

Coordinated Services Team and Integrated Services Project Evaluation Tool Guidelines

For questions or more information, please contact:

Dan Naylor, CST Project Specialist
 White Pine Consulting Service
 (715) 258-5430
 Email: whitepine@mwwb.net
 Website: www.wicollaborative.org

PART A: Youth and Family Team Evaluation Tools		
Evaluation Tool	Who is responsible for completion?	When is it due and to whom?
Assessment Summary of Strengths & Needs <i>(Includes CANS-Comprehensive items)</i>	With the guidance of the Care Coordinator, this tool is completed initially with the family and youth, and then reviewed and updated by the Family and Youth Team (typically takes 1 - 2 team meetings). Identified strengths and needs are then used in the development of the Plan of Care.	State Statute 46.56 doesn't specify a timeline for completion – it is recommended the assessment be completed within 30 days of enrollment. Each team should discuss distribution of the documents including a discussion of confidentiality. Completed document should be kept by the care coordination agency and available for review if requested.
Plan of Care (including Crisis Response Plans)	The Child and Family Team prioritizes needs as identified in Assessment Summary of Strengths & Needs and develops the Plan of Care and Plans for Crisis (typically takes 3 – 5 team meetings).	According to State Statute 46.56, the Plan of Care should be completed “within 60 days after the date on which the application was approved”. The Plan of Care and Plans for Crisis become tools for the Team to review and assess progress toward needs being met. Each team should discuss distribution of the documents, including a discussion of confidentiality. A copy of the completed document and updates are kept by the care coordination agency and available for review if requested.
Evaluation and Treatment Data, and the CANS	On an ongoing basis, the Care Coordinator tracks information related to the identified child in the areas of: behavior, education, contact with the juvenile justice system, service utilization, and living environment. CANS data is to updated every 6 months. The initial CANS scores and final/discharge CANS scores are submitted to the State via the PPS system.	Data for each child enrolled is transmitted electronically to the State via the PPS system, typically by the Care Coordinator, on an ongoing basis (at a minimum of every 6 months). Site-specific and statewide information (provided annually by the Bureau of Prevention, Treatment and Recovery (BPTR) in Statewide Annual Report) should also be shared with the Coordinating Committee as available.
Team Closure Surveys <ul style="list-style-type: none"> • <i>Family Closure Survey</i> • <i>Team Member Closure Survey</i> 	Care Coordinator provides to team members and family to complete upon team closure.	Results should be shared periodically with the Coordinating Committee as collected to be used as a system development tool.

PART B: Project and System Evaluation Tools

Evaluation Tool	Who is responsible for completion?	When is it due and to whom?
Work Plan for Upcoming Budget Year	The Initiative Coordinator typically takes the lead – should be completed with Coordinating Committee input.	Completed annually, BPTR staff send notice and forms to CST Initiative staff. Due 60 days prior to the new contract period.
Detailed Budget Request for Upcoming Budget Year	The Initiative typically takes the lead – should be completed with Lead Agency and Coordinating Committee input.	Completed annually, BPTR staff send notice and forms to CST Initiative staff. Due 60 days prior to the new contract period.
Actual Expenditures for Past Budget Year	The Initiative Coordinator typically takes the lead – should be completed with Lead Agency and Coordinating Committee input.	Completed annually, BPTR staff send notice and forms to CST Initiative staff. Due 60 days prior to the new contract period.
Family Satisfaction Survey	Annually (typically Sept/Oct), the BPTR works with CST sites to distribute surveys to families enrolled in CST. The survey is completed by the family. The Care Coordinator may offer support – answer questions, clarify, encourage completion, etc.	Site-specific and statewide information (summary provided by BPTR) should be shared with the Coordinating Committee annually.
Provider Satisfaction Survey	The Initiative Coordinator typically takes the lead with Care Coordinators and the Coordinating Committee to arrange survey distribution and collection details. Surveys should be provided to all service providers who are currently on teams or who have served on teams during the year.	Recommended completion annually. Results are shared with the Coordinating Committee annually and used as a system development tool.
Annual CST Initiatives Survey	The Initiative Coordinator typically takes the lead in completing the online survey with input from the Coordinating Committee. The BPTR will send information including link to the online survey as the completion due date approaches.	Completed annually via web survey. The BPTR will send information including a link to the online survey as the completion due date approaches. Results are shared with the Coordinating Committee annually and used as a system development tool.