1. Overview and Purpose of Service Coordination

We envision a Family & Children First Council of Butler County that builds and sustains the competency and capability of communities to nurture the development of the physical, emotional, spiritual, and intellectual assets of their families and children. The purpose of Butler County’s Service Coordination Mechanism is define how families and children with complex needs seeking or needing coordinated service coordination shall be offered it in our local system of care.

Goals of the Butler County Family & Children First Council Services Coordination Mechanism align with the values of systems of care:

1. Service coordination provides for a broad array of services offered families and planning and collaboration at the system and at the community levels
2. Provision for individualized services and supports to families who have needs across multiple systems in the least restrictive environment
3. Service planning is family driven and youth guided
4. The strengths and needs of the child and family guide the types and mix of services to be provided
5. Early identification of needs and early intervention is prioritized
6. Services and supports are responsive to the cultural, racial and ethnic characteristics of the community population.

Butler County’s objectives are compatible with, and supportive of, Ohio’s Commitments to Child Well Being: (1) expectant parents and newborns thrive; (2) infants and toddlers thrive; (3) children are ready for school; (4) children and youth succeed in school; (5) youth choose healthy behaviors; and (6) youth successfully transition into adulthood.

The values of the Butler County Family & Children First are the same as those of the Ohio Family and Children First Council:

- Children have the right to live with their own family.
- Children have the right to be nurtured and protected in a stable family environment.
- When children are at risk of harm, the community has the responsibility to intervene.
- Families are our community’s most important resource and must be respected, valued, and encouraged to build upon their strengths.
- The racial, cultural and ethnic heritage of children and the neighborhoods where they live are respected and supported as strengths. Ethnic and racial child-rearing practices are valued.
- Families have the right and responsibility to participate in identifying their concerns, priorities, and needed resources.
Families have a right to individualized service provision that addresses the multiple needs of their children.

**Framework for Service Coordination in Butler County: Wraparound**

Butler County Family & Children First Council has available care coordination that is:
- Youth-guided
- Family-driven
- Strengths-based
- Team-oriented
- Collaborative
- Builds on natural supports
- Community-based
- Culturally sensitive
- Individualized strategies
- With measurable outcomes and
- Persistent commitment.

This approach, known as a wraparound model, guides the coordination of right-sized, well-aligned, timely services, utilizing family, team and community strengths, empowers communities to care for its families and children, recognizes that needs do not always fit the categorical service and funding structures, respects agencies’ and societal mandates, includes formal and informal stakeholders, and links success to measurable outcomes and fiscal incentives. Family advocacy, family and youth voice, and family preference are critical process elements with demonstrated evidence for achieving better outcomes.

Community Wraparound is the process of service planning and coordination used in Butler County to provide family-centered, individualized services and supports to families with children having complex needs and/or within the target population. Community Wraparound is youth-centered and family-focused, with the needs of the youth and family dictating the types and mix of services provided. The locus of services, as well as management and decision-making responsibility, rests at the community and family level. Finally, Community Wraparound is culturally competent, with agencies, programs, and services that are responsive to the cultural, racial, and ethnic differences of the population.

**Implementation of Updated Service Coordination Plan**

This plan has been approved by the Butler County Family & Children First Council Executive Committee. The process and procedures outlined in this plan are being implemented as of April 2018 and families are currently
receiving service coordination via the mechanism described in this document. On-going attention to, and modification of, the process is facilitated by the Family & Children First Council.

1. Services are delivered using a family-centered approach.
2. Services are responsive to the cultural, racial and ethnic characteristics of the population being served.
3. Service outcomes are evaluated.
4. Available funding resources are fully utilized or integrated.
5. Home and community supports are utilized as needed.
6. Specialized treatment for difficult-to-serve populations and evidence-based treatment services are encouraged.
7. Duplicative or competing efforts among agencies are reduced or eliminated.
8. Most importantly, families and youth are fully involved in decision-making and are provided with family advocacy and support options.

The following participants, as outlined in ORC 121.37, were involved in the initial development, review, revision, and approval of the Butler County Service Coordination Mechanism:

- Family & Children First Council staff
- Family Representatives on the FCFC Council
- Butler County Juvenile Court
- Butler County Mental Health and Addiction Recovery Services Board
- Butler County Department of Job and Family Services: Children Services
- Help Me Grow
- Butler County Board of Developmental Disabilities
- Butler County Educational Service Center
- Family and Children First Council Community Partners

**Accessing Community Wraparound**

Community Wraparound is available to any family requesting services for a youth birth through the age of 24. Some of the youth serving systems in Butler County provide information and referral, case management or support coordination for families involved in their care. Families seeking or needing services because their needs are not, or have not been, adequately addressed in traditional agency systems or are looking for a cross-system approach can access a collaborative, coordinated, cross-system process as described below:

- Families with children prenatal to age three who meet the program eligibility requirements receive service coordination primarily through Help Me Grow. The county service coordination mechanism
creates the Individual Family Service Plan through Help Me Grow. Low income families ineligible for Help Me Grow services based on program requirements are referred to Early Head Start for service coordination. The Butler County ESC is the provider for both services and has centralized intake and is seamlessly able to connect families for both Help Me Grow and Early Head Start. Service coordination procedures for Help Me Grow and Early Head Start are consistent with the laws and rules of Help Me Grow and Early Head Start, federal regulations, and Ohio Department of Health and Head Start policy and procedures. If a child age birth to three is in Community Wraparound and a referral is made to Help Me Grow and found eligible, HMG will be the lead service coordinator. Community Wraparound can continue to support as needed. Being located at the same agency helps in offering families a more seamless continuum of care. If a family with a child up to age three does not meet eligibility requirements for either Help Me Grow or Early Head Start, Community Wraparound can be offered to them for service coordination. In addition, for those youth in Help Me Grow, Community Wraparound can be offered for ongoing service coordination; this provides continuity of care regardless of age.

- Families, who have a child age three or older with complex needs, regardless of system involvement, can receive service coordination through Community Wraparound.

Target populations for Community Wraparound include, but are not limited to:

- Youth living in their own homes involved with mental health and addiction recovery services, child welfare, developmental disabilities, juvenile justice, or experiencing child care or school failure due to serious behavioral, emotional or developmental disorders
- Youth with serious behavior and/or emotional disorders returning to their home communities from placement settings such as therapeutic foster homes, residential centers, psychiatric hospitals, Ohio Department of Youth Services correctional centers or community correctional centers
- Youth whose parents or guardians would otherwise have to relinquish custody to obtain the needed level of intensive services
- Youth deemed to be unruly, allegedly unruly, delinquent or at-risk of becoming unruly
- Families voluntarily seeking services
- Youth ages 18-24, transitioning into the adult system(s) from any of the child-serving systems

Ten guiding principles shape the wraparound process, according to the National Wraparound Initiative. Butler County has modeled policies and procedures around these values:

- Prioritize Family Voice & Choice
- Team Committed to Family’s Success
- Involvement and/or Development of Natural Supports
- Collaboration in One Overall Plan for the Family
- Connecting Family to their Community
- Build Plan on Family’s Values, Beliefs, and Preferences
- Individualized Strategies of Help
- Enhances Family and Team’s Strengths
- Persists Until a Good Plan is in Place
- Measures Outcomes Toward Meeting Family Needs

Families and system providers are made aware the availability of service coordination through FCFC in a number of ways. Presentations are made periodically with agencies about Community Wraparound and it is part of the new worker orientation for the county. Having been offering this service for thirteen years, FCFC has accrued contact information on those who ever have made a referral or participated in Wraparound which enables FCFC to reach out to those individuals through email about the program and updates. Brochures which explain the process are distributed throughout the county including juvenile court, mental health agencies, health departments, local hospital, and schools as examples. Community Wraparound staff regularly participate at community and school resource fairs to talk about the program and answer questions families may have. In addition to the FCFC website, information also can be obtained through the FCFC Facebook page. Community Wraparound is located at the ESC which also houses Head Start, Early Head Start as well as Help Me Grow and there are joint social service staff meetings where staff learn about each other programs as well as opportunities for networking.

The following procedure outlines how to access/refer to Community Wraparound, as required under ORC 121.37.

(C1) Procedure for referring a child and family:

A. **Community Wraparound is available to children and youth, ages 0—24, with complex needs. Any agency, Juvenile Court, and/or any family voluntarily seeking services can access service coordination through this process.** There are three different levels of Community Wraparound service coordination response available to families. Determination of the actual level of involvement/intervention is made following referral and is based on family need and preference in discussion with FCFC staff as described below.

B. The Community Wraparound process begins when a family, individual, or agency/system representative (Juvenile Court, Children Services, Mental Health and Addiction Recovery Services, Developmental Disabilities, any agency, any hospital, any school, etc.) identifies a
need for a coordinated, strength-based planning process for a youth experiencing difficulties. To access Community Wraparound, a referral packet (Addendum A) must be completed and submitted to the Family and Children First Council, Attention: Community Wraparound Program Assistant.

C. Families and professionals can print off a referral packet by logging onto the FCFC website (www.butlerfcfc.org) or they may request a referral packet by contacting the Community Wraparound Administrator at the Family & Children First Council through e-mail (jennet@bcesc.org), telephone (513-887-5514), or mail (400 Erie Blvd., Suite A, Hamilton, Ohio 45011). Parents may make direct referrals to the Community Wraparound process at any time. The referral packet contains the following information:

1. Date of the referral
2. Contact information for the person being referred
3. Age and demographic information for the person being referred and household members
4. A brief description of areas of need at time of referral
5. A brief description of what the family hopes to accomplish through Community Wraparound
6. A brief description of past interventions and what was helpful/unhelpful (if applicable)
7. Current agency involvement and/or informal supports the family has
8. Contact information of the person referring
9. A brief description of the family’s and youth’s strengths/characteristics
10. A release of information form, signed by the parent/guardian (or youth if age 18 or over), permitting the exchange of information between the referring agency, the Community Wraparound staff and a parent partner from the Parent Advocacy Connection
11. TANF eligibility form including identification of Medicaid Managed Care Plan

D. Upon receipt of the referral, the following occurs:

1. The Program Assistant enters date of receipt of referral and data from the referral packet into a Wraparound database, including the date referral is received and placement at time of referral. The Program Assistant creates a case record. The Program Assistant also sends an e-mail or calls the referral source confirming receipt of the referral within one day of receipt of referral. The Program Assistant documents process activities on the case notes in the Wraparound database.
2. The Community Wraparound Administrator attempts to contact the family by phone to discuss the referral and explain or confirm with the family their understanding the Wraparound service coordination process within two days of receipt of referral.
3. Once a referred family is contacted, the Community Wraparound Administrator explains the Community Wraparound process, and reviews the initial needs of the family at referral. Through this discussion, the Community Wraparound Administrator helps the family decide if moving to level two and three of Community Wraparound is the right support to meet the family’s needs or if information and referrals to other programs or services are more suitable.

4. When a family feels their needs can be met by referral to another community resource or Community Wraparound is not the response they want, then families may choose less intensive community-based options before engaging in Community Wraparound. For these families, the Community Wraparound Administrator offers options for resources based on the family’s needs, can assist with referrals and linkage to community resources or providers, and can follow-up with the family that they were able to obtain the resource they were seeking if they want this assistance. This is one level of involvement/intervention with Community Wraparound in which assessment, referral, information and follow-up are provided to the family.

5. If the family chooses to not pursue the other levels of Community Wraparound, the referral source is notified. The outcome of the referral is documented in a database.

6. The second and third levels of team-based service coordination occurs if the family decides to proceed further with Community Wraparound. The determination of the level of coordination initially is made after the guardian or young adult speaks with the Community Wraparound Administrator and meets with the Community Wraparound Facilitator to discuss their needs and the goals family has for the help they are seeking. The level of response that best fits the intensity of their needs is then made by the facilitator under the supervision of the administrator. The second level of response is one in which the facilitator guides a youth and family team, inclusive of those systems where there are areas of need for the family, to create a strength-based plan that better addresses the family’s needs, adapts the supports to better align within the system of care, and creates a shared plan that results in better coordinated efforts. Examples of this level of coordination include families who have existing supports or services, but need coordination of those services for better outcomes. Another example includes youth who have entered into the juvenile justice system for the first time, with limited past or present supports in place, and are being diverted. The third level of Community Wraparound is facilitating the creation of a youth and family team that is aligned with the principles and practices of the National Wraparound Initiative, is inclusive of the elements of the second level of response, and adds additional elements of quality.
service coordination: engaging help that is more than services, building and engaging natural supports, addressing the unique underlying needs that are keeping the family from achieving the life they want, as examples of some of the differences. This level of response is often used when the youth is at risk of, or had an out of home placement, more serious involvement with the court, parent/guardian has youth with more intensive and complex needs where system response is inadequate, youth transitioning to independence and adulthood, families at risk for involvement with Children Services who are trying to keep their family together, or families struggling to stay safe and the second level of coordination is insufficient. Whichever level of Community Wraparound is decided upon, the service coordination process will make families aware of the continuum of interventions/services available in the County and ensure they have the level of support needed. Any Butler County resident who meets the age, residency, and complex needs requirements is afforded the right to participate in Community Wraparound.

7. If a youth, age 18 and older, chooses to participate in Community Wraparound past his/her 18th birthday, the youth is required to sign acknowledging the receipt of the Families’ Rights and must sign all pertinent releases. This procedure can occur if the youth is already 18 or older at the time of referral or can occur if the youth reaches age of majority while already actively involved. In addition, the youth must be present at all meetings in order for the planning process to occur.

8. The Community Wraparound Administrator, who oversees the Community Wraparound program and that the program is being implemented according to approved service coordination mechanism, aligned with NWI practice model and local system expectations, assigns a trained Community Wraparound facilitator to lead the youth and family team generally within one day of contact with the parent/guardian. The facilitator is the lead service coordinator in the process and assignment of the facilitator is the beginning of the second and third levels of intervention available through the service coordination mechanism. Parents have the right to approve the facilitator upon assignment and to request a facilitator change at any time in the process.

9. The facilitator attempts contact with the family by phone within two days of assignment. After at least two unsuccessful attempts by the facilitator, the Community Wraparound Administrator attempts to contact the family again. The referral source is notified of the efforts to contact the family by the facilitator and enlisted to assist with family contact. After at least three unsuccessful attempts at contact, an “attempt to reach you” letter is mailed with
a timeline identified for accessing Community Wraparound. If the family does not respond by the end of the time specified in the letter, the case is closed.

10. When the facilitator makes phone contact with the family, an initial engagement meeting is scheduled within five days of contact, unless parent/guardian is unavailable, and any additional questions they may have about the Community Wraparound process are answered. The meeting is conducted at a time and location of the family’s choice. During this meeting, the facilitator reviews the Wraparound process, assesses level of service coordination response in discussion with the family, identifies any immediate service referrals thought to be helpful and addresses immediate crisis stabilization issues, and conducts a Family Discovery which outlines the family’s strengths, needs, and culture. This is completed through a conversation where various tools such as questionnaires, timelines, and social connections map can be used. The parent/guardian or young adult is given a copy of the “Families’ Rights” which states their right to approve the facilitator of the family team and outlines the dispute resolution process. The parent/guardian or young adult signs a form acknowledging receipt of this information. If additional team members are identified, the parent is asked to sign consent for release of information to allow sharing of information. The facilitator also completes with the family the initial standardized assessments which will be used to evaluate the youth’s progress and effectiveness of the service coordination process. Following the meeting, the facilitator will also complete the Child and Adolescent Needs and Strengths assessment to assist in identifying youth needs as well as assist in the wraparound planning process. They will update this every 90 days, or more often as needed.

11. As lead service coordinator, the facilitator is responsible for the generation, support, and maintenance of a family-driven team for each assigned family. The facilitator works with the family to identify members to participate in the youth and family team. When a youth is in the custody of Children Services, the agency and parents share responsibility for identification of team members if the parent is available.

12. The support of a parent partner is always offered to the family. Community Wraparound has parent partners on staff, as well as volunteer parent partners from the community. Parent partners are parents or caregivers who have firsthand experience raising a child with behavioral-health and/or other challenging needs. Parent partners are able to provide emotional support and encouragement to families through telephone calls and by attending meetings with families (Wraparound meetings, school meetings, court hearings, etc), and educate and equip parents to work in partnership with child serving systems.
Parents/Caregivers are able to request a parent partner at any time throughout the Community Wraparound process. The Family Advocacy Coordinator assigns a parent partner to work with the family. The parent partner then contacts the family and begins to develop a relationship with them.

13. Youth are also offered the support of a Youth Peer Partner. Community Wraparound has developing capacity of youth peer partners on staff who have firsthand experience of being involved with one of the child serving systems such as mental health and addiction recovery services, child welfare, juvenile court, developmental disabilities or special education. They support the youth in the service coordination process and provide emotional support and encouragement for their engagement to maximize their involvement. The family is able to request the support of a peer partner at any point in the process and the Facilitator/Peer Partner Coordinator assigns the peer partner to begin working with the youth.

14. Prior to the first Wraparound meeting, families are asked to review and approve the Family Discovery narrative or strengths inventory. Family Discovery is described under Procedures for Assessing the Strengths, Needs, and Culture of Families (C7). The initial meeting is scheduled within a week of completion of the Family Discovery narrative or strengths inventory.

(C2) **Procedure for notification of all family service coordination plan meetings:**

A. *The facilitator contacts the family by phone to schedule an initial meeting at a time and location convenient for the family.* The facilitator and the family negotiate team membership based on the family current system involvement and needs and those persons who are significant in some way in the youth’s life. These may include representatives from all appropriate agencies, a representative from the youth’s school district, as well as formal and informal family support persons such as extended family members, friends, advocates, neighbors, clergy, etc. The National Wraparound Initiative promotes “family voice and choice” and maintains that families have the right to include (or exclude) whomever they deem appropriate to best support and help their family achieve their vision for success.

B. The facilitator contacts other team members (family members, staff from involved agencies, school personnel, parent partner/mentor, and/or other support persons) that have been identified
by the family via phone, email and/or letter. The facilitator orients them to the Community Wraparound process, answers any questions they have about the process, notifies them of the family team meeting(s) and invites their participation. Notification includes the meeting date, time, and location (with directions if needed). Participants are given at least five business days notice; however, during exigent circumstances, notification may be made in a shorter time frame.

C. At the conclusion of each meeting, the team schedules the next meeting, or several meetings as deemed appropriate, to include those necessary to address the agenda of the meeting. It is the Community Wraparound facilitator’s responsibility to invite any absent or newly identified team members to the next meeting.

(C3) Procedure for a family to initiate a meeting and invite support persons:

A. A parent/family can request a meeting at any point as the need arises by contacting and informing their Wraparound facilitator. The meeting is scheduled at a time and location convenient for the family. The facilitator will coordinate with and contact all team members to inform them of date, time, and location of the meeting.

B. All families are offered the support of a parent or youth peer partner at any time during the Community Wraparound process. Families are encouraged to invite a parent partner, youth peer partner, mentor or support person of the family’s choice to participate in any and all meetings.

(C4) Procedure for ensuring an individual family service coordination plan meeting occurs before an out-of-home placement is made, or within ten days after placement in the case of an emergency:

A. For families involved in the Community Wraparound process, non-emergency placement decisions are only made as a result of a facilitated team meeting. Ideally, the Community Wraparound Administrator is invited to at least one meeting to help the team discuss alternatives to placements and suggest other clinically appropriate supports that ensure safety in the least restrictive environment. If after all other options have been explored and the family team believes out of home placement best addresses the needs of the youth, the team’s recommendation for placement is then presented to the Clinical Committee for further problem-solving and, if necessary, funding decisions for placement or intervention. The Clinical Committee is comprised of representatives from child welfare, mental health and addiction recovery services, developmental disabilities, juvenile court, and an FCFC family representative. A school representative from the district in which the youth resides is also invited. It is the role of Clinical Committee to explore with the
family team appropriate treatment options for the youth and the least restrictive setting to meet the youth’s needs. Placement of a youth for the purpose of treatment does not require the relinquishment of custody. Clinical Committee representatives have the authority to enter into shared funding agreements for the purposes of intensive, home/community based treatment and/or out of home placement.

B. For families involved in the Community Wraparound process whose youth is placed outside the home on an emergency basis, the team convenes within 10 days of the placement. The team at this point addresses immediate needs and begins transition planning for the youth’s return to the community.

C. For multi-system youth who are not involved in Community Wraparound, but for whom out-of-home placement may be needed, agencies and/or families can refer at any time to Community Wraparound for service coordination.

(C5) Procedure for monitoring progress and tracking outcomes:

A. The youth and family team continues to meet until the family team and youth address the needs in their service coordination plan or the family feels that they are addressed enough. Processes and outcomes identified in the plan are recorded in the Wraparound database by each Community Wraparound facilitator and tracked both individually for each team and systemically by the Program Assistant.

B. A cloud-based, HIPPA compliant, case management database has been modified for Community Wraparound that assists in the collection of the data and reports data relative to the families involved in the Wraparound process. On a quarterly basis, the Program Assistant provides program data to the Community Resource Team, the Clinical Committee, the Executive Committee, funders, as well as the Council at large. Specific data elements collected include:

1. Basic Demographics of population served (age, gender, race, household composition, school district, primary diagnosis, etc.)
2. Process Outputs (numbers served, cases closed, length of involvement, parent partner involvement, etc)
3. System Involvement
4. Numbers of youth at risk for out of home placements
5. Numbers of youth placed out of the home accessing Clinical Committee resources
6. Parent Survey Data to assess family functioning and usefulness of the Community Wraparound process
C. A Community Wraparound evaluation plan has been developed to monitor outcomes. Standardized assessment information and Parent and Youth perception of progress is reported at various times throughout the year and annually. Information collected and reported at intake and case closing includes: Family Empowerment Scales, the Ohio Scales and a parent survey of progress and youth survey for youth 12 or over. The Ohio Scales and the parent and youth surveys are also completed at six month intervals throughout the process. Information on youth in placement and those at risk for out of home placement is tracked and reported annually.

D. FCFC Service coordination data that addresses the State’s data sharing requirements is collected and will be submitted to the State for the purposes of evaluation.

E. Community Wraparound facilitators are responsible for collecting information from family teams to assess progress toward meeting the needs they are planning around as well as the values of the Community Wraparound process. Teams regularly track indicators that are meaningful to the family for each need/goal they are planning around and the data is included in graph format in their service coordination, Wraparound plan. In addition, they rate their overall progress in meeting the need/goal as well as meeting the team’s mission which also are shown in the Wraparound plan. This data can be aggregated and is reported out to the community and funders in the annual report and can be used to also meet the State’s data requirements for service coordination and FCSS funding. In addition, teams complete a satisfaction survey at least once annually to measure satisfaction with the process and perceptions of implementing the process with fidelity to the NWI practice model.

F. The Community Wraparound Administrator supports the Community Resource Team which is a multi-system committee responsible for supporting the provision of in-home supports for Community Wraparound in Butler County. The Community Resource Team oversees the use of Mental Health and Addiction Recovery Services Flexible Dollars, Family Centered Services and Support (FCSS) funds, and shared funding agreements needed to provide community-based supports for families. They are also responsible for problem solving inter and intra-system challenges experienced by youth and family teams. Members on the Community Resource Team represent Children Services, Mental Health and Addiction Recovery Services Board, Board of Developmental Disabilities, Department of Job & Family Services, FCFC family representative, and Juvenile Court when available. The Community Resource Team meets weekly for the purpose of conducting business and serves as a conduit for exchange of information regarding Wraparound implementation and the public systems.

G. The Community Resource Team reviews individual service coordination plans and funding
requests to determine adherence to the Community Wraparound process, identifies funding 
options or barriers to implementation, and evaluates appropriateness of use of shared-funding agreements, Mental Health Flexible Dollars, and FCSS funds. Plans are reviewed at initial request and at least every ninety days. Families are asked to complete a meeting satisfaction survey at the completion of their interaction with the CRT to ensure CRT subscribes to the values and standards of the National Wraparound Initiative.

H. The Community Wraparound Administrator facilitates and supports the Clinical Committee (CC) which is a multi-system funding committee for out-of-home supports. The Clinical Committee is available to meet weekly to assess and review out of home placement requests relative to appropriate level of care and appropriate funding sources. The committee reviews out of home placements approximately 45 days after initial placement, and approximately every 90 days until the youth is returned to their home. Members of the Clinical Committee represent Children Services, Mental Health and Addiction Recovery Services Board, Board of Developmental Disabilities, and Juvenile Court. The Clinical Committee is able to provide treatment recommendations to prevent placement as well as to ensure a successful transition back into the community. Clinical Committee Members are responsible for holding Wraparound teams, families, and service providers accountable for appropriate placement and treatment decisions, continuity of care, and appropriate support to transition the youth into the community successfully. Teams meet regularly, sometimes more often, for youth in out of home placement to develop action steps for the youth to transition back to home and community which is captured in their Wraparound plan and shared with the Clinical Committee. Additionally, the FCFC is an approved transition coordinator for Home Choice, which can provide additional resources and supports for transition for youth who meet Home Choice requirements. Placement changes for youth in Community Wraparound are collected by the facilitator and entered into the database. Out of home placements are included in this data and is reported out quarterly and annually to the FCFC, funders and community to inform the decision making of the FCFC and system directors. Wraparound team members are asked to complete a meeting satisfaction survey at the completion of their interaction with the Clinical Committee to ensure the values and standards of the National Wraparound Initiative are followed.

I. Information collected and analyzed regarding the Wraparound process provides data for decision-makers, informing them of needed systemic reforms and service capacity issues. With the ability to create reports and access current information in a database format, submission of data to the State can also be completed in a timely manner for the purpose of evaluation.
J. As a result of the collaboration and data review by the directors of all public child-serving systems, there has been a decrease in the duplication of services and an increase in resources available to families. Policies have been established to minimize the number of youth in out of home placements as well as the amount of time youth spend when placed. In addition, providing shared funding agreements between systems has maximized resources across the county and ensured plans are funded regardless of families’ system involvement.

(C6) Procedure for protecting family confidentiality:

A release of information is used to ensure confidentiality practices are aligned with the values of Community Wraparound. By limiting the number of people/agencies involved until after each step of the Community Wraparound process occurs, parents are empowered with more voice and choice regarding information shared as well as team membership.

A. All referrals for Community Wraparound include a release of information by the parent/guardian or young adult to initiate the process and allow contact between the Community Wraparound program, Parent Advocacy Connection, and the referral source (Addendum B1).

B. During the engagement phase with the family and upon completion of the Family Discovery narrative or strengths inventory, a team release is signed by the guardian allowing contact between the facilitator, the Parent Advocacy Connection, and those selected by the family to participate on the team. As new members are added to the team during the service coordination process or the original team release expires (generally 180 days), an updated team release is completed (Addendum B2).

C. Family teams requesting funding for in-home services/supports or out of home placement sign a third release which allows the Community Wraparound program to present information to the Community Resource Team or Clinical Committee for funding determination (Addendum B3,B4). Following the meeting, all copies of the confidential materials shared with committee members are shredded and the original is returned to the file.

D. Parties not listed on the releases are not privileged to any personal family and health care information developed through the Community Wraparound process. A written consent from the parents/guardians is required before any personal family and health care information is shared with any individual, organization, provider, etc.

E. Parents/Caregivers are made aware of the limits of confidentiality in the event that there is a known or suspected risk of harm to self or others.
F. During team meetings, the Community Wraparound facilitator assists the team in establishing ground rules and ensures that all team members are aware of the requirement for confidentiality. At the beginning of each Wraparound meeting, all team members initial the agreement for confidentiality (Addendum C).

G. All files and original documents are kept in a locked file cabinet at the Family & Children First Council.

H. When families close with Community Wraparound, all collateral personal family and health care information is shredded. Documents generated by the Community Wraparound program that contain personal family and health care information are saved electronically.

(C7) Procedure for assessing the strengths, needs, and culture of any child and family accepted into the service coordination process:

A. The Community Wraparound process includes specific training for Community Wraparound facilitators to gather family strengths and needs. This process is called the Family Discovery. Family Discovery is both an event and an ongoing process. As an event, Family Discovery is a planned meeting and interview process with the youth, family, and others that know the family well and who care about their well-being. Family Discovery is an ongoing process in that the Community Wraparound facilitator continues to discover family and team strengths and important aspects of family culture until the family is no longer receiving service coordination through Community Wraparound. There are three overall goals of the family discovery interview:

1. Identify strengths, assets, and resources that may be mobilized to meet family needs for support.

2. Learn about and understand the culture of the family so the eventual Wraparound plan “looks like” and “feels like” the family, i.e., is culturally competent and more likely to be a plan the youth and family will support and participate in.

3. Record youth and family needs. Needs are the immediate area of focus that are identified by the youth and family. Ask about and establish a family’s long range vision.

B. The Family Discovery is an important step of the Community Wraparound process. A superficial strengths discovery leaves the facilitator and youth and family team only with limited strengths to draw upon and therefore a likely more deficit-based plan is created. A comprehensive Family Discovery will permit the plan to include strength-based options for meeting the needs of the youth and family that reflect the culture of the family. Such a discovery supports a plan that is
highly individualized. In other words, the plan is “one of a kind” and is designed to fit the unique needs of the family rather than the approach typical of traditional service systems where a family is offered only available, categorical services with little regard for fit. (Taken from Vroon VanDenBerg LLP, Facilitator Training Manual)

C. The Family Discovery (Strengths, Needs and Culture Assessment) Process is as follows:

1. The facilitator schedules an initial meeting with the youth and family at a time and location convenient for the family. Other participants may be included at the family’s discretion, including family members, caregivers, service providers, agency personnel, friends, etc.

2. A conversation is held with the youth, family, and other family-included participants gathering their perspective on their individual and collective strengths, needs, elements of culture, and long-term goals or vision. The facilitator also seeks to identify and understand the natural, informal, and formal supports available to the family. The facilitator captures where the youth has found success in the past or what has worked for the family in addressing needs.

3. Culturally sensitive questions that explore all life domains (social, friends, fun, residence, neighborhood, financial, education, vocational, legal, medical, spiritual, behavioral, emotional, psychological, safety and crisis intervention) provide the framework for identifying strengths and needs of the family.

4. Community Wraparound facilitators are trained on and provided various tools to obtain information from the family around emotional and social connections, family’s strengths, and family’s needs. These tools are individualized based on the family’s strengths and needs and are sensitive to family’s unique culture. A short narrative is created using the tools and information provided that summarizes the family’s strengths, needs, and culture as well as community and team member strengths that can be used in wraparound planning.

5. Additional information may also be obtained from team members and other supports by phone as those individuals are identified by the family and the appropriate releases are obtained.

6. This information is used to develop a narrative which is presented to the family for approval prior to distribution to team members. This narrative serves as a starting point for planning. However, as new information is gathered, the Family Discovery document can be updated.

7. The facilitator completes the Family Discovery and has it approved by the family within 3 weeks of the initial engagement with the family. The Family Discovery report is shared with all members of the team prior to or at the first Wraparound meeting.
D. Following the meeting, the facilitator will also complete the Child and Adolescent Needs and Strengths assessment to assist in identifying youth needs as well as assist in the wraparound planning process. The assessment assists in identifying life domains where action may be needed and identifies strengths which can be utilized in planning for youth and family success.

(C8) **Procedure for developing a family service coordination plan:**

A. The Community Wraparound facilitator is responsible for the generation, support, and maintenance of a family-centered team for each assigned family. The facilitator works with the family to identify members to participate in the youth and family team. Community Wraparound facilitators are also responsible for scheduling necessary reviews, monitoring progress of initial plans, facilitating team meetings, collecting appropriate data, and submitting written documentation of plans to all team members after receiving consent from the family to share personal and health care information.

B. The facilitator is the lead service coordinator and contacts team members to schedule an initial meeting to develop a Wraparound plan. The initial Wraparound meeting occurs within 5 days of completion of the Family Discovery.

C. During the Family Discovery, facilitators are able to ascertain all team members’ perspectives on the family’s strengths and needs. Culturally sensitive questions that explore all life domains (social, friends, fun, residence, neighborhood, financial, education, vocational, legal, medical, spiritual, behavioral, emotional, psychological, safety and crisis intervention) provide the framework for identifying strengths and needs of the family. This information is used to develop a narrative description of the family’s situation which is presented to the family for approval prior to distribution to team members.

D. A condensed bullet list of the family’s strengths and needs is provided at each family team meeting. The facilitator helps the team to utilize the existing strengths and family culture (preference, attitudes, values, etc) when creating their Wraparound plan.

E. With the Family Discovery narrative or strengths inventory guiding the planning process, plans are developed around family strengths and are culturally sensitive to the individual needs of each family. The utilized strengths for the action steps are listed in the Wraparound plan.

F. The Wraparound plan is developed to address the prioritized needs of the family while adhering to local and State mandates and requirements of each agency involved. Action steps in the plan captures the type of help being offered, how often and by whom as well the progress and barriers in implementing the action steps. Plans fulfill such requirements as simply as possible, with
minimal overlap and duplication between systems, and provide a prioritized, coordinated method for supporting families. Utilization of the least restrictive environment, community and home based services/supports, and the convenience and preferences of the family are considered by the team when developing a wraparound plan. Based on the action steps to address the family’s needs, the facilitator assists with the assignment of responsibilities of each team member. As part of the planning process resource requirements, including budgets for services and supports, are identified. Prior to the end of each meeting, the facilitator schedules the next family team meeting.

(C9) **A dispute resolution process, including judicial review process:**

There are times when one or more members of a service planning team may question decisions or the process of decision-making. Conflicts may arise if a family is in disagreement with the service plan (child/family to plan), or one agency is in disagreement with another agency or the service plan (agency to agency).

A. Dispute Resolution does not replace other rights or procedures that parents or custodians may have under other sections of the Ohio Revised Code. The local Dispute Resolution Process also must not be interpreted as overriding or affecting decisions of a juvenile court regarding out-of-home placements, long-term placements or emergency out-of-home placements. These decisions fall strictly within the authority of the Juvenile Court. Dispute resolution, as outlined below, may be used only to dispute the service plan developed via the county service coordination mechanism. It does not apply to individual system decisions, services, or policies as those systems have their own unique dispute resolution policy which must be utilized.

B. It is expected that participants in a service planning process will, in all instances, seek clarification and resolution of issues at the point of planning. Families are encouraged to ask questions and become knowledgeable of available services/supports, what their child may need, and what rights and responsibilities are theirs as parents.

C. Families served by Help Me Grow Early Intervention, and who disagree with their service plan, may utilize the Dispute Resolution Procedure established for Help Me Grow by the Ohio Department of Developmental Disabilities. A family served by Help Me Grow may choose to seek resolution at the county level prior to engaging the DODD dispute process. At the point of
disagreement, all parties are strongly encouraged to attempt to resolve the issues directly with members of the Help Me Grow team or the agencies in question.

D. Issues not resolved at the Help Me Grow team level will be summarized by the parent in writing, given to the Family and Children First Council Director. After a review, if the FCFC Director determines that the issue is related directly to the HMG service plan, the summary will be subsequently referred to the directors of the child-serving systems (BCESC, Job & Family Services, Mental Health and Addiction Recovery Services, Juvenile Court, and the Board of Developmental Disabilities.

The director of the FCFC will convene a meeting of the directors of the child-serving systems within 7 days of receipt of the dispute notice and a written decision will be rendered within 8 additional calendar days. Resolution will be provided within a maximum of 15 days.

E. If a family served by Help Me Grow does not agree with the decision of the child-serving system directors, they will be referred to the Ohio Department of Developmental Disabilities’ Dispute Resolution Procedure.

F. Families whose child is served by Community Wraparound and who disagree with an assessment, service or service plan of a member agency/system must first exhaust that system’s dispute resolution process prior to making a written request for Dispute Resolution through the Family & Children First Council.

G. Families involved in Community Wraparound are informed in writing of the availability of dispute resolution at the initial meeting with the assigned Wraparound Facilitator. Families may also be informed of the process as appropriate at ongoing meetings of the child and family team. Families are provided with the contact information for resolving conflicts or making a complaint (Addendum G) and a copy of the Dispute Resolution Process is available upon request. Family advocates/mentors are available to families to support and assist them throughout the dispute resolution process. At the point of disagreement, all parties are strongly encouraged to attempt to resolve the issues directly with members of the Wraparound team or the agencies in question.

H. Each agency on the Council providing services or funding for services that are the subject of the dispute initiated by a parent/caregiver will continue to provide those services and/or funding during the dispute resolution process. If the dispute is about services desired by the parent/caregiver but not yet received, delivery of those services will be dependent on the dispute resolution process.

I. As per ORC 121.37, the Butler County Family & Children First Council may consult with the Ohio Family & Children First Cabinet if it is a unique case where there are specific issues with
funding, locating an appropriate service and/or if the administrative rules prohibit a solution. The OFCF Service Coordination State Committee will provide administrative reviews of referrals from county FCFCs or a family when a child/family involved in the FCFC service coordination process has needs that the council, through the service coordination process, is unable to meet; or when the individual family team is unsure about how to address the needs of the child or family.

J. The Service Coordination State Committee will also review unresolved local service coordination disputes, if the administrative review is requested prior to using the juvenile court as final arbitrator of the dispute.

K. A non-emergency dispute is defined as a dispute that does not require an immediate response due to the safety or well-being of the child(ren) (which could include risk to family members or others). When a non-emergency dispute is initiated by a parent or guardian, the following occurs:

1. Issues not resolved at the Wraparound team level or Community Resource Team/Clinical Committee level will be summarized by the parent in writing, given to the Family and Children First Council Director, and will be subsequently referred to the directors of the child-serving systems (BCESC, Job & Family Services, Mental Health and Addiction Recovery Services Board, Juvenile Court, and the Board of Developmental Disabilities.

2. The director of the FCFC will convene a meeting of the directors of the child-serving systems within 7 days of receipt of the dispute notice and a written decision will be rendered within 8 additional calendar days. Resolution will be provided within a maximum of 15 days.

3. Issues unresolved by the directors of the child-serving systems will go to mediation and parties will share the cost of mediation. Mediators will be selected from a pool of Family & Children First Council-approved mediators (volunteer or professional) that are not involved with agency constituencies and who have had mediation training within the past three years. The Director of Family & Children First Council will impanel a mediator and convene a meeting within 15 calendar days of the written decision of the system directors. If agreement is reached among the parties as a result of mediation, a written mediation agreement should be rendered within an additional 15 calendar days.

4. Disputes will be resolved and a written determination of findings will be made within 60 days unless all parties agree to extend the time frame.
L. Emergency disputes are defined as disputes that require an immediate response due to the safety and well-being of the child(ren) (which could include risk to family members or others). In the case of an emergency dispute the Director of the Family & Children First Council will decide the least restrictive option available pending resolution of the dispute. The Community Wraparound facilitator will work with the team to ensure the safety and well-being of the child(ren) is addressed until the dispute is resolved. The same process and time frames are applicable to dispute resolution in both non-emergency and emergency situations.

M. It is the responsibility of the lead agency to continue to provide for and monitor necessary services in the case of an emergency dispute. If funding is required to provide disputed services, it will be the responsibility of the lead agency or the CRT to continue funding the service until the dispute is resolved. At that point the funds may be reimbursed by the entity ultimately deemed responsible.

N. If one FCFC member agency disagrees with the proposed service plan, the following steps will be followed:
   1. Member agency will submit, in writing, the basis for their disagreement to the Family & Children First Council Director.
   2. The affected members will engage in a good faith effort to resolve the dispute.
   3. Any applicable agency-specific dispute resolution process will be followed.
   4. If the dispute is not yet to the satisfaction of all parties, the affected agencies will participate in mediation, with the cost to be split between the parties.
   5. If the dispute is not resolved as a result of mediation, one or more involved parties may file a complaint with the Butler County Juvenile Court.

O. Disputes are filed with the Director of the Butler County Family & Children First Council and are used as part of the annual evaluation of quality assurance.

3. **Statutory components required under ORC 121.37 (D): Individual Family Service Coordination Plan**

   Wraparound plans provide family teams with a structure in which prioritized needs are planned around, monitored, and tracked with specific outcomes and objectives. As stated above, Community Wraparound facilitators are responsible for ensuring that the process aligns with expected timelines, the National Wraparound Initiative values, the family’s strengths and needs, as well as the systems’ mandates. Following the
National Wraparound model for facilitation and utilizing specific documents provides accountability and structure for this process.

(D1) **Method for designating service/support responsibilities:**

A. The agenda to create an initial Wraparound Plan includes the following steps:
   1. Introductions/Confidential Agreement
   2. Review of Family, Team and Community Strengths
   3. Develop mission statement after reviewing family vision
   4. Prioritize needs that best address team mission giving greater weight to family and youth voice
   5. Identify initial need to being planning around based on family preference
   6. Identify any immediate crisis or safety concerns and assess planning needs/timeline to address
   7. Brainstorm ideas to address initial need
   8. Plan actions for needed help that utilizes identified strengths and develops timelines for implementation
   9. Secure commitments taking into account sharing responsibility among the team, arranging funding if needed, and coordination with individual system plans and mandates
   10. Identify outcomes to measure effectiveness of action steps meeting needs
   11. Evaluate and end the meeting

During subsequent meetings, teams discuss what is working in plan and successes had since the team last met, updates outcome measures: meeting need indicators, progress meeting need/goal. The team then addresses barriers in getting the identified supports in place if any, brainstorms ways to address them and/or develops a revised plan to get the help a family needs. The team can always meet with the CRT to help resolve the barriers or find solutions for gaps. The team continues adding new action steps and assignment based on needs the team is planning around or adjusting or discontinuing actions that are not working.

B. As teams determine the action steps for meeting the identified needs, commitments are secured. Based on the planning steps to address the family’s needs, the facilitator assists with the assignment of responsibilities of each team member. These responsibilities are outlined in the Wraparound Plan (Addendum D). Information details who will accomplish what tasks and by when to ensure accountability and timeliness. This is distributed to each team member and
updated within 5 days of a meeting. Updated Strengths are Needs are also documented in each meeting and reflected in the Wraparound plan, and Strengths and Needs posters.

C. Prior to the end of each meeting, the facilitator schedules the next meeting and checks in with the team as to how the facilitator helped the team address and monitor the elements of the service coordination plan.

(D2) **Method for selecting the family team member who will track progress, schedule meetings and facilitate meetings**

A. The Community Wraparound Administrator contacts the family to let them know the name and contact information for the facilitator (the lead service coordinator) assigned to their family. Additionally when reviewing their family’s rights, they are given the contact information for the both the Community Wraparound Administrator and Executive Director of the Council in the event the family has concerns or questions about their facilitator’s performance. Families are also notified of their right to accept (approve) the assigned facilitator and to request a new facilitator at any time in the process.

B. During the initial stages of the Wraparound process, the Community Wraparound facilitator works with the family and team to determine team membership, frequency of meetings, planning, and progress monitoring. It is the facilitator’s responsibility to lead and teach the team the Community Wraparound process and model appropriate facilitation techniques and behaviors. As the team becomes more comfortable with the process and each other, the family and team can determine that other members may assume any or all of the roles of the Community Wraparound facilitator including, but not limited to, facilitating the family plan meetings, flip charting, scheduling Community Wraparound meetings, monitoring and recording progress toward meeting needs, etc. A natural marker for transition out of Community Wraparound is a family team being able to successfully meet, plan, and monitor the family service coordination plan without the Community Wraparound facilitator present.

(D3) **Procedure for how plans will ensure services are responsive to the strengths, needs, family culture, race and ethnic group; and are provided in the least restrictive environment:**

A. As previously discussed, the team identifies help or service supports that address the prioritized needs of the family and youth. In deciding which ideas to implement, the team uses the family, team and community strengths to help decide which action to take, how to sequence the action steps and how to individualize the action for the specific preference of the family and their
culture. Facilitator are trained in areas of cultural competence, awareness of personal and societal bias.

B. The family team develops a Wraparound plan to address the prioritized needs of the youth/family while adhering to local and state mandates, expectations of the involved agencies, and, consistent with the values of Wraparound, services are community based if available. This means that the team is looking for services and supports that can be provided in the least restrictive environment within the family’s community and also evaluates them in terms of how they help the family feel more connected to others and the community.

C. Facilitators are trained to help teams create plans in the least restrictive environment by planning around needs, not services. Addressing safety, supervision, and clinical issues using a mixture of formal, informal and natural supports allows teams to be more creative in their planning. Utilizing technological resources, as well as arranging for supervision, supports, and services, can allow youth to receive treatment in their community rather than having to be placed out-of-home.

D. In the event that a youth is placed in an out of home placement as part of their Wraparound plan, the team meets regularly with the placement provider, minimizes barriers for parent participation, and plans for transition back to the community in the least amount of time possible and to the least restrictive environment. While in out of home placement, the team will meet periodically with the Clinical Committee to review progress and how the team is addressing the plan for return to a least restrictive setting.

(D4) How alleged unruly and delinquent children will be dealt with using the service coordination including a method for diverting them from the juvenile court system:

A. When a complaint is written up by police, a copy of the complaint is served by the police to the parents of the allegedly unruly or delinquent youth providing notification that a court date has been set for hearing of the complaint. Upon receipt of the complaint, the Court determines if the youth has had prior court contact either in Butler County or surrounding counties. In the absence of prior court contact, the case is referred to the Diversion Hearing Officer. At the time of the hearing, the parents and youth are advised of their rights and provided with an explanation of the diversion process, including that there is no official court record at this point. If the youth admits to the offense, the case proceeds with diversion. The Diversion Hearing Officer hears the family’s version of the incidence and then interviews the youth to determine the most appropriate
method of diversion. The parent and youth both sign a diversion contract which specifies the
diversion orders and consequences and they are encouraged to comply. Failure to comply results
in an official court case.

B. The Butler County FCFC service coordination is available to those youths who are alleged to be
an unruly or delinquent youth. In addition to diversion, the Butler County Juvenile Court also
provides Status Offender Mediation, community mentoring, and mental health/drug screening,
evaluation, and early intervention/treatment.

C. Diversion personnel as well as probation officers have been trained in the Community
Wraparound process and refer families at any point in their continuum to help create plans that
prevent further court involvement. In addition, Community Wraparound meetings are often held
at the Juvenile Court so that personnel or youth who are not permitted to leave the premises are
able to participate in the planning process.

D. Wraparound plans for youth involved with the court are tailored to the individual needs of the
family and may include, but are not limited to, the following types of supports:
1. Therapeutic Supports to address the mental health needs of the youth and family
2. Mental Health Case Management
3. Mentoring or monitors to provide skill building and supervision
4. Respite
5. Behavior strategies
6. Door or window alarms
7. Parent mentors
8. Advocacy support to work with the schools around academic accommodations, alternative
    school and/or special education placements

(D5) How timeliness will be established for completing family team goals:

The Community Wraparound facilitator is expected to finalize the initial Wraparound plan within thirty
(30) days of initially meeting the family. Community Wraparound teams should be meeting at a minimum in
biweekly intervals to complete this phase. In addition, the team creates a Crisis Plan and a Safety Plan if
needed. For some families, safety is the first need planned around in the Wraparound Plan and includes crisis
planning. Once both plans are completed, Wraparound teams are expected to meet at a minimum monthly until
the team reaches the transition phase of the process, at which point a Transition Plan is completed.

At the end of the process families are asked to complete the closing paperwork which includes post
surveys and standardized assessments. Facilitators are expected to submit the closing paperwork and case file
and closing checklist to the Community Wraparound Administrator for review prior to closing. Average involvement with in the Community Wraparound process is ten to twelve months.

**(D6) How crisis and safety plans will be included in the family service coordination plan:**

A. If there are times when basic health and safety is compromised and action (or immediate reaction) is required to keep someone safe, a safety plan is needed. Safety is a non-negotiable component of Butler County Community Wraparound and must be addressed by the youth and family team. Within the first two Wraparound meetings, the facilitator guides the team in a discussion of safety concerns. Issues and concerns about supervision, fire setting, inappropriate physical contact, drug or alcohol use, self-harming behaviors, animal cruelty, running away, and inappropriate viewing of video games, internet, and television are identified. If any area is identified by the family team rises to the level of a safety risk, a safety plan will be created to address that risk.

B. The facilitator leads the team to identify patterns of safety concerns, address appropriate and inappropriate behaviors, and educate siblings and/or community members that may be affected by the behavior(s). Safety programming outlines services provided to the family to help prevent the safety concerns and steps to be taken, including who should be contacted, ways to keep everyone calm and safe, in the event an incident occurs. Resources in the plan may include the mobile crisis team, local police and after hours mental health support. The plan also helps the team to establish ways to restore trust and prevent the event from recurring. The facilitator creates an individualized one-page safety plan summary to help the family and team remember the steps of their plan. The safety assessment and planning process can be reviewed and modified as needs arise at any time in the process.

C. Based on family need and desire for a crisis plan, the facilitator will lead the team in creating a Family Crisis Prevention Plan or Plans so that all families who have a wraparound plan also have access to an individualized crisis prevention plan. Crisis prevention plans are different from safety plans. Crisis situations may cause stress for a family but do not pose immediate safety or risk of harm or do not rise to the intensity of potential harm. A crisis is a time when one is not sure what to do or how to respond and may evoke a sense of helplessness. Explosive behaviors, temper tantrums, sneaking out, and skipping school are examples of situations that can create a sense of disequilibrium, or a crisis, in a family. The facilitator will explain the crisis prevention
planning process and help the team determine if a crisis plan will be helpful for the family team or if the Wraparound plan is adequate to address crisis behaviors. Crisis plans can be created at any stage of the Wraparound process based on the family’s needs.

D. Crisis plans help prevent triggering events that have precipitated past crises and establish guidelines and support for families when crises do occur. Crisis plans utilize existing strengths and supports of the immediate family, extended family, informal support, and professional supports in an effort to empower the family and their natural and informal supports. Crisis plans are individualized and frequently reviewed for effectiveness and appropriateness. A crisis planning worksheet is used to help the team determine antecedent/triggering behaviors and to help guide the interventions and strategies required to assist the family. A crisis prevention plan summary (Addendum E) is created to help the family remember the strategies to use routinely to reduce the likelihood of a crisis happening, strategies to draw upon if the youth is escalating or ways to manage during a crisis situation.

4. Fiscal Strategies for supporting FCFC service coordination:

A. Two multi-system funding teams, the Community Resource Team and the Clinical Committee, have been created to assess funding needs for both in-home and out of home services for families. Family teams can present to either team on a weekly basis.

B. If funding is required to meet the service or intervention identified in the wraparound plan or crisis plan and the team is unable to secure other possible funding options, the team can present their request for community based resources to the Community Resource Team (CRT). The CRT is able to access funding, work with existing partnerships, or brainstorm other options for the family team in order to get the need met.

C. The family, along with the facilitator, parent partner, and other team members, can present their request to the Community Resource Team at the next scheduled meeting for assistance. Single-system funding, shared funding requests, FCSS, and Mental Health and Addiction Recovery Services Flexible Funds are monitored and allocated through the CRT. If funding is required prior to the CRT’s next meeting, the Community Wraparound Administrator may email the CRT to request a short-term financial commitment until a review can be arranged. Emailed requests can also be used to modify requests or addendums after teams have already presented face to face to the CRT. If the amount is under $200 and related to safety concerns, emergency food or transportation, or family enrichment, the Community Wraparound Administrator can approve the request. The CRT reviews summer camp expenses each year and assuming the availability of
funds, grants the Community Wraparound Administrator the discretion to approve one week of overnight summer camp or the equivalent per youth in the household as it relates to their Wraparound Plan and the family’s budget/financial needs.

D. The Community Resource Team reviews individual service coordination plans and funding requests to determine adherence to the Community Wraparound process, identifies funding options or barriers to implementation, and evaluates appropriateness of use of shared-funding agreements, Mental Health Flexible Dollars, and FCSS funds. CRT funding decisions are made based on the Wraparound plan, needs, safety concerns, family financial resources, and community resources. Plans are reviewed at the time of the initial request and at least every ninety days.

E. The Community Wraparound Administrator facilitates and supports the Clinical Committee (CC) which is a multi-system funding team for out-of-home supports. The Clinical Committee is available to meet weekly to assess and review out of home placement requests relative to appropriate level of care and appropriate funding sources. The committee reviews out of home placements approximately 45 days after initial placement, and approximately every 90 days until the youth is returned to their home.

F. As a result of the collaboration and data review within the public system directors, there has been a decrease in the duplication of services provided to families allowing for the reallocation of resources. Policies have been established to minimize the number of youth in out of home placements as well as the amount of time youth spend when placed. In addition, providing shared funding agreements between systems has maximized resources across the county and ensured plans are funded regardless of families’ system involvement.

G. Current funding for the implementation of Community Wraparound is provided through multiple funding sources. Butler County Department of Job and Family Services, Butler County Mental Health and Addiction Recovery Services Board and Butler County Board of Developmental Disabilities pool funds to provide staffing, training, equipment, etc. Parent Advocacy Connection (NAMI) and the Family Centered Services and Supports Funds support parent partners as part of Wraparound. Community Wraparound receives some income from the Home Choice program for providing transition supports for youth coming out of residential treatment. When service coordination plans require funding for implementation of recommended services/supports, the CRT and Clinical Committee access the following (as appropriate to the need of the family and the requirements and/or restrictions of the funds):

1. Mental Health and Addiction Recovery Services Flexible Dollars
2. Family Centered Services and Supports Funds
3. Single system funding
4. Shared system funding agreements, including a parent portion based on the Mental Health and Addiction Recovery Services Board’s sliding fee scale

H. The Family & Children First Council with the directors/leaders of all public child and family-serving systems, provides the collaborative planning, decision-making, and financing for the overall system of care in Butler County. This committee identifies systemic needs, gives leadership to filling gaps in service, sets goals and guidelines, determines data needs for decision-making, reviews data on a regular basis, uses data in yearly planning processes, and analyzes evaluation and quality improvement processes to ensure they are useful and workable.

5. Quality Assurance of Service Coordination Mechanism

Butler County’s Service Coordination Mechanism is reviewed annually and updated as needed. The description of the mechanism is distributed to all members of the Family & Children First Council, to any interested party upon request, and is posted to the Family & Children First Council website. Quality assurance of the implementation of Community Wraparound is an ongoing process. By assessing referral sources and basic demographic information including, but not limited to, school district, educational placement, system involvement, and medical needs, the FCFC is able to determine where additional education and training may be needed and/or how to best inform the appropriate systems or agencies of the service needs/gaps in the community. Trends are discussed at both the Community Resource Team and Clinical Committee meetings when funding is requested by family teams.

In addition, program outcome and process data are presented to the public child-serving system directors at least annually for review, discussion, and as appropriate, decision regarding changes in design, sustainability, etc. The effectiveness of Community Wraparound is tracked using the following procedures:

A. All levels of the service coordination process are evaluated. Each Family Discovery, Wraparound Plan, Crisis Plan, Safety Plan as needed, Transition Plan is reviewed by the Community Wraparound Administrator to ensure fidelity to the Wraparound model as well as accountability to families and teams. Families are also provided the opportunity to review and modify documents prior to distribution to their teams.

B. Tools from the Ohio Quality Management Manual written by Vroon VanDenBerg have been modified for use by the Community Wraparound Administrator and Community Wraparound Facilitator/Coach for coaching and quality assurance. At the individual team level, satisfaction surveys are completed to assess overall adherence to Wraparound values. Additional data is
collected relative to family empowerment, satisfaction, and youth functioning through the standardized assessments. Data are quantified and reported to monitor needs and trends.

C. The public child-serving system directors provide oversight for projects that have multi-system impact and/or require multi-system funding. Compliance with program specific standards is monitored programmatically by service providers and systemically by the directors.

D. As noted above, disputes are filed with the Butler County Family & Children First Council Director and are used as part of the annual evaluation of quality assurance.

E. Improving quality service coordination procedures and expanding excellence within the Community Wraparound program are ongoing goals. Professional development, monthly staff meetings, individual supervision, and group and individual coaching sessions ensure a high quality model, subscribing to the National Wraparound Standards, is being performed.

F. Employees are also provided with a Butler County Community Wraparound policy handbook which outlines the different steps and expectations in the Community Wraparound process. The Service Coordination Mechanism is included in the handbook and is reviewed and updated at least annually.

Addendums A—F

A. Referral Packet

B. Releases of Information
   B1. Referral Release
   B2. Team Release
   B3. CRT Release
   B4. Clinical Committee Release

C. Confidentiality Agreement

D. Individualized Family Service Coordination
   Plan (Wraparound Plan)

E. Crisis Plan

F. Family Service Report/Report on Outcomes