

**SUMMIT COUNTY FAMILY & CHILDREN FIRST
AMENDED SERVICE COORDINATION PLAN
12-1-05**

INTRODUCTION

Summit County submitted the first Service Coordination Plan in March 1996 to comply with Amended H.B. 117 and 274. The revised plan was submitted in October 2004 to comply with H.B. 57 which put greater emphasis on alleged and adjudicated unruly youth. This amended plan submitted in December 2005 is to bring Summit County Family & Children First Council in compliance with Amended Substitute House Bill 66.

DEFINITION OF SERVICE COORDINATION PLAN & SERVICE COORDINATION MECHANISM

Service Coordination Plan is the result of working in partnership with families to develop a holistic service plan that is family centered, individualized to meet the unique needs of the specific family and child, strength based and is sensitive to the family's cultural, ethnic and racial background. The Service Coordination Mechanism is the planning process that Summit County FCFC has developed working collaboratively with county agencies to develop coordination of services in the county and a process when a child is referred to the Council for assistance. Summit County has a strong history of collaboration efforts and has a rich mix of services and supports for families. Summit County FCFC has built upon this foundation and supports existing agencies service coordination efforts. FCFC's service coordination mechanism exists for families whose multiple needs cannot be met within the traditional agency systems. The same principles of service coordination are also utilized with FCFC's Help Me Grow Program.

APPROVAL OF SERVICE COORDINATION PLAN

The Service Coordination Plan had input and approval from the General Membership of FCFC at their October meeting as indicated by the enclosed minutes. The plan was written with collaborative input by the FCFC Family Committee and Cluster Review Council. All required participants, as required by ORC 121.37, were involved in the approval of the plan. (FCFC Brochure attached list members.) Family & Children First members will be notified via email of the completed approved Service Coordination Plan and the Transformation Plan. Both plans will also be posted at the Council's website www.fcfccouncil.org for review and input by all members prior to submission to the state. Input will be gathered for any future changes and/or additions. This plan and the Transformation Plan support and reflect the same vision and values.

MONITORING SERVICE COORDINATION PLAN

The Summit County Cluster for Youth will review the plan yearly as part of their yearly Retreat or more often if indicated. The Director of FCFC is responsible for initiating the review and distributing the plan and any amendments to the FCFC membership. A representative of the Family Committee also sits on the Review Council and will have input during the review process and on recommendations for improvement. Several methods will be utilized to determine if the county is meeting the goals of the service coordination plan. The Self Assessment Tool will be part of the continuous improvement

process and will be used to review, amend and or add articles to the plan in order to keep it current with best practice and as a tool to measure our success in meeting the goals of the plan. Since the Cluster Review Council approves Cluster Cases this will also afford the opportunity for monitoring how well the plan has been transferred into actual practice. The data maintained by the Cluster Coordinators and the evaluation data and reports received from the Cluster evaluator are all tools that will be utilized to assure compliance. FCFC will comply with state guidelines for the service coordination plan and tracking requirements.

Writing the plan is the initial step but integrating this into the community fabric of services both at the administrative and at the case level is an ongoing process. The plan will become part of the yearly Cross System Training Class that the Cluster sponsors. This year long training includes 30 participants from various agencies in the community that work with children and families. This exposure will assist in integrating the plan across systems in the community. Parents also will be invited to attend the trainings. It should be noted that that goals, guiding principles and vision of Summit County FCFC also applies to Help Me Grow. In addition, if new parents and/or agencies become members of FCFC their orientation packet will contain a copy of the Service Coordination Plan and the By Laws for FCFC.

COMMITMENTS TO CHILD WELL BEING/GUIDING PRINCIPLES OF THE SERVICE COORDINATION PLAN

Summit County is committed to meeting the mandates of Section 121.37 of the Ohio Revised Code in developing a holistic continuum of services available for children and families. This continuum should be inclusive and offer a balance of prevention, intervention and treatment. The Service Coordination Plan supports Ohio's Commitments to Child Well-Being:

- Expectant parents and newborns thrive
- Infants and toddlers thrive
- Children are ready for school
- Children and youth succeed in school
- Youth choose healthy behaviors
- Youth successfully transition into adulthood

Summit County FCFC has used the commitments to child well-being to develop policy, coordinate programs and resources and have identified outcomes to serve as a measure of progress in improving the lives of all children. Third party evaluation provides the Council with information for decision-making and assists in focusing on measurable outcomes and continuous program improvement. Since 1998 the Council has contracted with the University of Akron, Institute for Health and Social Policy, to provide evaluation of Help Me Grow and T.A.C.K.L.E., our teenage pregnancy prevention program, through PRC. Partnership for Success's identified goal of school success also has the measurable goal of raising the number of youth successfully passing the fourth grade proficiency test and has an outside evaluator. The Council also feels that evaluation should not only be externally required but must be internally driven and embraced. Through a partnership

that consists of dialogue and feedback between the University of Akron and our HMG grantees there has been an increase in the understanding of the value and importance of data collections and a commitment to the evaluation process. I have attached the FCFC Brochure as an example of how we have integrated these commitments.

Guiding Principles of Service Coordination

- Services should be child centered & family focused, timely and strength based;
- Increase family involvement at both the case and system level of planning and service;
- Families should have voice, access and ownership of their plan;
- Families decisions should drive decisions for services and support, where safety is not a concern;
- Support families and meet the needs of children in the least restrictive setting. Ideally, the setting would be in their own home and/or community if possible;
- Support early intervention with families;
- Services should be culturally, ethnic and race sensitive;
- Coordinate appropriate, effective and cost-efficient services for children and families;
- Encourage shared responsibility among systems serving children and families;
- Identify and support “best practice” models at the case and system level;
- Services should be evidence based and outcome oriented;
- Maximize and integrate community resources;
- Built on successful collaboratives such as Cluster, Help Me Grow, PFS; and,
- Locally driven.

FAMILY INVOLVEMENT

The Family Committee is a new committee that has partnered with Summit County FCFC. This committee has trained parents that will work with FCFC and the Cluster at both the system level and the case level. They will sit on all FCFC committees and will also serve as parent advocates for Cluster cases. The Chair of this Committee will also sit and represent the parents on the Executive Council of FCFC. FCFC has set aside administrative dollars and FAST dollars to help support, train and offer professional growth by assisting with the cost to attend trainings and stipends for attending meetings.

TARGET POPULATION

Summit County Service Coordination Mechanism is implemented and supported by the Summit County Cluster for Youth which serves youth through the age of eighteen (18) and/or twenty-one (21) when appropriate and if there is a need to transition youth into the adult system. These youth may be abused, neglected, dependent, unruly or at risk to be unruly, delinquent, youth with behavioral health issues and youth whose families are voluntarily seeking services. Summit County chooses to define the unruly population by the legal definition of status offense, “Any child who has violated a law applicable only to a child, such as truancy, curfew and runaway is considered to be a status offender”. Also included in this category, are “unruly/incorrigible cases, which are defined as any child who does not submit himself to the reasonable control of this/her parents, teachers, guardian or custodian by reason of being wayward or habitually disobedient”. These

youth may be alleged unruly, adjudicated unruly or those at risk of becoming unruly. I have attached the Cluster Data Report for 2004 to illustrate data collected on youth.

The Cluster Service Coordination Mechanism does not usurp community agencies of their primary responsibility, mandates or expertise. The Cluster builds on the community agencies expertise but offers a cross-system expertise of how to resolve cross agency disputes, offers additional funding avenues, offers a process to build consensus between systems and between systems and parents and assist in identifying services and/or placement options in the least restrictive setting with parental input.

The **Help Me Grow Advisory Committee** assumes responsibility and oversight for service coordination for those children prenatal through the age of two who are enrolled in Help Me Grow. The services provided by Help Me Grow are consistent with the laws and rules adopted by the Department of Health under section 3701.61 of the Revised Code and federal regulations. The Summit County Cluster and the Help Me Grow Advisory Committee are both committees of FCFC and report back to the General Membership and the Executive Committee of FCFC. HMG also has an outside evaluator. One part of the evaluation is both a mail in satisfaction survey and a phone survey in order to gather a broader spectrum of responses.

SUMMIT COUNTY CLUSTER FOR YOUTH (SCY)

The Summit County Cluster for Youth (SCY) is the cornerstone for the assessment and decision making on multi-need youth. A youth, birth through 21 years of age, who exhibits more than one emotional, physical, or developmental difficulty and thus require the services of more than one system, may be referred, to the Cluster by an agency or the parent. A referral should be made to SCY only when service providers are unable to adequately meet the needs of the child and/or the family either programmatically, financially or if coordination of services is a problem. The Cluster operates with three councils: Administrative, Review and an Executive Council.

Financially, the Cluster may access:

- FAST dollars (In FY06 ADM Board has allocated all FAST dollars to Cluster)
- Shared Pool (Contributors: CSB, MR/DD, JC & Child Guidance & Family Solutions)
- Local agency dollars of the four placing agencies: CSB, Juvenile Court, MR/DD and Child Guidance & Family Solutions (mental health). The agency representatives have the knowledge and authority to allocate their agency's placement dollars.

Programmatically, the Cluster will strive to:

- Implement the "wraparound process" on individual cases
- Identify and resolve system barriers
- Identify gaps in service
- Develop programs and projects to enhance services

Coordination of Services, the Cluster will:

- Develop joint service coordination plans
- Delineate services, responsibility and cost
- Designate a Lead Case Manager
- Monitor delivery of service

REFERRAL PROCESS

Each of the major child and family serving agencies in Summit County has an appointed representative to the Administrative and/or the Review Council of SCY. A referral should first be discussed with this representative to assure that the agency representative is adequately informed about the case. The Judge and magistrates have also referred cases to Cluster via the Journal Entry. If a parent is not involved with one of the mandated agencies or if a private agency is making a referral, they should contact one of the two Cluster Coordinators. The parent may also contact the Coordinator if they are receiving case management services with a community agency but do not feel that their needs are being met. The Coordinators are paid through the Shared Pool and are FCFC staff. Their responsibility is to facilitate a wraparound planning meeting in order to develop a collaborative family driven service coordination plan. Cluster has worked hard to assure that a parent/guardian is always included in the staffing and to demonstrate its belief that families should not have to give up custody to obtain services for their children. Data for 2002-2004 documented that consistently 66% - 69% of youth referred to Cluster were in their parent's custody. The remaining percent were in Children Services custody due to abuse and/or neglect.

ASSESSMENT

The Cluster, at this time, does not have a specific strength based assessment tool but rather looks at the gathering of a social history as a process. The concept of developing a community wide assessment document that all agencies would accept that would contain the needed data across systems but allow individual agencies to add other information as mandated by their system is being discussed as part of the Blueprint Transformation Plan. The process now used is that the case manager completes the Initial Referral Packet (Parent Advocate may also assist) and has the parent/guardian sign the Release of Information to inform and protect the parent/guardian confidentiality. The release will document what information is requested and how that information will be used. Each participating agency has a process and procedure in place to assure confidentiality and to meet the requirements of HIPPA. The Cluster staff and Director are employees of the Summit County Health Department and follow their HIPPA guidelines. The completed packet should be approved by the agency representative and sent to the Cluster Coordinator(s) who will schedule the Pre Cluster Staffing. Copies of the Referral Form and Release of Information are attached. At a minimum, the referral packet information includes:

- Date of the referral
- Strengths of the child & family
- Brief description of the problems
- Child/family information by life domains
- What works and what hasn't worked

- List of names and contact information for both formal and informal people who should be invited to the staffing

PARTICIPANTS

Participants will include those people who have a personal or professional relationship with the child and family and are approved by the family as participants. If an agency has a legally mandated requirement to provide a specific service that agency will be invited to attend. The family may request either informal or formal support people that they identify with, including relatives or friends whom they feel are important in their lives. A parent advocate will also be offered to the parent. The parent advocate and/or case manager may collect the information on the child and families strengths and also information from agency providers. The Parent Advocates will also be doing this for the FAST cases. The Cluster looks at the family/professional staffing as a process and the relationship between family and child to the case manager and/or parent advocate will dictate who collects assessment information and how quickly it will be completed.

Participants may also include people not directly involved with the child. For example, a parent is seeing a therapist; this person, although not directly involved with the child, is still an important person, if the family agrees to include in the staffing as we consider the family/child holistically. This may also include professionals, not presently involved, who may be potential service providers. One of the goals for 2006 is to address how to appropriately involve the identified youth in the case planning process. This does occur sporadically but the Cluster wants to develop a process that will effectively involve all youth at some level in the decision making process.

The case manager should discuss the referral with the parent and child (if age appropriate) and complete the referral packet with their input. The Parent Advocate may also assist in gathering family information. They should note any sensitive issues that the parent/child does not want to be included in the meeting or would like presented in a special manner. The case manager and/or parent advocate should discuss these issues with the Cluster Coordinator prior the staffing. The case manager should also attach with the appropriate parent release any other pertinent information and/or tests such as psychological, recent IEP if needed, etc.

CLUSTER STAFFING

The Cluster Coordinator will schedule a date, time and location that are convenient for the family and invite all agency and parent representatives including a school representative. The school representative may be the Director of Special Education, the school psychologist, the teacher, etc. whoever is the most appropriate. Cluster staffings are normally held within two weeks of the referral and/or prior to an out-of-home placement. The Coordinators are also flexible and will schedule and/or attend a staffing on short notice if at all possible. If an emergency placement has occurred prior to the staffing, a staffing will be held within ten days after the placement. Emergencies that have arisen are primary emergency psychiatric placements.

The Cluster and FCFC believe in the principle that the family should have “access, voice and ownership” in the development and implementation of services that impact their

lives. The addition of a Family Committee to FCFC that has dedicated trained parents who are willing to serve as parent advocates for both Cluster and FAST cases will enable FCFC to more fully integrate this value into practice. The Parent Advocate will contact the parent to see if they would like them to attend the staffing and to explain their role. Since this is new, the Cluster will monitor and evaluate over the next year how well the process has worked and make recommendations if needed to improve the process.

The service coordination team members will be identified and involved in the initial staffing and any subsequent staffing. New team members may be added and some initial team members may drop out if they are no longer involved.

The Cluster Coordinator will schedule and facilitate the meeting utilizing a strength-based wraparound planning process. The staffing will last from one hour to one and half hours. Both Coordinators have attended training utilizing the John Vandenberg Wraparound process. The Cluster's goal for 2006 is to demonstrate fidelity to the model and to secure additional training for the Coordinators but also to train other facilitators in the child placing agencies. Secondly, the Cluster is discussing a general training for the community agencies to understand and gain support for this model. The goal of the staffing is to look holistically at what the family wants and needs. To assist in gathering and discussing pertinent information the Cluster has identified nine primary life domains on the referral packet. These domains are: Family, Residence, Education/Vocational, Emotional/Psychological, Social/Recreational, Medical, Safety, Legal, and Religion to encourage and remind case managers to look holistically at the family and to consider not only the identified child but the needs and desires of the parent(s) and siblings. By including parent/guardian and child in the gathering of information and in decision making about services assists in assuring that services are culturally sensitive and responsive to their strengths and identified needs.

WHAT THE STAFFING SHOULD BE

- Collaborative
- Family/child driven
- Creative
- Strength based
- Holistic
- Culturally sensitive

Summit County strives to be culturally sensitive. As the Cluster develops more expertise in the wraparound model the Strengths, Culture and Challenges Discovery assessment piece will contribute to improvement in this area. It is also felt that since the family is involved at each step and that information is often gathered at the parent/guardian's home that this affords an opportunity to be culturally sensitive. If there are cases where cultural sensitivity is explicitly needed, we are fortunate to have the International Institute which has social workers with expertise in languages and cultures that we can contact for guidance and/or if a translator is needed.

WHAT THE STAFFING SHOULD NOT BE

- A discussion of blame for a provider, child, parent or between systems
- Agency/system driven
- Pathology focused

STRUCTURE OF THE STAFFING/DEVELOPMENT OF SERVICE COORDINATION PLAN

- Introduction of the participants who will make up the Family Service Coordination Plan Team
- Brief description of Cluster
- Purpose of staffing
- Review of family/child's historical time line
- Discussion of strengths and barriers
- Discussion of what works and what hasn't worked
- Development of an **individual family service coordination plan** based on the wraparound model including life domains. The plan should be built on what the family and child want and need and should be strength based. The plan should discuss and include:
 - 1) Identified services to meet needs of child and, if indicated, services for parent(s) and siblings.*
 - 2) Services will be in response to the strengths, needs, family culture, race and ethnic group and provided in the least restrictive placement.
 - 3) The plan should state specific goals, time frames for accomplishing goals, and designate the person/agency that is responsible for implementation. What agency/person is assigned a specific activity is a group decision, led by the Cluster Coordinator. The exception would be if an agency has a legally mandated requirement to provide certain services. In an effort to have parent/guardian and youth assume ownership of a plan they and/or their informal support person(s) may also be assigned a responsibility.
 - 4) The identified Lead Case Manager, who is approved by the family, is the designated person to track progress. The Lead Case Manager should notify the Cluster Coordinator if there are any changes or if the need for additional services and or additional staffings are needed. The "parent" may also contact the Cluster Coordinator if they have questions or concerns.
 - 5) Subsequent staffings may be requested by the parent, coordinator and/or involved agencies at any time. Planned staffings are set when identified services terminate, new services need to be added and or at any transition period.
 - 6) An important part of the service plan is a short term crisis and safety plan. This type of planning is especially important when the goal is to maintain the youth in their home and/or community.
 - 7) The Coordinator types and sends to all participants a copy of the recommendations and crisis/safety plan. The participants are encouraged to incorporate these recommendations in their system approved case plan in order to assure consistency and reduce fragmentation of the services for the family.
 - 8) Cluster Coordinators present the case and recommendations to the Administrative Council for approval.

9) Funding decisions are not made at this level but referred to the Administrative Council for a decision. This policy was made for two reasons: 1) Funding issues often derail creative thinking and 2) the Administrative Cluster has the authority to make these decisions.

*If identified services or supports are not available, the plan will state how alternative services were identified. Any gaps in service availability will be reported to the Review Council for discussion as to how to address these gaps in services.

The goal is to provide services in the least intensive or intrusive manner; therefore, there are many cases that are resolved at this initial planning level through the expertise of the Coordinators in working out service coordination problems, misunderstanding between agencies and with their knowledge of community resources. These cases are documented but they do not become “cluster cases”. The Coordinators also staff and monitor “FAST” cases. These cases may or may not become “cluster cases” depending on the need for on going services and/or service coordination. One of the Cluster’s goals with the utilization of FAST dollars is to begin to move the target population of Cluster to represent a greater percentage of youth who are identified earlier and to provide coordinated community based preventive services to youth and families.

The unruly and/or alleged unruly youth referred to the Cluster and or FAST follow the same procedures as the above. The Cluster Coordinators are knowledgeable about preventive services in the community especially those who deal with unruly youth. One of these resources is our Youth Divisions. The Youth Divisions are housed in a community’s police department and have an officer that works with the social workers to defer unruly youth from entering the Juvenile Justice System. Services, in addition to case management, are varied and may include: respite, parent education, mentoring for the youth. If the child and family successfully follow through with the program the charges are dropped. There are also other programs/services that may be used as wraparound services for example, youth advocates, Safe Landing which is a shelter facility, Truancy Task Force, mediation, New Beginnings, etc. There are also two specific programs that work with the deep end youth whose goal is to maintain them in the community. These programs are Crossroads (Juvenile Drug/Mental Health Court) and ICT (Integrated Co-Occurring Treatment). The latter is a unique home based program between Juvenile Court and Mental Health. Therapists have dual expertise in both mental health and substance abuse. The Cluster Coordinators are knowledgeable about these diversion programs and their staff is included in the Cross System Training Program. The Cluster has both referred youth to these programs and has received referrals from these programs.

ADMINISTRATIVE COUNCIL

- Meets monthly
- Reviews and approves the coordinated Joint Service Coordination Plan & recommendations from the parent/professional team
- Discusses and reach consensus on funding for placement and/or services
- Monitors the Shared Pool

- Identifies Lead Case Manager of the case
- Monitors service delivery
- Recommends services to transition active SCY youth to the adult systems

The Administrative Cluster is made up of the Director of FCFC and an agency representative from the four placing agencies: CSB, Juvenile Court, MR/DD and Child Guidance & Family Solutions (mental health). These representatives have the authority to allocate their agency's placement funds and recommend how the Shared Pool will be utilized.

REVIEW COUNCIL

- Meets monthly
- Reviews new and ongoing Cluster cases as needed
- Attends the annual Cluster Retreat Day to:
 1. Review year end reports and data
 2. Review trends in cases in order to facilitate planning efforts and program development
 3. Review the Service Coordination Plan
 4. Develop and evaluate annual goals and outcomes for SCY
 5. Identify and plan for addressing gaps in service

EXECUTIVE COUNCIL

- Meets quarterly
- Reviews annual Cluster data and recommendation from Review Council
- Reviews Shared Pool expenditures
- If indicated and/or needed would review and make decisions on case responsibilities and/or funding
- Assures resolution of case disputes through the Dispute Resolution Process
- May direct Cluster to strategize and develop recommendations to resolve a case and/or system issue
- Review annual goals of SCY

LEAD CASE MANAGEMENT RESPONSIBILITIES

Summit County recognizes the importance of the "case manager" whether defined as a probation officer, social worker, service coordinator, community support person, etc. This person is the vital link between the family and the service delivery system. The "case managers" ability to engage and empower the family in understanding their choices and navigating the systems is crucial as the community moves from an agency drive system to a family driven system. The lead case manager is assigned by the Administrative Cluster with approval from the parent. The following are some of the responsibilities:

- Coordinate and monitor the implantation of the Service Coordination Plan
- Completes all necessary paper work if child is placed
- Tracks progress of the plan

- Notifies the Cluster Coordinator if changes and/or problems arise in the implementation of the plan
- Requests subsequent team meetings, if indicated, and at points of transition
- Advocates for the child and family

CLUSTER COORDINATORS

Summit County has two coordinators who work for the Cluster and whose salaries are paid by the Summit County Juvenile Court, Children Services, MR/DD and Child Guidance & Family Solutions. They are supervised by the Director of FCFC and are employees and housed at FCFC's Administrative Agency, Summit County Health Department. The coordinators have experience and knowledge about systems, services and programs in the community. They are a valuable resource at both the case and system level. The responsibilities of the Coordinator(s) are varied.

Program Duties

- Encourage and facilitate parent/professional staffing to determine the needs and appropriate services for the children and families referred to SCY;
- Help to coordinate the development and implementation of service coordination plans with regular review, timely identification of problems and efforts towards their resolution;
- Tracks progress and outcomes of the service coordination plan;
- Oversee the coordination of case management responsibilities for multi-need youth across systems and help to resolve difficulties;
- Assist in transition planning of youth back to the community and/or into the adult systems;
- Cluster liaison with FACTT, an education/mental health collaborative;
- Monitor and develop wraparound services;
- Work with PASSS committee of CSB on adoption referrals to Cluster;
- Attend court hearings; and
- Facilitate and schedule FAST staffings.

Administrative Support

- Maintain accurate up to date records on the SCY monthly report;
- Assist in compiling the annual report to SCY;
- Review bills charged to the Shared Pool;
- Monitor FAST funds.

Community Liaison Responsibilities

- Participate and assist in monitoring the Preferred Provider Network;
- Educate child serving organizations and the broader community about SCY;
- Participate in the Cross System yearly training program.

EVALUATION

Evaluation is a process of systematically determining and showing evidence of expected and unexpected outcomes and impacts of the intervention effort on children and families,

service providers and the community. Evaluation assures that children and families actually receive needed services, documents gaps in service and leads to strategies for improvement. Monitoring is closely tied with evaluation. The Cluster has always collected data to meet these goals at both the case and system level but have not had a systematic data system set up to collect the data and then to develop reports in order to understand our impact and make system recommendations if indicated. This year the Cluster has hired an Evaluator with the goal: "To analyze data for the Summit County Cluster and report findings in a timely manner. Reports will add to program administrator's knowledge base regarding outcomes and effectiveness associated with the program and with the effectiveness of the service coordination process and individual outcomes for children and families". The data collected will include, but may not be limited to: 1) demographic description of the population served; 2) results of the standardized tests such as Ohio scales and the Student Life Satisfaction; 3) type, number, cost and patterns regarding placement of service; 4) results/outcomes of placement; 5) length of stay in placement; 6) cost; 7) continuity of care after discharge. The data is being collected for Cluster youth placed effective January 1, 2005. This year data will not be as complete as subsequent data but it will allow us time to implement and make any necessary changes to have it fully operational and effective January 1, 2006. The Cluster Data Report for 2004 is included in the appendix to illustrate the information we have collected. Future reports will be more extensive. Summit gives their assurance that data would be shared with the state for the purpose of evaluation if requested.

On going monitoring of Cluster's individual youth's service coordination plans are done monthly. The Cluster Coordinators give written monthly updates to the Director of FCFC and to members of the Administrative Cluster. The Cluster Administrators check with their case managers to get their updates prior to the monthly meeting of the FCFC Director and the Administrative Cluster. Cases may be on the agenda due to a concern in regards to services and/or placement. The Administrator Cluster may be able to resolve these issues and/or may direct the Cluster Coordinators to schedule a parent/professional service coordination meeting.

The Cluster has also used individual cases scenarios to illustrate how well or how problematic some service coordination plans have been implemented. These illustrations have been shared with the Cluster Executives, Review Council and Cluster Cross System Training as a learning tool. Example of an Executive Cluster Report is included in the Attachments. This report also illustrates how individual cases are used to highlight issues.

This past year we also surveyed parents and professionals as to how they felt about their involvement and the service coordination recommendations made at the staffing. The response from both parents and professionals was very positive. Copies of the survey are included in the Attachment Section.

All evaluation results are shared with the Review and Executive Council of Cluster and also the General Membership of FCFC. Results of evaluation will be utilized to improve our service coordination mechanism and to improve services to family and children.

CLUSTER RELATED PROJECTS TO MEET PUBLIC AWARENESS/SOCIAL MARKETING/EVALUATION

As a result of implementing and evaluating our Cluster model three related projects have been developed to meet what we identified as gaps in service delivery.

Cross-System Training Program was initiated in 1995. The Council feels strongly that education of "line staff" is crucial in building a community shared vision and to change service delivery from a fragmented agency driven system to a holistic family driven system of care. The training is yearlong and consists of six one-day training sessions. Participants must commit to attend all sessions plus one summer field trip. In addition, they have to attend one of the following: Cluster Review Council, FCFC General Membership meeting or a Parent/Professional staffing (if the parent permits). The Cluster & Service Coordination Process is part of the training. Participants receive CEU's. A parent, the chair of the Peers Project, is part of the 2005 Class. Parent advocates of this committee will also be offered an opportunity to participate in future trainings. This will be one way to educate parents about the service coordination process in the county. One of the training sessions is devoted to parent/professional partnerships and two of the most popular activities are listening to a panel of parents and a panel of youth telling their stories. This is an opportunity for the parents and children to give back to the community and it sensitizes the professional participants to how it feels to be a recipient of services. Summit County Juvenile Court, Children Services, MRDD and Child Guidance & Family Solutions pay for the training. The Cluster Coordinators also do "Cluster" training for new staff at the placing agencies and the schools.

The second collaborative project is the development of our **Preferred Provider Network**, which began in 1996. A Cluster Sub Committee develops a Request for Proposals, which is sent to therapeutic foster homes, group homes and residential centers in the state. The committee evaluates the proposals and contracts with providers for two years. The goal is to have available the best and most appropriate match of services to meet the needs of the child and the family. Secondly, to be fiscally responsible, the Cluster must purchase high quality services at the best rate. Built into the proposals are measurable outcomes to evaluate service and progress at the individual case level but also at the system level.

The third collaborative project was the development in 1998 through Family Stability dollars the **FACTT (Family Academic Collaborative Treatment Team)** program whose goal is to help children unable to function in a traditional school setting because of their level of emotional and behavioral impairment. These children may be at risk of removal from a traditional school setting and/or returning from a residential placement. This program also collects data and has outcomes both at the individual level and at the system level, which are monitored and reported back to the Cluster. This program has strengthened the collaboration between the schools and the Council.

RESOURCES/FISCAL STRATEGIES

Summit County has a history of Shared Funding since 1992. In 2005, the Cluster agencies pooled \$364,600 to be used for children and family services. This money is

contributed by the four placing agencies: Summit County Juvenile Court, MRDD, Children Services and Child Guidance & Family Solutions. The money is kept in a separate account at the Summit County Health Department, the Administrative/Fiscal Agent of FCFC. This money is used for placement cost, wraparound services and to pay the salaries of the two Cluster Coordinators. The Cluster's goal is to not only serve the deep-end youth but to become more preventive and to identify and serve youth earlier when wraparound efforts may be more successful. To this end, a portion of the Shared Pool is designated for wraparound services. The Executives have shown confidence, trust, and flexibility in how this money is used and have truly made it non-categorical. In addition to the Shared Pool, there were many individual Cluster cases where mutual funding agreements were made between two or more agencies.

Summit County is committed to maximize all sources of revenue through a combination of fiscal strategies designed to make the best use of limited dollars. These strategies in addition to the Shared Pool will include maximizing federal entitlements, PASSS funds, SSI, Social Security, Medicaid, Insurance, PRC funds, FAST dollars, and parental support when they have the ability to pay. A portion of FAST funds are also used to pay for Parent Advocates. A very reasonable sliding scale has been developed by the Cluster for parental support. The Cluster is using FAST dollars to address the non-behavioral health needs of youth. FAST and ABC (Access to Better Care) funds has given the Council an opportunity to redefine the target population of Cluster to not only include deep end youth but also to begin to focus on preventive/intervention services for children with behavioral health needs and youth without behavioral health needs across the developmental spectrum and across many settings where children receive services. Summit County Juvenile Court has taken the lead in inviting and facilitating a community planning group to discuss the need to develop a "developmental court" to address the needs of youth who are either mentally retarded and/or developmentally disabled.

DISPUTE RESOLUTION

SUMMIT COUNTY CLUSTER FOR YOUTH

The Cluster's dispute resolution process has seldom been used which is a tribute to the sense of collaboration, trust and consensus building that exists. The existence of a flexible Shared Pool has also been a major contributor to the lack of dispute.

Philosophically the belief is that problem solving through consensus building is the most successful and beneficial approach to dispute resolution. Due to this belief, team building and problem solving are components of the Cross-System Training Program. The Cluster and Family & Children First Council will encourage and support this principle through all steps of the dispute resolution process.

The Cluster and FCFC will adhere to all applicable laws/regulations in regards to confidentiality and will comply with all applicable HIPPA regulations concerning the use and disclosure of protected health information.

Summit County also recognizes that community agencies may have in place a formalized dispute resolution process for their employees and their consumers. Many agencies, including the Mental Health Association, also have ombudsmen to listen to parents concerns in regards to service/treatment. This process does not replace other rights or procedures that parents or custodians may have under other sections of the Ohio Revised Code. The utilization of these existing structures will be encouraged and supported as first steps. The Cluster Coordinator(s) will be notified of the outcome of the complaint. This process does not override any decision made by the juvenile court judge regarding out of home placement, long-term placement, or emergency out-of-home placement.

The parent is informed of the Dispute Process at the conclusion of the initial Service Coordination Planning Meeting. Parents are included in all aspects of the dispute process, if they choose. Service agencies are also given a copy of the Dispute Process at this time.

SCY will resolve non-emergency disputes within 60 days or less of the filing of a formal complaint. The parties may, by mutual agreement, waive the time limits. Any waiver so agreed upon shall be in writing and signed by the FCFC Director and all parties pertaining to the dispute. All decisions throughout the dispute process must be in writing. Emergency situations would have to demonstrate why a time line of 60 days is detrimental to the child, family or agency since services would continue during the dispute process. It is hard to define an emergency situation but in general it would have to demonstrate why the continuation of present services or lack of appropriate services is placing the child in danger either physically and/or emotionally. In these situations the time line would be reduced to two weeks or less.

The following dispute resolution process between child/family to agency and child/family to their service coordination plan and agency to agency will apply specifically to Cluster. Non-emergency cases will be resolved within sixty (60) days or less.

1. If there is a significant and unresolved conflict regarding any aspect of the Service Coordination Plan which may include, but is not limited to, identified services; funding of those services; or the lead case manager role by either the parent or any agency member of the team, and/or a dispute between agencies every attempt should be made to resolve the conflict within the parent/professional service coordination team.
2. If the parent/professional team cannot resolve the conflict, a member of the agency team or a family member may file a formal statement of dispute. The statement and any supporting evidence should be sent to the Cluster Coordinator who will present the request for dispute resolution to the Administrative Council. The date the complaint is received becomes the official date and begins the time line for dispute resolution. The Administrative Council will review all relevant information and render a written decision within one week.
3. If the Administrative Council cannot resolve the conflict and/or the person/agency making the complaint is not satisfied with the decision the complaint will be

- referred to the Review Council. The Review Council will review all relevant information and render a decision within two weeks of the referral from the Administrative Council.
4. If the Review Council cannot resolve the conflict and/or the person or agency making the complaint is not satisfied the complaint will be referred to the Executive Council. The Executive Council will review all relevant information, may ask for additional information and/or testimony, and will render a decision within two weeks. The Executive decision will be put in writing along with supporting documentation if applicable. The entire process will be resolved within the sixty day timeline.
 5. If resolution cannot be resolved through this Dispute Process the final arbitrator would be the Juvenile Court Judge. The request for a court hearing must be filed within 7 days after the failed dispute resolution by the disputing party. The Cluster Coordinator(s) will assist in preparing all pertinent information for the court. The court shall hold the hearing as soon as possible, but not later than ninety (90) days after the motion or complaint is filed. The court may conduct the hearing as part of the adjudicatory or dispositional hearing concerning the child, if appropriate, and shall provide notices as required for these hearings. In cases in which the hearing is not part of the adjudicatory or dispositional hearing the hearing shall be limited to a determination of which agencies are to provide services or funding for services of a child. The court shall issue an order directing one or more agencies represented on the county council to provide services or funding for services to the child. The order includes a plan of care governing the manner in which the services or funding are to be provided. The court shall base the plan of care on the family service coordination plan. An agency required by the order to provide services or funding shall be a party to any juvenile court proceeding concerning the child. The court may require an agency to provide services or funding for a child only if the child's condition or needs qualify the child for services under the laws governing the agency. The decision of the court is final and binding.
 6. The Cluster Coordinator will be responsible for conveying the written decision at any step in the dispute resolution process to all pertinent bodies, which will include but is not limited to, the family, agency team members, Cluster Review & Executive Council and Family & Children First Council.
 7. All filed disputes will be tracked and reviewed at the yearly Cluster Retreat when the service coordination plan is reviewed.
 8. The Cluster may consult with the Ohio Family & Children First Council if it is a unique case where there are specific issues with funding, locating an appropriate service and/or if administrative rules prohibit a solution.

This Dispute Resolution Process is for all applicable Cluster complaints. Ineligible complaints may involve eligibility for programs/services which should be channeled directly to the Due Process procedures of the agency(s) involved. Also disputes involving an Individual Educational Plan (IEP) covered under O.R.C. Chapter 3323 and Individuals with Disabilities Educational Act (IDEA) are to be channeled through the appropriate Local Educational Authority (LEA). If the family or agency representative disagrees at an initial service coordination meeting prior to signing the service coordination plan and becoming a cluster case there is no requirement to comply with this dispute process. Once a plan has been instituted this dispute process becomes effective. Services and/or funding during the dispute resolution process would continue. If an agency that provides services or funds during the local dispute resolution process or court proceedings is determined through the process or proceedings 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.

In cases that involve Shared Funding a contract is signed by the funding agencies and approved for a specific period of time and an amount with the opportunity to request additional funding if the need exists. Therefore, a request for continuation of funding has to be made 30-45 days prior to termination of the agreement. If the funding agreement terminates without an official request to continue funding there is no obligation to extend funding beyond the original approval dates nor is this subject to the dispute process. This would not affect other services such as case management, etc.

DISPUTE RESOLUTION – HELP ME GROW

Services coordination mechanism for HMG is consistent with rules adopted by the Department of Health under section 3701.61 of the Revised Code. The Help Me Grow Advisory Committee, is a standing committee of FCFC, and meets the requirements for mandated members and is responsible for oversight of Help Me Grow implementation in Summit County.

HELP ME GROW –DISPUTE RESOLUTION

Summit County Family & Children First Council assures:

- All parents are informed that participation in the Help Me Grow program is voluntary.
- Help Me Grow families receive service coordination as defined in ODH administrative rules.
- Parents, service providers and FCFC members are informed and understand their rights and the process for resolving formal disputes about their child's and family's services or complaints about Summit County Help Me Grow system. All written formal complaints shall be sent to the Summit County HMG Project Director.
- If a complaint is received, the complainant will be provided with a copy of the procedural safeguards applicable to early intervention and/or dispute policy of FCFC for at risk youth which explain the options available for dispute resolution.

This will include the address where to mail the complaint for Summit County FCFC, 1100 Graham Road Circle, Stow, Ohio 44224 and/or ODH.

- Parties requesting dispute resolution will receive a written response to their complaint within 30 days.
- Documentation is maintained about all complaints within the HMG system and any actions taken as a result of the complaint.
- All complaints and resolutions of complaints will be reviewed by Executive Council of FCFC and the Help Me Grow Advisory Committee to determine if changes and/or education are needed to improve the county's HMG System.
- FCFC Director will notify FCFC Chair, Executive Committee of FCFC and the HMG Advisory of complaints and actions taken.
- During the dispute resolution, children will continue to receive HMG services on the Individual Family Service Plan (IFSP).
- Parents of children eligible for HMG services shall be regularly informed of their rights throughout the time the child is receiving HMG services.
- Parents are informed that children with a developmental delay or disability have special procedural safeguards/Parent's Right under the federal law called Individual with Disabilities Education Act (IDEA).
- Compliance with all applicable confidentiality laws/regulations and shall comply with all applicable HIPPA regulations concerning the use and disclosure of protected health information.

The Ohio Department of Health (ODH) assures:

- Bureau of Early Intervention at the ODH will make available to Summit County FCFC procedural safeguards/parent's rights brochures for distribution to assure that consistent and accurate information is provided to families.
- There is a process for complaint resolution that includes mediation and civil hearing procedures for parents of children birth to three who have a developmental delay or diagnosed disability.

Dispute Resolution Process for HMG At Risk Youth

1. Summit County recognizes that many agencies providing Help Me Grow services have in place a formalized resolution process for their employees and their consumers. The agency shall notify the parent in a timely manner of their agency procedure and schedule a date for the parent and agency personnel to discuss the complaint. The utilization of these existing structures will be encouraged and supported as the first step in the resolution process if the complaint is applicable to that specific agency. The Help Me Grow Project Director shall be notified in writing (via electronic or U.S. mail or facsimile) and shall provide FCFC with a written report detailing the complaint and the resolution of the complaint.
2. If the parent or agency's complaint cannot be resolved at the agency level or is not appropriate the parent and/or agency may file a written formal statement with the Summit County HMG Project Director. Upon receipt of the complaint FCFC shall assure that the individual and/or agency filing a complaint has a

copy of the FCFC's Dispute Policy and explained the options available for resolution.

3. The written complaint will be reviewed and investigated by the HMG Project Director and the FCFC Director. The investigation of the complaint may include: 1) on site investigation; 2) interview complainant and give the party an opportunity to submit additional information, either orally or in writing; 3) interview relevant providers and give providers an opportunity to submit additional information, either orally or in writing; and, 4) review all relevant information. Based on the investigation a resolution will be sought with the dispute party.
4. If an agreeable resolution is not reached the initial complaint including all investigative material will be heard by the Help Me Grow Advisory Committee and a decision rendered.
5. If complaint cannot be resolved at this level it will be presented by the Director of FCFC to the FCFC Chair and Executive Committee of FCFC for final resolution. The Executive Council will review all relevant information, may ask for additional information and/or testimony, and will render a decision. The written Executive decision along with supporting evidence will be sent to the parent and/or agency within 30 days of the initial receipt. The written decision will address each allegation and include finding of facts and conclusions and the reason for the FCFC's decision. If corrective action is requested, the agency and/or person will have forty-five (45) days or sooner to take appropriate action.

FCFC shall notify the Ohio Department of Health of the complaint in writing (via electronic or U.S. mail or facsimile) within seven days of receipt of the complaint; and FCFC shall issue a written decision to ODH and FCFC Executive Council of FCFC within thirty calendar days from receipt of the complaint.

Dispute Resolution for Families with Children under IDEA

Procedural safeguards represent the assurance and process provided by the Individuals with Disabilities Education Act (IDEA) that protects parents' and eligible children's rights; and provides standards for accountability, consistency, and a means for settling disputes in a fair and equitable manner statewide.

Ohio Department of Health (ODH), in partnership with the state and county Family & Children First Councils (FCFC), is responsible for assuring effective implementation of procedural safeguard by each state or local agency or a public or private agency in the state that is involved in the provision of Part C early intervention services.

An agency and/or parent may file a complaint regarding provision of early intervention services either through the Ohio Department of Health or Summit County Family & Children First Council.

Ohio Department of Health (ODH)

The ODH shall ensure timely resolution of complaints regarding the provision of early intervention services. Available remedies include: filing a complaint with the county Family & Children First Council (FCFC), and/or the ODH; and/or requesting mediation and/or an administrative hearing with ODH.

- Contact the Bureau of Early Intervention Services at the Ohio Department of Health
 - by phone (614) 644-8389,
 - by email (beis@gw.odh.state.oh.us)
 - or by mail to:
Ohio Department of Health, Bureau of Early Intervention Services
ATTN: Help Me Grow Program
246 N. High, PO Box 118
Columbus, Ohio 43216-0118

- Ohio Department of Health will inform the County of the outcome of the complaint

Summit County Family & Children First Council

FCFC shall notify ODH of the complaint in writing (via e-mail or fax) within seven calendar days of receipt of the complaint and investigate the complaint in accordance with procedures that meet the following minimum guidelines:

- a. The alleged violation must have occurred not more than one year before the date that the complaint is received unless a longer period is reasonable because the alleged violation continues for that child or other children, or the complaint is requesting reimbursement or corrective action for a violation that occurred not more than three years before the date on which the complaint was received.

- b. The alleged violation must be submitted to FCFC in writing and shall include the facts alleged in the complaint.

- c. FCFC shall assign one or more individuals to investigate the complaint. The assigned individuals must not have a direct interest in the matter and shall investigate the complaint by doing at least the following:
 - Conduct an on-site investigation as determined necessary;
 - Interview complainant and give complainant an opportunity to submit additional information, either orally or in writing about the allegation;
 - Interview relevant providers and give providers an opportunity to submit additional information, either orally or in writing about the allegation; and,
 - Review all relevant information and make an independent determination as to whether there has been a violation.

- d. FCFC shall issue a written decision to the complainant within thirty (30) calendar days from receipt of the complaint. The decision shall address each allegation in the complaint and shall include findings of fact and conclusions and the reasons for the FCFC's decision. A copy of the decision shall be provided to the complainant, ODH, Summit County FCFC Executive Council and the HMG Advisory Committee.
- e. If FCFC determines there was a violation, the FCFC must ensure that corrective actions are implemented within 45 days or sooner of the written final decision. The corrective action plan may include the following:
 - Require the participation of the provider in specific technical assistance activities;
 - Award of monetary reimbursement appropriate to the needs of the child and family; and/or
 - Develop and provide trainings at the county level to achieve compliance in the appropriate future provision of services for all infants and toddlers with disabilities and their families.

A copy of the corrective action plan will be provided to the complainant, ODH, FCFC Executive Council and the HMG Advisory Committee.

- f. Executive Committee of FCFC and ODH will monitor the corrective action plan to ensure that corrective actions are implemented.
 - g. If the complainant is not satisfied with FCFC's finding or corrective action plan, the complainant may file a complaint with ODH. ODH will investigate the complaint and issue a written decision within thirty (30) days from receipt of the complaint.
3. If the complainant is received by FCFC or ODH in regards to a ODH administrative hearing, or contains multiple issues, of which one or more are part of the administrative hearing, the complaint investigation or any part of the complaint investigation that is being addressed in the administrative hearing must be set aside until the conclusion of the hearing. However, any part of the complaint that is not part of the administrative hearing must be resolve within the established time lines.
 4. If an issue is raised in a complaint filed under this provision that has previously been decided in an administrative hearing process involving the same parties, the hearing decision is binding and the ODH will notify the complainant of such.

CONCLUSION

FCFC continues to build and evaluate the full continuum of services for children and families from prevention, intervention and treatment and in addition to identify gaps in service. This plan is seen as a work in progress.

Amended 12/05

Fcfc:servicecoordinationplan12-05