



CHILDREN'S SYSTEM OF CARE: GUIDING DOCUMENT

The Wisconsin Department of Health Services supports the behavioral health of state residents by building systems of care that promote wellness and empower people to achieve their fullest potential. This work includes the development of a system of care for children and families.

Children and families may access the supports of Wisconsin's public behavioral health system through Coordinated Services Teams (CST) Initiatives and the Comprehensive Community Services (CCS) Program.

CST is an intervention and support model based on the wraparound philosophy. It is a team-centered, strengths-based assessment and planning process. Wraparound reduces barriers to engagement, increases youth and family participation, and achieves positive child and family outcomes.

CCS is a program for individuals who need ongoing services for mental health and substance use concerns beyond occasional outpatient care, but less than the intensive care provided in an inpatient setting. A team of service providers works with the participant to develop a treatment and recovery plan to meet the individual's unique needs and goals. This approach promotes better overall health and life satisfaction.

Wisconsin's Children's System of Care blends the wraparound philosophy of CST with CCS, resulting in a stronger, more sustainable network of quality services for children, youth, and families united under a set of core values and principles. This enhanced service delivery model allows more children to be served due to better investment of limited resources.

Principles of the Wraparound Process for Wisconsin Children's System of Care

- **Family Voice and Choice**
Family and youth/child perspectives are intentionally elicited and prioritized during all phases of the wraparound process. Planning is grounded in family members' perspectives and the team strives to provide options and choices that reflect the family's values and preferences.
- **Team-Based**
The wraparound team consists of individuals agreed upon by the family and committed to the family through informal, formal, and community support and service relationships.
- **Natural Supports**
The team actively seeks out and encourages the full participation of team members drawn from family members' networks of interpersonal and community relationships. The wraparound plan reflects activities and interventions that draw on sources of natural support.

- **Collaboration**

Team members work cooperatively and share responsibility for developing, implementing, monitoring, and evaluating a single wraparound plan. The plan reflects a blending of team members' perspectives, mandates, and resources. The plan guides and coordinates each team member's work towards meeting the team's goals.

- **Community-Based**

The wraparound team implements service and support strategies that take place in the most inclusive, most responsive, most accessible, and least restrictive settings possible and that safely promote child and family integration into home and community life.

- **Cultural and Linguistic Responsiveness**

The wraparound process demonstrates respect for and builds on the values, preferences, beliefs, culture, and identity of the child, youth, family, and their community.

- **Individualized and Developmentally Informed**

To achieve the goals laid out in the wraparound plan, the team develops and implements a customized set of strategies, supports, and services.

- **Strengths-Based**

The wraparound process and the wraparound plan identify, build on, and enhance the capabilities, knowledge, skills, and assets of the child and family, their community, and other team members.

- **Unconditional**

The wraparound team does not give up on, blame, or reject children, youth, and their families. When faced with challenges or setbacks, the team continues working toward meeting the needs of the youth and family and achieving the goals in the wraparound plan until the team reaches agreement that a formal wraparound process is no longer necessary.

- **Outcome-Based**

The team ties the goals and strategies of the plan to observable or measurable indicators of success, monitors progress in terms of these indicators, and revises the plan accordingly.

Areas to Consider When Integrating CST and CCS

Readiness

- Local leadership supports blending CST and CCS and promotes the principles of practice.
- Internal partnerships exist or can be developed to assist with the process.
- Fiscal policies and sustainability are explored and revised to support the integration.

Practice Change

- There is a single point of access to needed supports and services, including for underserved populations.
- The intake process includes screening and assessment.
- The treatment plan and services are family-driven, youth-guided, and strengths-based.
- Families receive education and skill building.
- Evidenced-based practices are used and supported.
- Practice is culturally humble and linguistically responsive.
- Children, youth, and families receive services to meet their needs for mental health and/or substance use disorder.
- Case coordination and a single treatment plan are in place for the child, youth, and family.

Staff and Human Resources Development

- Learning collaboratives, coaching, training, and supervision are available for all staff.
- Consumer, community, and staff champions are identified, educated, and encouraged.

Coordinating Committees

- There is a structure in place that provides oversight of CST and CCS.
- The benefits and challenges in combining the committees are discussed and addressed through a plan
- There is a high level of parent and youth involvement in the committees.

Data

- Quality improvement and evaluation are part of the system of care.
- Outcomes are collected and drive program improvement.

Funding

- There are sources for funding.
- Funding can be blended across services.
- Gaps in funding are able to be addressed.