

Notes from Regional CST Meeting: February 18th, 2009

Roundtable: Current number of family teams and service coordinators. Share your recent accomplishments and biggest challenge.

Dunn Co.- 5 ISP teams, 10 family teams. Working to recruit new committee members. Not real involved in the RPG grant yet.

Pierce Co.- 10 teams. Accomplishment is that they have school staff helping to coordinate 1 team.

Douglas Co.- 31 teams and 13-15 on a waiting list. Increase in referrals from school and psychiatry (inter agency). Challenge: getting schools to facilitate their own teams. Their project is still being looked at as a program within one agency.

Monroe Co- 5 teams Accomplishment: They have 2 school social workers that have been trained. Challenge: the difficulty in working with families when there are AODA issues. There is also a lack of resources related to AODA services.

Buffalo- 4 teams that staff are meeting with currently. Project is just getting started. Schools are aware of the service and are now sending referrals through.

Polk- 22 teams. Accomplishment: Piloted with 2 schools and are accepting referrals from them. Did a short training during an in-service and is working on/preparing for a full day training. Howard is assisting with this. Challenges: ongoing struggles with system change from the top down, integration of Children's Waivers and sustainability issues (grant ends in 2010)

Chippewa Co.- 9 teams Challenge: resistance from staff to do wraparound. Accomplishment is that the new director is moving forward with incorporating the teaming philosophy into their agency.

St. Croix- 29 teams Challenge: trying to blend together the requirements of multiple programs (Children's Waivers, CST and soon CCS) Some staff will be responsible for all three areas and trying to do so in an efficient manner without a lot of repetitive paperwork, documentation, etc.

Eau Claire- 54 teams and recently started a waiting list. 7 Service Coordinators Accomplishment: revamped Coordinating Committee, developed new subcommittees, good plans for sustainability, working with schools and Restorative Justice to coordinate and facilitate teams. Challenge: System change within the agency. Continued work needed with changing practice, changing language, etc.

Burnett- 11CST teams, 4 RPG teams. Accomplishment: Had 1st successful completion of team and the parent is joining the Coordinating Committee. Wants to ensure that every family that wants a team gets it. Challenge: Instability of staff

Barron Co: 2 teams and 2 referrals. Taking system change approach from the top down; Coordinating Committee is a sub group of the Safe and Stable Families Committee; Focusing on CST not being a Health and Human Services Program; modeling CST process for others. Challenge: how to blend staff, Children's Waiver's, etc. with IVE dollars going away, etc.

Howard reminded that Technical Assistance is available by him or Dan

Children's Waiver: Katie Sepneski and Cheryl Lofton via phone from the Bureau of Long Term Support, Children's Services Section

Katie highlighted the CLTS Waivers.

- Three kinds: Physical Disability (PD), Developmental Disability (DD), Severely Emotionally Disturbed (SED)
- Medicaid program, funding of last resort
- Serves kids under age 22 or 18 if Family Care is available
- Child needs to be in an eligible setting (generally Treatment foster care and lesser)
- Child is eligible and on waiver until they are not found eligible or age out
- Can be involved with CST, CCS, CSP while on waiver
- Need to meet institutional level of care
- Have to meet functional and financial eligibility
- Process is a thorough Assessment is complete, an ISP Plan is developed from the assessment, then sent to the Dept. who will review and approve plan. The ISP is a fluid document and changes should be documented as needed. Staff at the Dept. only need to see 1x year.
- Not a crisis program.
- If child does not have an MA source, when they are on CLTS Waiver will get a County MA source
- Most policies for CLTS Waivers are same as CIP
- Cannot use waivers to fund court ordered services or CPS/JJ Costs
- Crisis slots available for kids with a significant change in conditions. To obtain, must identify situation, the services needed, etc. and the Dept. will review and approve if applicable. Child must already have a DDB determination.

March 10- Waiver Basics Training in Madison 9am-4pm. In May or June training will be done in the Chippewa Area.

State staff offered to come meet with counties, participate in conference calls to answer questions, etc. Programs were encouraged to direct service questions to: Becky Boyea, Bureau of Long Term Support, Children's Waiver Specialist for the Western Region as a first point of contact. Her contact info is: 715-723-5542 xt. 4302
rebecca.boyea@wisconsin.gov

There was a series of question/answers regarding various topics. Extensive discussion took place in regards to the billing issue of having different staff performing different case management functions and how to account for that on the waiver. It was decided that there

would need to be further discussion about this at the State Level between the various programs and again with the staff at the direct service level.

Potential Agenda Items for next Regional Meeting which will be on August 5th:

- Different samples or ways to show cost savings/sustainability for counties in addition to the sustainability documents on the WI Collaborative website
- How do you communicate system's change and move this forward to integration
- Suggestion was maybe to provide some training at a Director's meeting. Fred Heffling will ask about this as the Director's meet on Friday

There is a 2 day Service Coordination 101 Trng. scheduled for March 17-18
Howard would encourage AODA staff to attend as part of the RPG grant.