w/ Worksheet

Addendum G – Confidentiality Statement / Attendance Sheet – Intersystems

Addendum H – Progress Report

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Addendum K – Family-Selected Respite Provider Waiver of Liability

Revised on 7/13/2016

Allen County Family and Children First Council

Service Coordination Mechanism – Revised 2010, 2013 and 2016

The **MISSION** of Allen County Family and Children First Council is to

"Initiate, build and maintain collaborative efforts that support, educate and empower all families toward independence."

I. Overview

Allen County Family and Children First Council held its formative meeting on December 8, 1995 and began meeting regularly in January of the following year in Executive Session to hear and decide on requests to Cluster funds for multi-system children and youth, followed by a General Session to conduct Council business. Under Cluster, the heads of agencies met to consider the most challenging, multi-system, "deep-end" children - how they would be placed and who would pay the costs for each placement. This process was in no way family focused, and parents were not invited to participate.

Very shortly after the New Year in 1996, Cluster was abandoned in favor of an Intersystems Committee, where clinical representatives of the Council, on behalf of the Directors of partnering agencies, met with parents (and sometimes their children) to discuss the needs of their families, and how the combined services of the Council membership could be coordinated to meet the needs of their children. Although in both instances funding considerations had to be made, the new focus became much more on meeting the needs of the child and family through a child-centered, strengths-based, family focused and a culturally responsive process. Parents were invited to be a part of the discussion and decision-making for the lives of their children in care. Having the parents involved gave the Intersystems Committee a much better understanding of their situation.

Allen County's Service Coordination Mechanism has been developed to enhance the existing collaboration among agencies and community programs which has grown considerably in the last 10 years. Admittedly, our community had a history of tense turf issues, but successful collaboration has led to more collaboration and a much improved sense of "common cause" among our community and social service leadership. We can be proud of what has been accomplished, and the variety of programs and collaborative partnerships that have come from learning to work well together. We continue to face challenges as a result of the great needs of many of our families and the increasingly limited financial resources available to meet those needs. Throughout our work with the Intersystems Committee, the purpose of service coordination has been to work in close collaboration to keep children and youth with their own families, or in the least restrictive environments possible for their well-being and the safety of the community. Service Coordination was

designed to bring our child-serving agencies, families and providers into collaborative teams to work on behalf of the family's or child's individual needs, by examining their strengths, and clarifying their concerns and objectives and then planning for a return to "normalcy" for the family with the right blend of services and efforts from the family team. Within this framework we acknowledge that there are many differences in the ways our families define "normalcy" and that teams need to be sensitive to the individual culture and climate of each family we work with.

In keeping with our mission as a Council, Allen County Family and Children First Council affirms that any child whose needs cross multiple systems and whose needs are not currently being met by the systems within our county is eligible for Service Coordination in Allen County. We also affirm that each family case will be served in accordance with the following beliefs:

- Promoting family driven, child-focused, culturally sensitive, individualized services
- Affirming the developmental importance of children living with their own family in a stable family environment
- Meeting the needs of the child and family utilizing the least restrictive community-based services
- Focusing on prevention and the child and family's strengths, rather than pathology
- Affirming that everyone has self-worth and that positive change can occur
- Affirming that the community has an important role to play in facilitating positive change
- Ensuring that every child, no matter what his/her ability, has access to service coordination including:
    - Children age birth up to 22nd birthday
    - Children whose parents voluntarily seek services
    - Child with at least one custodial parent/ guardian who wishes to keep the child in the community and agrees to participate actively in the wraparound process
    - Children who have multiple needs even if some of the needs are not being met by current services
    - Children at risk of being deemed unruly, alleged unruly, or adjudicated unruly
    - Children under the jurisdiction of the Juvenile Court as delinquent
    - Abused, neglected or dependent children

II. Participants in the Development of the SCM

The team of Allen County professionals and families involved with the 2013 revision of this Service Coordination Mechanism include:

- Michelle Vorhees, Director of Social Services - Allen County Children Services

- Brian Wischmeyer, Director of Special Education – Lima City Schools
- Paula Hillard, Director of "Caring for Two" Program – Allen County Health Department
- Jeannie Stahl, Director of Community Support Services – Allen County Board of DD
- Cathy Follett, Director of Intervention Services – Allen County Juvenile Court
- Melissa Meyer, Clinical Services Director – Family Resource Center- Representing our Combined MH/Recovery Services Board for Allen, Auglaize and Hardin Counties.
- Marcey Godfrey, Social Services – Health Partners of Northwest Ohio
- Priscilla Burtt, - Coleman Behavioral Services
- Linda Kayser, Parent Representative/Parent Mentor – Allen County ESC – former parent/ consumer
- Dawn Rhoades & Lisa Shafer – St. Rita's Medical Center
- Rita Stephens & Lee Maroney, Social Service Support – Allen County Dept. of Job and Family Services
- Dan Norberg, Intervention Specialist – Allen County Juvenile Court
- BarbBlass, Clinical Supervisor– Allen County Help Me Grow
- Theresa Schnipke, SSA Manager– Allen Co. Board of DD, alternate
- Karen Martin, Supervisor of Family Services - Allen Co. Children Services - alternate
- Jamie Hardwick, FRC Liaison at Juvenile Detention Center - alternate
- Mary Early, Coordinator – Family and Children First Council - Staff
- Barb Jauert, Administrative Coordinator – Family and Children First Council - Staff

The Steering Committee of Allen County FCFC was given the responsibility to review and approve this mechanism by the Full Council by vote on June 14, 2010. The Steering Committee approved this revision of the mechanism during its _____ session on _____

III. Accessing Service Coordination in Allen County

It is the assumption and expectation that the major participants in the Family and Children First Council are effectively addressing the needs of children as they serve their own client families utilizing their own agency mandates, policies, procedures and funds. The focus of the Service Coordination Mechanism is on those multi-need and system-challenged children and families who have needs above the mandate or policies of the individual agencies or programs, and on facilitating greater overall systems integration in serving children and families. As long as the services available in these agencies suffice to meet the needs of children and families, accessing the Allen County Service Coordination Mechanism is not necessary.

One of the agencies with a specific mandate to use service coordination in the community is Help Me Grow. This organization is closely tied to Family and Children First, and its use of service coordination and teaming to support families is closely aligned with the Council's mechanism. If the Help Me Grow service coordinators are unable to facilitate the needs of their families within the team process established in their policies, they have the same access as other agencies to Intersystems services and funding.

The FCFC Coordinator functions as the point of contact and resource for Service Coordination and may be contacted at (419-227-8590 x 2785) by a parent or community agency, school, Juvenile Court or other entity for an initial screening / review of the family's need for services. (See Referral Form - Addendum A) The person who contacts the Coordinator will be provided with a Referral Form or simply asked the questions on the form by the Coordinator. It must be understood by anyone who initiates this process that family choice is a necessary component, and families must be willing to *voluntarily participate* in Service Coordination. The Coordinator will review the Referral Form and determine the level of service coordination the family initially needs.

Level I

If a family, an agency or an advocate contacts the FCFC Coordinator for assistance, a referral to the most appropriate agency will be made if the review determines that the family is:

1) Not involved with multiple agencies for services, and thus not eligible for service coordination at this time.
2) Having difficulty accessing services through a single agency that may not be the most appropriate for their needs
3) Not familiar with the agency resources available,

The agency will then utilize their policies and procedures to meet the needs of the family or will consider gathering a multi-system team if they are unable to sufficiently respond to the family's needs. This step is an integral part of engaging systems and families in need of service but is not a formal part of the Service Coordination Mechanism in Allen County. The process seeks to engage families in the least restrictive process for their needs as we know them at this initial stage of contact and no FCSS funds will be provided at this level.

Level II

If the child is already involved in services from multiple systems and the family needs are not being met through existing efforts, a family team will be initiated by either the FCFC Coordinator or the agencies currently serving the family, with the family's agreement to be actively involved with the team. The family can initiate this process by contacting the FCFC Coordinator at Amber.Martin@jfs.ohio.gov or by phone at 419-227-8590 x 2785, or by sending a letter to P.O. Box 1243, Lima, Ohio 45802. The FCFC Coordinator, in consultation with the family will invite a wraparound team, which includes representation from all the services / programs the family may need, including the child's educational provider and any support person(s) chosen by the family to assemble.

At this point, the team will meet as necessary to determine what needs and resources are available for the family and whether the agencies represented in the Family Team have adequate resources and knowledge to serve those needs. Efforts should always be made to meet when the parents can be present; this confirms the importance of their involvement with the team, and creates an atmosphere of trust. If the resources are sufficient, and the management of their utilization is moving smoothly, there is no need to bring the case to Intersystems Committee at this time, but the team should continue to meet until objectives are met. If there is a lack of resources or funding for services available through the agencies represented in the Family Team, or there are difficulties with managing the utilization of the strategies planned for by the Family Team, the team needs to consider bringing their case to Intersystems and entering into the formal Service Coordination process. Until the case has been presented at Intersystems and approved for funding as described in Level III, FCSS funds may not be utilized.

Level III

When the Family Team decides that the resources are not adequate to meet the family needs through the wraparound process, or they need additional ideas or consultation from more collaborators, they should make a request to present their case to the Intersystems Committee. This should only be done with the consent of the family, and their agreement to fully participate in the plan. The Case Summary Form (Addendum E) with the team signatures / confidentiality statement should be presented to the FCFC Coordinator at least 24 hours prior to a scheduled Intersystems Committee meeting where the Team Leader has asked to present. Family should be encouraged to attend if at all possible so they can advocate for themselves and their child. . Families whose concerns are brought to Intersystems and whose requests are approved by Intersystems are eligible for use of FCSS funds if the services approved are allowable under FCSS Guidelines.

IV. Process: Service Coordination Meeting Protocols

The FCFC Coordinator will act as a resource for the newly formed team if invited, and provide guidance in the principles of family team development as necessary. Once cases have reached the Intersystems Committee, and the family's proposed plan of action has been approved by the Committee, they become a part of the Service Coordination Mechanism that requires the use of FCFC-developed documentation and processes including the following:

1) The first step, with the help of the parent(s), will be to select a Team Leader and the other members of the Family Team. This process should be conducted by the FCFC Coordinator or the agency service provider as soon as it is decided to form a Family Team for the purpose of implementing wraparound for Intersystems. The Team Leader should be the direct care person most often in contact with the parents and most familiar with their case. If this person is not amenable to the family, they may choose another member of the team to take on that role. Final make-up of the team is subject to family approval. This selection should be documented on the Commitment to Service Coordination / Release of Information Form – Addendum B, before or during the first Service Coordination Mechanism team meeting. This form is also the record of authorization for release of information between and among the member agencies listed on the form in regards to this family. Prior to this point, the Family Team should use the forms and policies of the individual agency that has been in the lead for this family.

2) The initial duty of the Family Team Leader is to call a meeting of the team, keeping in mind the family's needs and limitations when planning for all parties to be present. The Team Leader shall provide written notification to all parties invited within 5 business days of receiving the referral. Written notification may be accomplished by sending letters by mail or sending emails to each participant – and should be an agreed-upon method that was brokered by the Team Leader as he discussed and scheduled the meeting with each participant. The initial Family Team Meeting should take place within ten working days after the receipt of the referral unless other arrangements are made due to the scheduling needs of the family or other participants. In an effort to simplify and expedite communication with team members, efforts should be made to email the team any follow-up materials or messages between meetings. If the family does not have access to email, it will be the responsibility of the Team Leader to keep the family informed and document the communications via telephone or mail. Meetings may take place sooner than 10 days from referral if possible.

3) The team will assure that the family understands and completes the Commitment to Service Coordination / Release of Information Form (Addendum B) to allow those involved in the family Team to share information about the child (ren) with each other or the Intersystems Committee when that becomes necessary. The Team leader will explain information concerning their rights and responsibilities under the Service Coordination Mechanism including the procedure for dispute resolution using the Dispute Resolution Flow Chart (Addendum J). At this time the family should be given a copy of the Children's Rights handbook.

4) At the beginning of the first team meeting the Team Leader or other designated team member shall discuss confidentiality and obtain the signatures of all present to agree to the Confidentiality / Attendance Form (Addendum C). This form should be signed by all present at each of the ensuing Team meetings for this family, and kept for documentation by the Team Leader, or other designated recorder. During the first team meeting the strengths and needs of the family should be discussed using the Family Strengths/ needs form (Addendum D, D-1) and the Family Team Planning Worksheet (Addendum E-1). The Case Summary Form (Addendum E) shall be introduced to the team to record the findings and recommendations of the team if the decision is made to take the case to Intersystems. This worksheet record should specify not only what strategies are to be used, but which team member is responsible for each strategy.

5) The Family Team will use all information collected through the process of discovery of strengths/ needs and through discussion with the family and all other members at the table to decide what strategies should be used to solve the situation the family and child have identified. They will set at least two outcomes: 1) Family Satisfaction – it is the primary goal to meet the needs of the family and child. And 2) Select one or more of the outcomes listed on the Case Summary Form:

- Family Preservation
- Mental Health
- Sobriety
- School Success
- Reduced Court Involvement

The team will summarize their findings, prepare a timeline for reaching outcomes, and specify the services to be used in achieving the proposed plan using the Case Summary Form. Even if only part of the services will be paid through Intersystems, the Case Summary should include all strategies to be used. The team will then estimate the costs for which they are requesting

payment. All members of the family team present when this plan is developed should sign the reverse side of the Case Summary to signify that they are in agreement with the proposed plan.

6) Families will be offered the services of a parent advocate at no charge to them. This advocate will attend family team meetings with the family to assure that they understand the process and are heard by the other members of the team. Families may also be encouraged to invite a support person to the team meetings which may include a relative, a friend, a neighbor or a pastor. Allen County FCFC policy states that parent advocates will be paid $25 an hour to accompany parents to family team meetings. FCFC will recruit advocates from the community as needed by our families and recommend PAC training for them. The payment for acting as the parent advocate will be made from the fund which the child is eligible to use for services, as written in Allen County FCFC policy. All support individuals selected by the family will be invited and notified of all team meetings in the same way that other members of the team are notified.

7) The first team meeting should include a review of the Referral Form or the completion of that form if it has not been filled out. The team should also assess the child's presenting concerns, the family strengths and possible strategies to meet the outcomes expressed by the family and endorsed by the team.

8) The team should also discuss and prepare a Crisis / Safety Plan (Addendum F) for each family during the initial meeting and should revisit it for review periodically to assure that it meets the current needs of the child and family. If a Crisis/ Safety Plan has already been developed by one of the partnering agencies, it should be reviewed and revised if necessary, or approved by the team for continued use by the family.

9) At any point in the life of the Family Team, if there is a scheduled out-of-home placement for a child, the team should meet before that placement occurs. If there is an emergency placement of a child in Service Coordination, within 10 days of that placement the Family Team should meet to discuss how they will begin planning for the child's reintegration into the life of the family and community.

10) When the family has reached its intended goal, the team, in consultation and agreement with the family will be responsible for determining the need for ongoing involvement in the wrap-around process, with the understanding that the team can reconvene in the future if conditions warrant.

11) The Family Team shall appoint one of its members to monitor progress and track outcomes to be reported to the Intersystems Committee. They shall also define and select members to fill any

other roles necessary to function as a true collaboration. All members should have active roles in the process of serving the family.

12) If the services needed by the child / family are outside the purview of any of the team's member agencies, or the team is at a loss in terms of what can be done for the family, they should make arrangements with the FCFC Coordinator to bring the case to the Intersystems Committee for funding or problem-solving. All services should reflect the strengths, needs, family and ethnic culture and should be designed to be accomplished in the least restrictive environment that is appropriate for the child and family.

13) Once a decision or plan has been approved by the Intersystems Committee, it is the responsibility of the Family Team to work with the family to make sure the resources procured are utilized, and progress is being made. If strategies are not working, the team should look for other strategies, and revisit their case with Intersystems Committee using the Progress Report form (Addendum H). If an objective is met and the family is in agreement that they are satisfied with the outcome, the team may be dissolved after properly completing the EXIT- Case Closed form (Addendum I) and returning it to the FCFC Coordinator. If the family continues to set goals not yet achieved, or continues to have needs that are not yet resolved, the Family Team should continue to meet and make plans to achieve the next outcome.

14) While every effort is made to maintain a child with his (her) family, there are some situations that warrant placement if for only a limited period of time. In these non-emergency situations, when the team and family are considering placement, a team meeting followed by a presentation to the Intersystems Committee shall be held prior to the final decision to place the child in out-of-home care.

V. Confidentiality and Least Restrictive Environment

Families who take part in service coordination will be treated with respect at all times and their privacy will be guarded by members of the Intersystems Committee and wraparound teams. All matters referred to the Intersystems Committee or to the Council Steering Committee shall be handled confidentially according to the standards set forth by member agency policies, state and federal laws and professional ethics. Non-governmental parties involved shall also maintain the confidentiality of all information, discussion and records presented. See Addendum G (Confidentiality/ Attendance Form). Each member of the Intersystems Committee will reaffirm his (her) commitment to this promise by

signing this form at each meeting he or she attends during the year. The Family Teams will likewise sign Confidentiality /Attendance Form (Addendum C) at the beginning of each team meeting held.

Allen County FCFC strongly endorses the philosophy that if change is to occur in a family, the work of change should be facilitated within the family / home setting. No child should receive treatment in an environment that is more restrictive than needed for his (her) own well-being and for the safety of the community. This means that in Allen County placement of a child outside the home should only be considered when there is no other viable option for housing/ treatment. Any out-of-home placement should be of the shortest duration that will allow positive outcomes to be achieved. There will be regular monitoring of the placement by the Team Leader for progress, and meetings should continue to review progress and to plan for the child's return to his (her) home and community.

VI. Child/ Family Strengths & Needs Assessment

A. As the wraparound family team is formed, appropriate assessments and surveys should be utilized to help inform the team of the strengths of the family, the needs of the child, the present status of the child in question, and other information that might help form the basis for planning. This will include the Family Strengths/ Needs Form, but may also include other assessments used by any of the members of the Family Team which are relevant to the child's/ family's situation. Those may include the MAYSI, the Ohio Scales, or other appropriate assessments.

B. All pertinent partners should be asked to give their input, including the child/ youth, the family or caregivers, the agencies or service providers currently involved, school representatives and others invited by the family.

C. Each family team will discuss and complete the Family Strengths / Needs assessment (Addendum D) to guide their discovery of family and cultural strengths.

D. The data from the Referral Form (Addendum A) should help inform the team concerning the child's current living arrangements and the presenting situation identified. The Family Team Planning Worksheet (Addendum E-1) may be used to help the team make plans for the family and to record progress towards the goals established; later the Case Summary Form (Addendum E) will be used to record the strengths and needs of the family before coming to the Committee for assistance. This form also requires the team to select from general outcome statements and to write a more individual outcome for each child. After selecting an outcome or a set of outcomes, the team will record their proposed plan, and the financial needs they have. This Case Summary Form should be

prepared with the assistance and approval of the entire team and signed by all members of the family team.

VII. Outcome Monitoring / Tracking - please see section XIII for this information

VIII. Dispute Resolution:

This Dispute Resolution Process is designed to serve families and agencies actively involved in the Service Coordination Process through the Intersystems Committee of Allen County Family and Children First Council. Any dispute should first be discussed together by the team which includes the parents or caregivers, and efforts should be made to mediate a resolution which allows the team process to continue. Mediation is an integral element in each step of this process.

A. If a dispute arises between an agency and a family, a resolution will first be attempted through the existing agency process adhering to their policies and timelines. If a dispute has not been addressed within 30 calendar days of initiation within an agency, the family may choose to request consideration through the process described in section B.

B. If the dispute arises between two agencies, or a family and more than one agency, or there is a dispute between the family and their Family Team concerning their Plan, or if the single-agency process above has been unsuccessful, any of the disputants may contact the Intersystems Chair for referral to a **Dispute Resolution Committee.**

- This Committee will be appointed by the chair(s) of the Intersystems Committee in consultation with the President of Family and Children First Council within 5 days of the referral.
- This Committee shall be comprised of three executive directors of agencies not involved in the dispute and their representatives who serve on the Intersystems Committee, at least one parent representative from Council, and one community agency member from Council.
- Within 5 days of appointment, the Dispute Resolution Committee shall meet and hear the dispute and make a decision by majority vote. There shall be every effort made to mediate the dispute at this and every ensuing level.
- The Intersystems Committee chair(s) shall notify the disputants of the recommended solution within 5 days of the decision being made.

C. If the decision of the Dispute Resolution Committee is not satisfactory to at least one party to the dispute, the disputants may refer the dispute to the Family and Children First Council Steering Committee by submitting a written complaint to the Council President not later than five (5) business days after notification of the decision by the Intersystems Committee Chair(s). The Steering Committee will hear the dispute, make a decision by majority vote and the Chair of Steering Committee shall report that decision to the disputants. This communication shall be in writing within sixty (60) days of the receipt of the original complaint. A member of the Steering Committee who is a disputant shall be disqualified as a part of the dispute resolution process with this committee.

D. If any disputant involved is not satisfied with the decision of the Steering Committee, the disputant may appeal the decision of the Steering Committee to the Juvenile Court by filing one of the following not later than seven (7) business days after the decision of the Steering Committee has issued:

a. If the child involved is the subject of a pending dependency, neglect, abuse, delinquency, unruly, or juvenile traffic offender proceeding in the Juvenile Court, by filing a written motion in the pending proceeding to determine which agencies are to provide services or funding for services for the child pursuant to Revised Code Section 121.38(B)(1).

b. If the child involved is not the subject of a pending dependency, neglect, abuse, delinquency, unruly, or juvenile traffic offender proceeding in the Juvenile Court, by filing a written complaint with the Court objecting to the decision of the Steering Committee pursuant to Revised Code Section 121.38(B)(2).

The party submitting the appeal shall immediately notify the Council President of the appeal by providing the Council President with a copy of the written complaint or motion. All parties involved in the dispute, with the assistance of the Council Coordinator and Intersystems Chairperson shall submit all relevant information and their respective positions and proposed solutions to the Court not later than thirty (30) days after the written appeal is filed with the Court. The Court will consider and decide the appeal within ninety (90) days after the filing of the appeal with the Court. Unless otherwise scheduled by the Court on its own motion, no formal hearing will be held unless specifically requested by one of the disputants not later than thirty (30) days after the written appeal is filed with the Court.

E. Each agency represented on Allen County Family and Children First Council that is, at the time the complaint is initiated, providing services or funding for services that are the subject of the dispute resolution process initiated by a parent or custodian under section 121.381 of the Ohio Revised Code shall continue to provide those services and the funding for those services already in place until a resolution is complete. If

an agency that provides services or funds during the local dispute resolution process is determined through the process not to be responsible for providing them, it shall be reimbursed for the costs of providing the services or funding by the agencies determined to be responsible for providing them.

F. In the event of an emergency involving an immediate risk of harm or injury to a child during any dispute, existing mechanisms for legal protection and /or intervention shall be invoked. An emergency meeting of the Steering Committee will be called and the number of members who are able to attend on short notice will constitute the quorum. The Steering Committee will hear the parties in dispute and communicate their decision within 24hours of hearing the case.

G. Any party may choose to bring an advocate at any point in the dispute process. The advocate may provide information to the Dispute Resolution Committee and the Court and support to the party or parties involved in the dispute.

H. The dispute resolution discussion is not open to the public. Records of the dispute and its resolution shall be filed in the FCFC Council office.

I. The dispute resolution process will be an integral part of any presentation / training to families and agencies in the community concerning the Allen County Service Coordination Mechanism. See Section XII for further details.

J. The decision of the Judge is final for disputes under this Service Coordination Mechanism.

K. If a dispute is raised in connection with a child in Help Me Grow services, and the child is not eligible for Part C services the complaint should be handled through the process already defined above. However, if the child is eligible and enrolled in Part C services in Help Me Grow, it is the responsibility of the Council to assure the effective implementation of procedural safeguards by each state or local agency or private agency in the state that is involved with the provision of Part C services. According to this purpose, the following will define the process for Part C Help Me Grow complaints:

- The Council Coordinator is designated as the Council's liaison for the receipt of complaints
- The Council Coordinator will notify ODH (Bureau of Early Intervention Services) of the complaint in writing (via email, US mail or fax within seven calendar days of the receipt of the complaint.
- The Council Coordinator will provide a copy of the Procedural Safeguards to the individual registering the complaint.
- The Council Coordinator will explain the options available for dispute resolution, which include:
  - Filing a complaint with the County Council
  - Filing a complaint with Ohio Department of Health
  - Requesting mediation
  - Requesting an administrative hearing with the Ohio Department of Health

- Filing a complaint with the provider of Part C services, if the provider has a resolution process for complaints.
- If the provider of Part C services has a resolution process for complaints, the provider of Part C services must notify ODH and the County Council of the complaint in writing via email, US mail or fax within 7 calendar days of receipt of the complaint. The provider of Part C services must issue a written decision to the complainant, the County Council and ODH within 30 days from the receipt of the complaint.

- Unless the state or other agencies and parents of a child otherwise agree, the child and family must continue to receive appropriate Part C services currently being provided, during the resolution of disputes arising under Part C. If the complaint involves the initiation of one or more services under this part, the child and family must receive those services that are not in dispute.
- The Council will assign one or more individuals to investigate the complaint. The assigned individuals will not have a direct interest in the matter
- The investigation of the complaint will include the review of all relevant information and making a decision.
- The Council will issue a written decision to the complainant within 30 calendar days from the receipt of the complaint. The written decision will address each allegation and include findings of facts and conclusions and the reasons for the council's decision. A copy of the decision will also be provided to the Ohio Department of Health. If ODH receives notice that a complaint regarding Part C services has been filed with the County Council or a provider, ODH will monitor the resolution process to assure that the complaint is resolved by the County Council or provider within 30 days. If the complaint has not been resolved within 30 days ODH will notify all parties to the complaint that the complainant can select one of the following options:1) To have ODH investigate the complaint in accordance with Rule 3701-8-08(C) (4). If this option is taken, ODH will assure the complainant that the issue will be investigated and resolved within 60 days from the date of the receipt of the complaint, or 2) To mediate and/or go to an administrative hearing in accordance with Rule 3701-8-08 (C) (3). ODH will assure that if the complainant selects either mediation or administrative hearing, the process will be completed within 30 days of the request for this choice.
- The Council will ensure that corrective actions are implemented within 45 days of the written final decision if a violation is found.

IX. Designation of Service Responsibilities

Each Family Team shall establish the service responsibilities for the accomplishment of the service plan

- The family will designate a Team Leader before or during the first team meeting, and document that decision using the Commitment for Service Coordination / Authorization for Information Sharing Form (Addendum B).

- The team will designate a recorder who will complete necessary forms for the team, and track progress towards the goals included in the family's plan
- The team will designate a member to schedule reviews of the family plan as necessary
- The team will designate a member to facilitate Family Team meetings. This role may rest with any member and could be an excellent role for parents to assume if they are comfortable with it.
- The Family Team will also specify who will be responsible for each strategy in the plan – parents and professionals.

X. Service Planning for Individual Family SC Plans

A. **Family Involvement:** It is essential that the family is involved in the discovery process that begins the work of each Family Team. The family voice is not replaceable, and without their input in planning, there is little likelihood that progress will be made, or family outcomes achieved. Every effort should be made to fully involve parents in the assessment of strengths and needs of the family and the selection of services in order to assure that strategies are culturally appropriate and responsive to the dynamics and competencies of the family. The family will be asked to signal their acceptance of Service Coordination by signing the Commitment for Service Coordination/ Authorization for Information Sharing Form (Addendum B) during the initial meeting with the team. Families may initiate a Family Team meeting not otherwise planned by contacting the FCFC Coordinator or their Family Team Leader to gather the team together.

B. Diversion: Early identification and intervention is a critical factor in preventing a child from becoming involved in the Juvenile Court system. The Intervention Services Department of the Allen County Juvenile Court has developed a process to divert youth between 6 years of age, and eighteen years of age from the official court system.

The Intervention Services Department of Allen County Juvenile Court is designed to address status offender and first-time minor misdemeanor offenses. The department also may divert felons less than twelve years of age. There are two functions within the Intervention Department:

1. The first function is to meet with the youth and family prior to a complaint being filed with the Prosecutor's office, in an effort to ultimately avoid filing a charge on a misbehaving child. A meeting, called a Special Referral, is held with the child and parents, along with the referring source, such as the child's school, parent or social service agency. The Special Referral is designed to link the youth and their family to

services that will help to prevent further contact with Juvenile Detention or Probation. The department will also assist families in establishing any services they need.

2. The second function begins when the Intervention Services Department receives a signed complaint from the Prosecutor's office. This complaint will be screened by the Director of Intervention for consideration of eligibility for Intervention supervision, or if based on the severity of the alleged offense, or the child's history with the Juvenile Court, elect to officially file a recommendation for prosecution.

Another mechanism used by Intervention Services, is the C.A.S.T. (Court Assessment Service Team) process. The C.A.S.T. process was originally designed to meet the needs of the violent youthful offender detained with a Domestic Violence charge, and his/her family. It has evolved into a system of care that includes linkages for status offenders, delinquents and school referrals for misbehavior. Several agencies - Children Services, Family Resource Center (community mental health), Safe Harbor (runaway shelter) and Crossroads Crisis Center (women's crisis shelter) work with court personnel and the parents/ guardians and their child to discuss the presenting problem and develop a safety plan, an action plan and other options when there is an issue of what to do next with the youth and his/her family. The C.A.S.T. team will determine if the youth needs to be referred to Intersystems and then pass that referral to the Court/ Mental Health Liaison who will call a wraparound team together with the approval of the parents and begin the process for serving the family if needs for respite, short-term crisis stabilization, mentoring, parenting education or alternative education are found. These interventions are all available in the community and can be accessed by parents. The Family Team will act as broker for these services which may be at no cost to the family, or at minimal expense in some cases. This Liaison will then facilitate the process of developing a plan with the family and bringing the proposal to Intersystems for funding if these services are not otherwise funded.

C. **Timelines:** Each Family Team will develop timelines for goal achievement and will record those timelines on the Case Summary Form (Addendum E). They will also be given timelines during their presentation and discussion with Intersystems for returning to the Committee to report progress. The frequency of reports to the Committee will be in part dependent on the severity of the family's need, but may also depend on the requirements of the funding source.

D. **Safety Plan**: Each Family Team shall develop a crisis / safety plan for their family during the initial planning process that will encompass a variety of options based on the safety issues being presented. If a safety plan has already been developed by one of the agencies on the team, and it is still

appropriate and adequate for the situation, it will suffice instead of creating a new plan. The plan may need to be modified as circumstances change, or a more in-depth knowledge of the situation becomes known.

E. **Out-of-Home Placement:** The Intersystems Committee of FCFC receives regular updates on the status of children currently involved in service coordination and will be made aware of situations that may result in out-of-home placement of the child. Recommendations for placement of the child will come from the child's team to the Intersystems Committee for review, planning and assistance with funding when applicable. Allen County FCFC will approve out-of-home placement only after families are provided the available range of community-based therapeutic and supportive services and those services are determined to be inadequate to provide a reasonable level of safety and well-being for the child, family and the community, and in thoughtful conversation with the Cost-Sharing funders.

Non-Emergency Placement: While every effort is made to maintain a child with his family, there are some situations that warrant placement if only for a time-limited period. In these non-emergency situations, when the family and team are considering placement, a presentation to the Intersystems Committee shall be made prior to the final decision to place a child in out –of-home care. It is expected that parents will be actively involved in decision-making at these meetings. Additional community service providers and other individuals involved with the family may also participate at the request of the family. During the time that planning and decision-making is taking place regarding placement of the child, the family team needs to assure that there is a well-established safety plan in place which can be utilized if problems develop.

NOTE: This process cannot override decisions of Allen County Juvenile Court regarding out-of-home placements.

If a child receiving service coordination is placed in out-of –home care with DYS, the placement status will be reviewed monthly by the Intersystems Committee and/ or the RELY (Re-Entry of Local Youth) Committee. This will include the possibility of making recommendations to the Court for early release if the record indicates it would be appropriate. Since the FCFC Coordinator sits on both the Intersystems and Rely Committees, communication between these two bodies should be assured.

Because the expectation is that the child will return to the family / community, planning for community supports shall be initiated 3-6 months prior to their return to the county, using a newly gathered family team, or recalling the team that served the youth before he (she) was removed. Teams can continue to meet with the family during the placement to monitor progress, establish goals, and prepare strategies for housing, treatment, employment and education, in expectation of the youth's return.

***Emergency Placement**: In the event of imminent danger to the* child *and /or family, the Family Team determines that an immediate out-of-home placement component of a crisis plan must be implemented; the team shall meet within 10 calendar days of placement to review the child's status, including how he/she is adjusting to placement and to continue planning for future reunification with family and community.*

Unless out-of-home placement is a child protection issue and Juvenile Court is making the removal decision, the parents shall participate actively in every aspect of decision-making regarding the child's placement.

As long as the child is in service coordination and in placement, representatives of the child's team and the Intersystems Committee shall formally review the child's status at least quarterly at regularly scheduled RELY or Intersystems Committee meetings.

XI. Funding / Fiscal Issues

Implementation of any plan or part thereof is subject to the availability of and the rules governing the use of funds. Funds come from two main sources: 1) State Family Centered Services and Supports (FCSS) that are a part of the Ohio Department of Mental Health Budget for Systems of Care, and 2) Local Cost-Shared Funding available through an agreement between the Allen County Commissioners, on behalf of FCFC, and the three local funding parties.

- Each case will be considered by the committee based on the merits of the plan and the need of the family. Once a decision has been made to approve use of funds on a plan, the Intersystems Committee will discuss and select the fund or funds that will allow for the expenditure within its set of guidelines for spending.
- No case should be funded using Intersystems Cost-Shared Funds until all other avenues of payment have been exhausted or ruled out.
- A child whose case is funded for services by Intersystems must have multiple needs – in one system or many- whether they are currently being served for those needs or not.
- County Cost-Shared Funds can be used if two or more funding agencies agree – shares will be equally divided, unless the parties choose to use some other ratio. By practice, the child must be using mental health services, or in need of them in order for Mental Health funds to be used as part of the share. By the same token, B/DD funds can only be used when a child being served is eligible for services under that Board's eligibility. Funds are contributed by Children Services, Mental Health and the Board of DD for use in serving children with multiple needs or being

served through multiple systems. FCFC facilitates an annual Cost-Shared Agreement which is negotiated between these three parties and the Allen County Commissioners. These funds are managed and accounted for by the FCFC staff and are planned for and recorded as a part of FCFC's County Budget.

- Although our philosophy is to refrain from using out-of-home placements unless no other strategy is appropriate, these local funds may be used for this purpose for the shortest time that can be meaningful for the support of the child and family. In order for Cost-Shared Funds to be used for out-of-home placement, special approval must be sought from each of the funding sources who will be sharing the costs. We are committed to keeping the family unit intact, and even short separations can be counterproductive to the family's ability to stay together.
- The FCFC Coordinator and Administrative Coordinator will be responsible to finalize arrangements for service based on the Family Team's negotiated recommendations and contacts with service providers. They will subsequently be responsible to process invoices and track the expenditures until the plan is complete. No funds may be spent for a plan that has not been approved by the Intersystems Committee, and funds can only be spent for the duration of the Plan / Contract in place.
- The Intersystems Committee will assure that services are paid for from accounts that the children are eligible to use. All funds will be used in accordance with their stated guidelines.

XII. Public Awareness / Targeted Marketing

- Agencies and direct care personnel will be educated about the county's Service Mechanism plan by way of a training packet including a power point presentation. The FCFC/ Intersystems representatives will be available to discuss the material with individuals or groups if they are invited to do so. In addition, agencies can request to have the FCFC Coordinator and Intersystems representatives present the SCM to their staff at any time.
- FCFC will ask members of the Council to add the SC packet of information, including power point, to their New Hire orientation within their agencies to appropriate staff. This will assist new employees in learning the wraparound process with community partners and understanding the SCM.
- FCFC and Intersystem Committee members will make presentation(s) to school counselors and social workers representing all districts in the county. The Council Coordinator will make connections with school counselors and social workers to present this material

- The mandated members of Council will be asked to include the Service Coordination Mechanism as a resource on their established websites.
- Agency service providers, educators or other social service professionals with direct need to observe the Intersystems Committee in action may request and be invited to attend Intersystems meetings to enhance their understanding of the process of SC. This should only be done to better inform professionals of the services and processes involved in this element of the Service Coordination Mechanism. All such guests will sign the Confidentiality / Attendance Form.

XIII. Quality Assurance of the County Service Coordination Mechanism/ Outcome and Tracking

A. Allen County FCFC assures that upon request, Service Coordination information will be submitted to the state for evaluation.

B. Allen County FCFC currently collects entry and outcome information on all family cases served under this Service Coordination Mechanism. This is recorded in Excel files to assist us in reporting not only to the state, but to the Intersystems Committee and Council.

C. This Allen County Service Coordination Mechanism will be revisited on a bi-annual basis beginning with the revision completed in 2010.

Addendum A

Allen County Family and Children First Council
Intersystems Committee

REFERRAL FORM
PLEASE PRINT

Date of Referral_____

PARENT / CARETAKER INFORMATION

Family Name_____

Child's Name_____

Street Address_____

City, State, Zip_____

Contact Number_____**Alternate Contact** _____

YOUR INFORMATION:

Your Name_____

Name of Organization (if applicable) _____

Contact Number_____**Alternate Contact**_____

Is a RELEASE OF INFORMATION FORM included? _____**Yes** _____**No**

Please FAX this Referral Form to Allen County Family and Children First Council at 419-227-0729. Questions? Call 419-227-8590 x 2785

Office Use Only:

Date Referral Received_____

Date referred to: **Preliminary Family Team meeting**_____
Outcome_____

Intersystems_____
Outcome_____

Addendum A

Allen County Family and Children First Council

REFERRAL FORM

FAMILY INFORMATION: (Please provide the data you have available)

Name of Referred Child or Children	**Birth Date**	**Grade Level**	**Gender**	**Race**

Name of Adults living in the home	**Relationship to Children**

Names of Other Children living in the home	**Age**			

Reason for Referral: (check all that apply)

Child facing out of home placement	Child exhibiting behavior issues at school	Child exhibiting behavior issues at home	Family Crisis / Conflict	Legal charges pending / filed on the child.

Is the child/family situation _____Chronic or _____a Crisis? (Mark both if applicable)

Is the family aware that a referral has been made for Intersystems services? _____Yes _____No

Current System Involvement: (check all that apply to the referred children)

	Juvenile Court		**Education- IEP/ Special Ed or Alternative School. (circle all that apply).**		**Board of DD**
	Job & Family Services **Medicaid – Food Stamps (circle)**		**Social Security Benefits**		**Head Start**
	Children Services		**Health / Medical**		**Help Me Grow**
	Mental Health Services				**Special Referral**
	Other – (Describe)				

Addendum A

Known Presenting Risks or Needs: (check as many as apply)					
	Suicidal Ideations, Gestures, Attempts		Depression		Youth uses Drugs or Alcohol
	Self-Injurious Behavior		Hears Voices – Sees Things		Parent w/ Drug or Alcohol Problems
	Aggressive Behaviors toward others, Animals, Property, etc.		Suspended, Expelled, Truancy, or Dropped Out of School – (please circle)		Parent with Mental Illness or Developmental Delay
	Fire-setting		Eating Disorder		Youth with Developmental Delay
	Victimization: Physical, Emotional, Sexual, Neglect – please circle which one(s)		Educational Disabilities		Parent w/ Chronic Illness
	Availability of Weapons		Impulsive Behavior		Youth w/ Chronic Illness
	Runaway		Poverty		Unrestricted Internet Access
	Sexual Acting Out		Currently Placed out of home		Lack of Caregiver Supervision
	Special Education		Unruly or Delinquent (circle one)		No Primary Care Physician
	Mental Health		Physical Health		Childcare for children with special needs

Brief Summary of Presenting Problems: (Please include current diagnoses and medications if known)

Addendum B

Allen County Family and Children First Council

INTERSYSTEMS SERVICES FOR FAMILIES COMMITTEE

COMMITMENT TO SERVICE COORDINATION AND AUTHORIZATION FOR INFORMATION SHARING

I. I hereby authorize _____ to be the Family Team leader who will share information about my child with the Intersystems Committee of the Allen County Family and Children First Council.

II. I understand the Allen County FCFC Intersystems Committee exists in order to assist in the coordination of services and funding for services for multi-system youth and their families. Its primary goal is to treat and maintain children in the community and prevent out-of-home placements.

III. I understand that my family's commitment to change depends on our active participation in the process of planning and carrying out our family plan. By signing this form I am committing my family to work as a part of our Family Team to make the necessary changes for our family. I will assist in choosing our Family Team members, in discovering my family's strengths and our needs, and in choosing strategies to work on with my child (ren). I have also received a copy and explanation of the Allen County Dispute Resolution Process, and the Department of Mental Health's pamphlet on Children's Rights - to help me understand my role as a parent and my rights to participate in decision-making for my child.

IV. Members of the Allen County FCFC Intersystems Committee include experienced parents, and staff members from agencies located in Allen County including:

- Children Services
- Board of Developmental Disabilities
- Juvenile Court
- Family Resource Center
- St. Rita's Medical Center
- Allen County Schools
- Health Department
- Family and Children First Council
- Lima City Schools
- Family Representatives & Mentors
- Dept. of Job & Family Services
- Health Partners of Western Ohio

Each Intersystems Committee member signs a confidentiality statement that reads:

"I understand and acknowledge that all client-specific information, proceedings, documents, records, discussions, opinions, findings and /or actions taken during Intersystems Committee meetings are confidential and not subject to disclosure or discussion outside this meeting – pursuant to Ohio Revised Code Chapters 2305,2317,4757,and 5122. I further acknowledge that any breach of this confidentiality is subject to disciplinary action and possible legal action against me. These restrictions on disclosure and confidentiality are not time-limited, and are binding on me after my separation from work with the Allen County Family and Children First Council Intersystems Committee."

Name of Child _____ DOB _____
Child's date of birth

Name of Child _____ DOB _____
Child's date of birth

Parent/Guardian _____ Date _____

Family Team Leader _____ Date _____

Witness _____ Date _____

This Authorization expires one year after the date signed by the Parent / Guardian.

Addendum C

Allen County Family and Children First Council
Intersystems Committee
WRAPAROUND- CONFIDENTIALITY SIGNATURE PAGE

Re: _____

I understand and acknowledge that all client-specific information, proceedings, documents, records, discussions, opinions, findings, evaluations, and / or actions taken during today's meeting are CONFIDENTIAL. Except as required to carry our the duties of my employment, this information is not subject to disclosure pursuant to Ohio Revised Code Chapters 2305, 2317, 4757 and 5122. I further understand that any breach of this confidentiality is subject to disciplinary action, and possible legal action against me. These restrictions on disclosure and confidentiality are no time-limited, and are binding on me even after my involvement with this Wraparound team has ended.

The individuals signing below are members of the team and were a part of the meeting where this plan was proposed- either in person or by telephone – held on _____
Date

Printed Name	Role	Signature

Addendum D

Allen County Family and Children First Council
Intersystems Committee
Family Strengths & Needs Assessment

Family Name_____ Child's Name_____

This Strengths and Needs Assessment should be completed after a discussion with the family and time enough to observe and evaluate the domains below. Please check the column that best describes whether you would describe the domain to be an area of strength for the family, or an area of need. Please also complete the questions concerning cultural discovery on the back of this sheet.

Domain	Strength	Need
1. Housing / Environment – Basic Physical Needs: Comments:		
2. Family Relationships: Comments:		
3. Parenting Skills: Comments:		
4. Caregiver Characteristics: Emotional / Mental Health		
Physical Health		
Employment/ Income Management		
Comments on Caregiver Characteristics:		
5. Substance Abuse within the Family: Comments:		
6. Youth Characteristics: Emotional/ Behavioral		
Medical		
Developmental		
Educational		
Comments on Youth Characteristics:		
7. Support Network: Comments:		

Addendum D

Family Culture and Heritage:

1. What language is spoken at home?

2. What family traditions do you practice?

3. In what cultural events does your family participate?

4. Are there any special values or beliefs you were taught that are important to you?

5. Does your family belong to any part of a faith community?

6. Do you belong to any social organizations?

Summary:

1. Review of Cultural Discovery – Significant Impact, or Concerns:

2. Significant Areas of Strength:

3. Significant Areas of Need

Addendum D- 1

Allen County Family and Children First Council
Intersystems Committee

Family Strengths/Needs Assessment
Definitions & Family Culture Questions

Some items apply to all household members while other items apply to caregivers/youth only. Persons who spend most of their time in the home, (e.g., mother's boyfriend who may have a different address, but stays in the home most evenings) are considered household members. Assess items for the specified household members, selecting one score only under each category. Household members may score differently on each item. When assessing an item for more than one household member, record the score for the household member with the greatest need (lowest score).

1. **Housing/Environment/Basic Physical Needs**
   - a. **Adequate, basic needs are met**
     Family has adequate housing, clothing and food.
   - b. **Some problems, easily correctable**
     Family has correctable housing, clothing and food problems that affect health and safety needs.
   - c. **Serious problems, difficult to correct**
     Numerous and/or serious housing, clothing and food problems that have not been corrected or are not easily correctable and/or family is not willing to correct.
   - d. **Chronic basic needs deficiency**
     House has been condemned or is uninhabitable, or family is chronically homeless and without clothing and/or food.

2. **Family Relationships**
   - a. **Supportive relationships**
     A supportive relationship exists between household members.
   - b. **Occasional problematic relationship(s)**
     Relationship(s) is occasionally strained but not disruptive.
   - c. **Domestic discord**
     Current relationship or domestic discord, including frequent arguments, degradation or blaming. Open disagreement on how to handle problems with youth. Frequent and/or multiple transient household members. Violent acts/threats that cause minor or no physical injury to household members.
   - d. **Serious domestic discord/domestic violence**
     A pattern of discord and/or violence. Physical, emotional, or sexual abuse present in the home environment. Repeated history of leaving and returning to abuse partner(s). Repeated history of violating court orders by the perpetrator of domestic violence. Repeated history of violating safety plans. Involvement of law enforcement of restraining orders. Serious or repeated injuries to any household member.

3. **Parenting Skills**
   - a. **Good parenting skills**
     Caregiver(s) displays parenting patterns which are age appropriate for children in the areas of expectations, discipline, communication, protection and nurturing.
   - b. **Minor difficulties in parenting skills**
     Caregiver(s) has basic knowledge and skills to parent but may possess some unrealistic expectations and/or may occasionally utilize inappropriate discipline.
   - c. **Moderate difficulties in parenting skills**
     Caregiver(s) acts in an abusive and/or neglectful manner, such as causing minor injuries, leaving children with inadequate supervision, and/or exhibiting verbal/emotional abusive behavior.
   - d. **Destructive parenting patterns**
     Caregiver(s) has a history and/or currently acts in a manner that results in high risk of serious injury or death of a child, or results in chronic or serious injury or abandonment of a child. Caregiver(s) exhibits chronic and severe verbal/emotional abuse.

4. **Caregiver Emotional/ Mental Health**
   - a. **Demonstrates good coping skills**
     Caregiver(s) takes initiative to deal with problems in a constructive manner.

b. **No known diagnosed mental health problems**
Caregiver(s) has no known diagnosed emotional or mental health problems. May require a mental health evaluation.

c. **Minor/moderate diagnosed mental health problems**
Caregiver(s) has moderate diagnosed emotional or mental health disorders that interfere with ability to problem solve, deal with stress, and effectively care for self and/or children.

d. **Chronic/severe diagnosed mental health problems**
Caregiver(s) has severe and/or chronic diagnosed emotional or mental health disorders making caregiver(s) incapable of problem solving, dealing with stress, or effectively caring for self and/or children.

5. **Caregiver Physical Health**

a. **No health problems**
Caregiver(s) does not have health problems that interfere with the ability to care for self or children.

b. **Minor health problem or disability**
Caregiver(s) has a minor disability, disease or chronic illness that interferes with daily living and/or ability to care for self or children.

c. **Moderate health problem or disability**
Caregiver(s) has a moderate disability, disease or chronic illness that severely interferes with daily living and/or ability to care for self or children.

d. **Serious/chronic mental health problem or disability**
Caregiver(s) has a disability, disease or chronic illness that prohibits the ability to care for self or children.

6. **Caregiver Employment/Income Management**

a. **Employed**
Caregiver(s) is employed with sufficient income to meet household needs, regardless of source of income.

b. **No need for employment at this time**
Caregiver(s) may be out of labor force but has sufficient income to meet household needs, regardless of source of income.

c. **Underemployed**
Caregiver(s) is employed with insufficient income to meet household needs.

d. **Unemployed**
Caregiver(s) needs employment and lacks income required to meet household needs.

7. **Substance Abuse within the Family**

a. **No known substance abuse**
Household members display no substance abuse problems.

b. **Minor substance abuse**
Household members display minimal substance abuse problems which rarely impact family functioning.

c. **Moderate substance abuse**
Household members have moderate substance abuse problems resulting in such things as disruptive behavior and/or family dysfunction which result in a need for treatment.

d. **Serious substance abuse problems**
Household members have chronic substance abuse problems resulting in a dysfunctional household/lifestyle, loss of job, and/or criminal behavior.

8. **Youth Characteristics (Emotional/Behavioral/Medical/Developmental)**

a. **No problems**
Child(ren) appears to be age appropriate, no problems.

b. **Minor problems**
Child(ren) has minor physical, emotional, medical or intellectual difficulties addressed with minimal or routine intervention.

c. **Child(ren) has moderate problems**
Child(ren) has severe physical, emotional, medical, or intellectual problems resulting in substantial dysfunction in home, school, or community which strain family finances and/or relations.

d. **Child(ren) has severe/chronic problems**
Child(ren) has severe physical, emotional, medical, or intellectual problems resulting in substantial dysfunction in home, school, or community which strain family finances and/or relations. Severe difficulties have resulted in court involvement or out-of-home placement on a temporary or long-term basis.

Addendum D- 1

9. Youth Characteristics (Educational)

   a. **Normal grade placement with no problems noted**
   Child(ren) has no problems at school and requires no additional supports/services.

   b. **Normal grade placement but with special services/intervention**
   Child(ren) is in normal grade placement, but has special services provided under an Individualized Education Plan. Attends school regularly.

   c. **Child(ren) has moderate educational problems**
   Child(ren) may or may not have IEP services, but continues to have educational difficulties. Child(ren) is not on normal grade placement and/or is frequently truant or suspended.

   d. **Child(ren) has severe/chronic educational problems**
   Child(ren) may or may not have IEP services, but continues to have educational difficulties. Child(ren) is currently on home instruction and/or is expelled from school.

10. Support Network

   a. **Strong support network**
   Household members have a strong, constructive support network. Active extended family (may be relatives and/or close friends) provide material resources, child care, supervision, role modeling, and/or emotional support.

   b. **Adequate support network**
   Household members use extended family, friends and the community to provide adequate support for guidance, access to child care, available transportation, etc.

   c. **Limited support network**
   Household members have a limited or negative support network, are isolated, and/or reluctant to use available support.

   d. **No support or destructive relationships**
   Household members have no support network and/or have destructive relationships with extended family and the community.

11. Family Culture and Heritage

   a. What language do you speak at home?

   b. What activities do you and your family enjoy together?

   c. What are your family traditions?

   d. In which cultural events does your family participate?

   e. Are there any special values or beliefs taught to you that are important to you?

   f. Does your family belong to any part of a faith community? In what way?

   g. Do you belong to any social organizations?

Addendum E

ALLEN COUNTY FAMILY AND CHILDREN FIRST COUNCIL

CASE SUMMARY FOR INTERSYSTEMS COMMITTEE

123 W. Spring St., Lima, OH 45801; 419/227-8590 x2785; FAX 419/227-227-0729; Amber.Martin@jfs.ohio.gov

Youth's name: D.O.B. Gender: Race:

Parent/guardian name: Address: ZIP

Parent Phone: ( )

Lead Case Manager: Agency: Phone: ( )

Family Advocate: Offered_____ Accepted___ Refused____ Assigned:_____ Phone: ( )_____

Date Name

Release of Information signed on: **Attends School at:**

*****Signatures of all team members must be on the back of this sheet*****

List family/team strengths:	**List family needs:**

Outcome Expectations: (Please specify the goals/ outcomes the Family Team has chosen)

Outcome categories: (Please select "Family Satisfaction" and at least one other category that applies to your goals

____Family Satisfaction____Family Preservation____Mental Health____Sobriety____School Success____Reduced Court involvement

Timeline for Outcome Achievement:

3 months	**6 months**	**9 months**	**12 months**

All Services included in the proposed plan:	Service Requested	Cost
	Total Requested:	

Plan requested to begin: ___/____/_____ Plan ends_____/____/____

Date **Date**

Today's Date_____/_____/_____ **Next Report to Intersystems on _____/_____/____**

Revised 7/28/2016

Addendum E

Allen County Family and Children First Council

Intersystems Committee

WRAPAROUND- CONFIDENTIALITY SIGNATURE PAGE

I understand and acknowledge that all client-specific information, proceedings, documents, records, discussions, opinions, findings, evaluations, and / or actions taken during today's meeting are CONFIDENTIAL. Except as required to carry our the duties of my employment, this information is not subject to disclosure pursuant to Ohio Revised Code Chapters 2305, 2317, 4757 and 5122. I further understand that any breach of this confidentiality is subject to disciplinary action, and possible legal action against me. These restrictions on disclosure and confidentiality are not time-limited, and are binding on me even after my involvement with this Wraparound team has ended.

The individuals signing below are members of the team and were a part of the meeting where this plan was proposed - either in person or by telephone – held on_____
Date

Printed Name	Role	Signature

Family Team Planning Worksheet

Family Name_____ **Date**_____

Family Team Leader_____

Ground Rules- How will this team conduct meetings together?

Family Strengths – What did you learn from completing the Family Strengths/ Needs Form?

Family Needs or Concerns: What needs or concerns were expressed as the Family Strengths/ Needs form was completed?

Family Goals:

Ongoing Action Strategies

What are we going to do to meet our goals?	Who is going to do what?	By When?

Ongoing Action Strategies

What are we going to do to meet our goals?	Who is going to do what?	By When?

AGREEMENT

Proposed Plan Developed on _____ **Plan Review Date**_____
Date

We agree to help this plan succeed to the best of our ability, and will work hard to meet the expectations outlined on the previous pages. We also agree that any one of us can pull the team together as needed/ is reasonable to work out unforeseen issues and to celebrate successes along the way.

Parent Signature:			Date
Parent Signature:			Date
Team Leader Signature:			Date
Child:	**Child:**	**Child:**	Date

Other Team Members Signatures	Role in Team	Date

Addendum E-1

Addendum F **Crisis Plan Guide/ Worksheet**

Allen County Family & Children First Council
Crisis / Safety Plan

When: _____(name) Does or thinks:

Then _____**is to :**

1)

2)

3)

4)

Then _____**is to :**

1)

2)

3)

4)

If this does not work, follow this phone tree:

1) **Call**_____

2) **Call**_____

3) **Call**_____

I assisted with the creation of this plan and agree with its contents:

Youth / Child Signature_____DATE_____

Parent/ Guardian Signature_____DATE_____

Team worker / Service Coordinator_____DATE_____

Addendum F **Crisis Plan Guide/ Worksheet**

Please use these questions to guide the development of the Crisis Plan on the reverse side of this page.

1) **Describe the crisis situation in detail, what does it look like?**

2) **Who is involved in the crisis?**

3) **Are there other activities going on in the environment that make the situation better or worse?**

4) **List the triggers that lead to the crisis**

5) **How often does the behavior or event occur? Daily? Weekly? Monthly?**

6) **When the event occurs, how intense is it? Very Intense----------not very**

7) **Why do you think the crisis/ event continues to occur?**

8) **After the event:**

- **What does the person do?**
- **How do they feel?**
- **What actions are taken?**
- **What does the person get out of the event or crisis?**
- **Are there any unmet needs?**
- **What are the responses or emotions of others present?**

8) **What have you tried in the past to avoid this kind of crisis/ event? How well does it work?**

Addendum G

Allen County Family and Children First Council

Intersystems Committee

CONFIDENTIALITY STATEMENT

Staff: Amber Martin_____ **DATE**_____

Barb Jauert_____

STATEMENT: I understand and acknowledge that all client-specific information, proceedings, documents, records, discussions, opinions, findings and / or actions taken during Intersystems Committee meeting today are confidential pursuant to Ohio Revised Code Chapters 2305, 2317,4757 and 5122. I further understand that any breach of this confidentiality is subject to disciplinary action, and possible legal action against me. These restrictions on disclosure and confidentiality are not time-limited, and are binding on me after my separation from work with the Allen County Family and Children First Council Intersystems Committee.

Name / Organization **Signature**

_____

Allen County Children Services - Co-Chair

_____

Juvenile Court

Jenn Slechter_____

Parent Mentor

Kristy Schweingruber_____

Allen County Board of DD

Brian Wischmeyer _____

Lima City Schools

Dan Norberg _____

Juvenile Court – Intervention Services

Susan Bryan / Lee Maroney_____

Allen County DJFS

Paula Hillard _____

Allen County Health Dept.

Melissa Meyer _____

Family Resource Center

Lisa Shafer _____

St. Rita's Medical Center

Audray Allen _____

Alternate - FRC

Open _____

Health Partners

Kelly Monroe _____

Mental Health Board

open_____

Coleman Behavior Health

Jennifer Goins_____

Alternate – Board of DD

Staci Nichols_____

Alternate – Children Services

Gwen Johns_____

Allen Co. ESC

Additional Members / GUESTS

Print Name	Signature	Representing
Print Name	Signature	Representing
Print Name	Signature	Representing
Print Name	Signature	Representing

Addendum H

Allen County Family and Children First Council
Intersystems Committee

Progress Report Form

YOUTH_____

Date of Plan___/___/___ **to** ___/___/___
Team involved with this family_____

_____

_____

Please attach a photocopy of the signature page from the Case Summary with information concerning the team meetings that have been held since this plan was authorized.

Stated Outcomes: Please check the goals you listed on your Case Summary. If goals have changed, please explain in notes below.
___**Family Satisfaction** (universal goal)
___**Family Preservation**___**Mental Health**___**Sobriety**___**School Success**___**Reduced Court Involvement**

Progress narrative:

Have outcomes been achieved in this period? ____Yes ____No

Is there a need to continue using this plan's strategy?____Yes ____No

Is there a need for continued services utilizing other strategies?_____Yes ___No

If the last answer is "Yes", please prepare a revised Case Summary with attention to the family needs, expected outcome, service plan and specific costs for services being requested.

Addendum I

INTERSYSTEMS COMMITTEE

Allen County Family and Children First Council

EXIT/CLOSED CASE FORM

Child's Name_____

Parent/Guardian _____

Lead Case Manager and Agency _____

The above named family is no longer in need of services from Allen County FCFC Intersystems Committee.
Reason:

_____ Emergency need requested was met.

_____ Service Plan outcomes and goals have been met.
Outcomes achieved: circle all that apply
___**Family Satisfaction** (universal goal)

___**Family Preservation**___**Mental Health**___**Sobriety**___**School Success**___**Reduced Court Involvement**

_____ Family/Child has moved from Allen County.

_____ Child is incarcerated.

_____ Family/child chooses to exit from multiple services.

_____ Transition to adult services: _____
Agency date

_____ Other _____

Comments:

Signed _____ Title _____

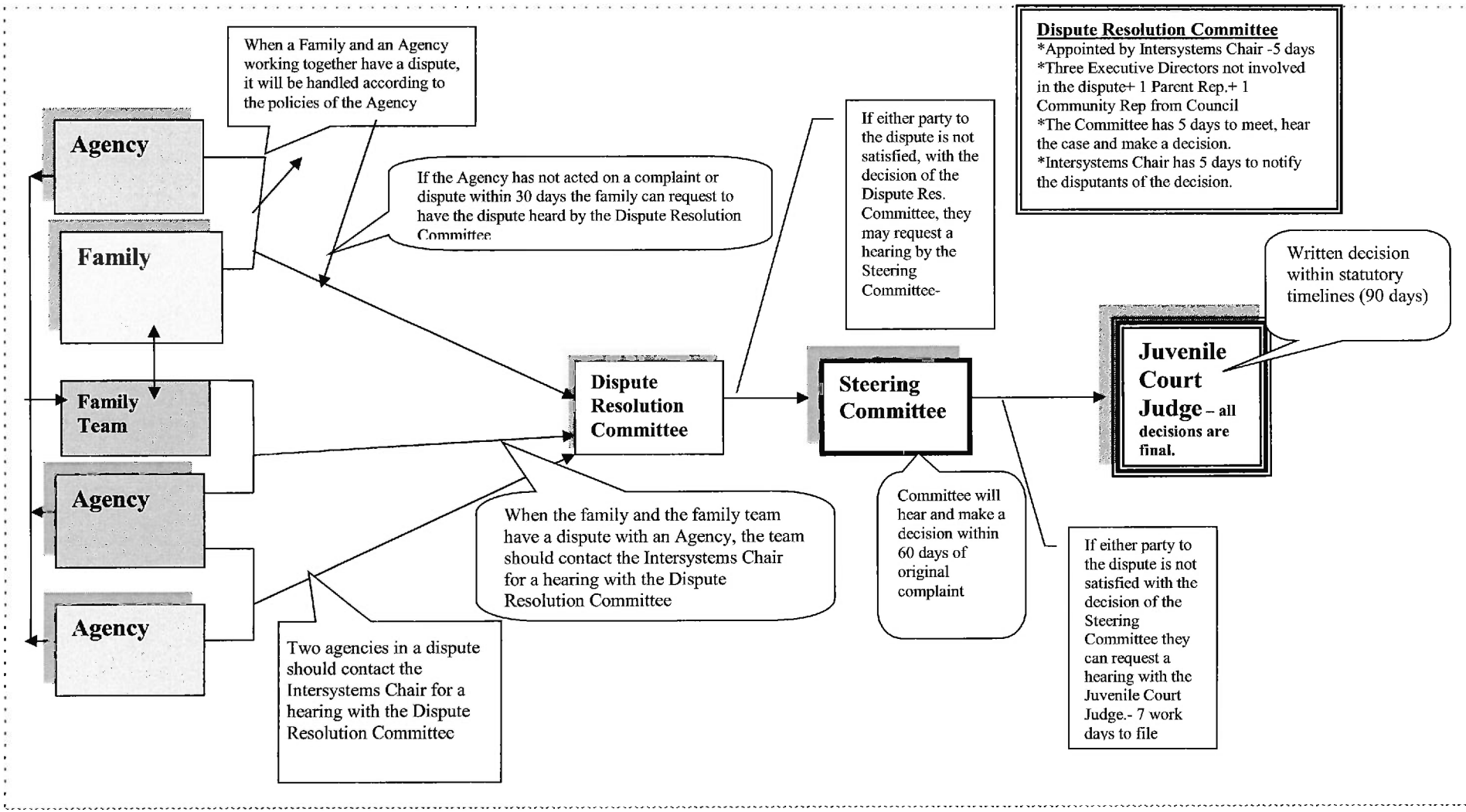
Date of exit _____Today's date _____

Please return this form to FCFC Coordinator, PO Box 1243, Lima, Ohio 45802

Addendum J

Allen County Family and Children First Council

Service Coordination Dispute Resolution Process



Addendum K

ALLEN COUNTY
Family and Children First Council

Intersystems Committee
P.O. Box 1243
Lima, Ohio 45802

Family-Selected Respite Provider Waiver of Liability

- I understand that by signing this waiver, all health and safety needs of my child or children in respite will be met by my selected respite provider.

Family-selected respite providers do not need to be certified or licensed, as they are the natural supports picked by the child's parent or guardian.

- I also understand my family shall save and hold the Allen County Family and Children First Council and/or the Intersystems Committee or its members and member-agencies harmless from any and all liability, costs, expenses, damages, injury or loss by reason of any wrongdoing, misconducts, want of care, skill or negligence by the family-selected respite provider.

Parent / Guardian Name:_____
Please print

Provider Name:_____
Please print

Child(ren)'s Name(s):_____
Please print

_____ _____
Parent/ Guardian's Signature Date Witness Signature Date