



**ROCK COUNTY HUMAN SERVICES DEPARTMENT
ADOLESCENT SERVICES
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**COORDINATED SERVICES TEAM
SPECIAL COORDINATING COMMITTEE MEETING MINUTES**

DATE: July 27, 2012

PLACE: Job Center

PRESIDING: Rebecca Westrick

PRESENT: John Dalee, Lance Horozewski, Tera O'Connor, Alicia Oczus, Carol Trout, Carol Plante, Barb Werfal, Greg Winkler, Don Oswald, Judy Schroeder, Jennifer Patridge, Gabrielle Berget, Cheri Salava, Amy O'Brien, Jennifer Fay, Kelley Fearn, Steve Howland

ABSENT: Amanda Galaviz, Sue Vinson, Beth Blum, Marci Bullen, Michael Gray, Nancy Hagen, Misty Frutiger, Ryan Trautsch, Kate Flanagan

The meeting was called to order at 8:35 a.m.

INTRODUCTIONS

Introductions were made around the room.

REVIEW OF MINUTES

Minutes were reviewed. Tera O'Connor made a motion to approve the minutes; Cheri Salava seconded the motion. All in attendance approved.

CITIZEN PARTICIPATION AND ANNOUNCEMENTS

Since the CST program is now a public body, the public is welcome to attend meetings. Steve Howland of the Rock County Board was in attendance.

ELECTION

Lance Horozewski was nominated to be Chair Person by Tera O'Connor; Gabrielle Berget seconded the motion. Jennifer Patridge was nominated to be Vice-Chair Person by Cheri Salava; Lance Horozewski seconded the motion. All in attendance approved both nominations.

ELIGIBILITY POLICY

A subcommittee worked on the Eligibility Policy. There was an expansion of the Target Group. Children with complex needs, not just SED children, will now be served. SED children will remain a priority. The program takes referrals not only from County services but people in the community as well. Tera made suggestions for changes to the policy.

Children and families eligible for services from the Coordinated Services Team (CST) will meet the definition of severe disabilities used by the State Office of Mental Health and specified in State Statute 46.56.

ELIGIBILITY POLICY (cont.)

10% of children have a SED diagnosis and/or meet(s) the following conditions:

- A. Causes substantial limitations in the child's ability to function in his or her family, school, or community and with his or her ability to cope with the ordinary demands of life.
 - 1. Causes the child to need services from two (2) or more services systems of care.
 - 2. Mental Health diagnosis not required but a priority.
 - 3. Child is at risk for out-of-home placement or is placed outside of his or her home (excluding foster care level) with a targeted date of return in 30 days or less.
 - 4. Interventions have been tried, barriers to accessing services, or a need for service coordination.

- B. In addition, the child/family will meet the following conditions:
 - 1. A child will be eligible to open for services until his or her 18th birthday.
 - 2. The child is a Rock County resident or the parent(s)/guardian(s) have resided in Rock County for at least 6 months.
 - 3. Agree to engage in partnership and sign releases with the Coordinated Services Team.
 - 4. Participate in a family-centered, strength-based team approach.
 - 5. Participate in the plan of care as developed by the family team.

Judy Schroeder made a motion to approve the Eligibility criteria. Greg Winkler seconded the motion. All in attendance approved.

The CST program has a big need for Peer Support. Wisconsin Family Ties has offered to assist the County in training people to be Peer Advocates.

The Behavior Health Redesign Steering Committee looks at gaps in services and how services can be coordinated for families with mental health issues.

Each CST worker can have 10-12 cases, but no more than 4 in the assessment phase at one time. There are 4 service coordinators.

MISSION STATEMENT

A subcommittee (consisting of Alicia Oczus, Gabrielle Berget and Amy O'Brien) was formed to work on the Mission Statement for the CST program. A rough draft of the statement is "Our mission is to (collaborate, partner with, empower) children and families with (complex, multiple) needs to be _____" (needs to be finished). Two suggestions were "to be successful and safe in their home, school and community" and "To help families gain through voice, access and ownership."

Other ideas for the Mission Statement are:

"Our mission is to collaborate with children and families to be safe and successful in the home, school and community through voice, access and ownership"

MISSION STATEMENT (cont.)

"Our mission is to collaborate with children and families to be safe and successful in the home school and community through a family-centered and strength-based team"

Requests from committee members were that the wording should avoid "professional jargon" and should be easy for the community to understand and that the mission statement should be reflective of the unique features of the CST philosophy and not be too general.

There are three underlying goals of the CST program. 1) Parents should feel they have a **voice** in decisions that are made about their child and family. This includes being listed to and respected. 2) The child and parent should have **access** to the services needed to meet their needs. 3) **(Ownership)** The parent agrees with and is committed to plans concerning their child and family.

The Core Values of the CST program are: family-centered, consumer involvement, builds on natural and community supports, strength-based, unconditional care, collaboration across systems, team approach across agencies, ensuring safety, gender/age/culturally responsive treatment, self-sufficiency, education and work focus, belief in growth, learning and recovery, and outcome oriented.

Additional Information

In the past, in-home counseling agencies have been able to disenroll clients from the Medical Assistance HMO and make it straight Title 19, which would cover their services. Recently, the HMO reviewers stated they would no longer cover in-home services. Agencies are putting pressure on the HMOs to provide in-home; they feel the contracts are written that way. The HMOs say 'no they don't have to' and the State is saying 'yes they have to so we're not going to disenroll into Title 19.' The State has given agencies/families a strategy to use until this can be resolved, which is that when a family gets the denial letter, they should write across the letter "I Appeal" then sign and date it. It can then be sent to the address on the denial letter for processing. Staff there will review why it was denied by the HMOs; then take the clinic information to the SED reviewers to see if it did meet medical necessity. If State staff determines it did meet medical necessity, it then goes back to the HMO.

NEXT MEETING

The next meeting is scheduled for Friday, September 14, 2012 at the Rock County Job Center, Room J, from 8:30 a.m. to 10:00 a.m.

Lance Horozewski made a motion to adjourn the meeting; Don Oswald seconded the motion. Meeting adjourned @ 10:45 a.m.

Respectfully submitted,

Diana Daly

cc: Committee Members
Marie Danforth

Enclosures