



Warren County  
Educational Service Center  
*"Champions for Children"*



WARREN COUNTY FAMILY + CHILDREN  
FIRST COUNCIL

# Service Coordination Mechanism 2025





## Warren County FCFC Service Coordination Mechanism 2025

### **(A) Overview and Purpose of Service Coordination**

The Warren County Family & Children First Council exists under the Ohio Revised Code to improve the well-being of families and children. As a collaboration of public and private child and family-serving systems, entities, and families, the Council supports initiatives that increase the likelihood that children can grow up safe and healthy, surrounded by the support of their families and communities. The Warren County Service Coordination Mechanism outlines how families and children with complex needs can access service in our local system of care. A System of Care is described as follows: A coordinated network of community-based services and supports that are organized to meet the challenges of children and youth with multiple needs and their families.

The Warren County Service Coordination Mechanism assists in serving children, young adults and their families in the most productive, coordinated, and fiscally responsible manner. As an integral component of a local system of care, service coordination is a process of service planning and system collaboration that provides individualized services and supports to families who have needs across multiple systems. It is child-centered and family focused, with the strengths and needs of the child and family guiding the types and mix of services to be provided. This plan is not intended to override agency providers, but to supplement and enhance supports that are currently available within Warren County.

The Warren County Service Coordination Mechanism is locally driven and is written in compliance with the Ohio Revised Code. This plan aligns with the values of the Ohio systems of care and the Ohio Department of Children and Youth's mission to promote positive, lifelong outcomes for Ohio youth through early intervention, quality education, and family support programs.

#### **Framework for Service Coordination in Warren County:**

The Warren County Family & Children First Council Service Coordination Mechanism emphasizes individualized service planning. Building upon the strengths of services in the community that are currently working for families, and when needed, proposes new services, supports, and/or strategies to be added to address unmet needs. Service Coordination and Wraparound are collaborative, coordinated, cross-system team-based planning processes implemented to address the needs of youth and families where those needs are multiple and complex.



This plan recognizes and adheres to the following values that are integral to the Service Coordination Process: Services are delivered using a family centered approach, services are responsive to the cultural, racial and ethnic characteristics of the population being served, service outcomes are evaluated, available funding resources are fully utilized and integrated, home and community supports are utilized as needed, specialized treatment for difficult to serve populations and evidenced based treatments are encouraged. Additionally, duplicate services are reduced or eliminated, and families and youth are fully involved in decision making and are provided with options for family advocacy and support. The goal of the Warren County Service Coordination Mechanism is to keep Warren County youth in their homes, schools and community and in the least restrictive setting.

### **1. Service Coordination Review Team**

WCESC Coordinated Care Director, The Family and Children First Council (FCFC) Coordinator, FCFC Family Representatives, and the FCFC Executive Committee were involved in the initial development, review, revision, and approval of the Warren County Service Coordination Mechanism.

Systems partners (as outlined in ORC 121.37) included: the Warren County Board of Developmental Disabilities, Warren County Educational Service Center (including Early Intervention/Help Me Grow), Warren County Department of Job and Family Services (including Children Services), Warren County Juvenile Court, Mental Health and Addiction Recovery Board serving Warren and Clinton Counties.

***The 2025 Warren County Service Coordination Mechanism was presented to and approved at the November 2024 Council Meeting. Please see FCFC meeting minutes for November 21, 2024, for additional information.***

### **2. Accessing Service Coordination**

Service Coordination is available to youth ages 0 to 21 with complex needs and systems involvement. Services are free and provided regardless of income level. Families seeking services due to their needs not being met by traditional agency systems or who desire a coordinated, cross-system approach can access services as outlined below:

#### **➤ Multi-Need Children Ages 0-21**

Child serving agencies in Warren County are committed to family preservation. Warren County Family and Children First Council (FCFC) utilizes the Clinical Committee and Family Clinical Teams to work with multi-need, multi-system children who are eligible for services from Help Me Grow, Home Visiting, Early Intervention and Early Head Start and with any eligible child ages 0-21. The Clinical Committee is comprised of agency representatives from Warren County Board of Developmental Disabilities (WCBDD), Warren County Juvenile Court, Mental Health and Recovery Services of Warren and Clinton Counties (MHRSWCC)

and Warren County Children Services. It also includes School Representatives, a Parent Representative, and the Coordinated Care Director.

- ❖ The Family Clinical Team is made up of agencies that provide services to the child or youth. Family Clinical Teams can include the following but not limited to family, natural supports as chosen by family, Warren County Juvenile Court, Warren County Children Services, Solutions Community Counseling and Recovery Centers, Beech Acres Parenting Center, local school district, Warren Co. BDD, Warren County Coordinated Care and other providers both public and private. Families can invite a family advocate, mentor or other support person.

➤ **Admission Criteria for Service Coordination/Wraparound:**

- Ages 0-21
  - Resident of Warren County
  - The family agrees to participate in service coordination
  - Multi-systemic needs whose service and supports are not being adequately addressed at the time of the referral
- ❖ Service Coordination and Wraparound services are available to youth no matter their involvement with child protective services or juvenile court involvement. Youth who are in custody of child protective services, juvenile court placements, adjudicated youth and general out of home placements are not eligible for FCSS Funding however, they are eligible for Service Coordination and Wraparound services.
    - Child protective services has a variety of tools available to assist with at-risk youth and families, however, those are short-term processes, the youth and family could be referred to Coordinated Care for longer-term planning and coordination. Child protective services play an integral role in protecting the safety and well-being of youth in the community, and this relationship should be fostered to maintain support for those youth and families who are at-risk for further system involvement.
    - As outlined in O.R.C. 121.37(E), the FCFC Service Coordination Process and Service Coordination Plan must account for youth alleged unruly and identify methods to divert a youth from the juvenile court system. This revised guidance requires that service coordination also be available for youth that are adjudicated unruly or delinquent.
  - ❖ If a child is being served by FCFC Service Coordination/wraparound services through Warren Co. FCFC and a referral is made to Early Intervention, upon the

determination of eligibility, the lead provider of service coordination should be the EI Service Coordination provider to assure compliance with O.R.C. 5123.02. The identified county FCFC Service Coordinator and/or FCFC Service Coordination Team should support and assist with the family's Individualized Family Service Plan (IFSP) as needed. If a child/family enrolled in EI needs support across multiple systems, the county FCFC Service Coordinator and/or FCFC Service Coordination team should be available to support and assist as needed.

- ❖ On July 1, 2022, as a part of Ohio Medicaid's effort to launch the next generation of Medicaid, ODM launched OhioRISE (Resilience through Integrated Systems and Excellence), a specialized managed care program for youth with complex behavioral health and multisystem needs. A Child and Adolescent Needs and Strengths (CANS) assessment is required to determine a child or youth's eligibility for OhioRISE.
  - Coordinated Care works diligently with our local CME, CareStar and/or Aetna, to ensure youth/family are referred/connected to services as needed. Regardless of youth/family enrollment with OhioRISE, Service Coordination can still be accessed for any youth with needs across multiple systems.
  - Due to the restrictions of FCSS funding, enrollees are not permitted to utilize FCSS funding for service coordination activities when they are also enrolled in OhioRISE and are receiving Care Coordination through CareStar or another CME. If a youth enrolled in OhioRISE is receiving Service Coordination with Coordinated Care, the Service Coordinator must coordinate benefits with Aetna Care Coordination directly.

➤ **Criteria For Continued Service Coordination/Wraparound:**

- Age 21 or below
- If age 18 or older the youth is agreeable to continue to receive services
- Continue to be a resident of Warren County
- The family is an active participant in team meetings and planning
- The team continues to make progress towards goals
- The youth continue to maintain needs in two or more areas

### 3. Outreach and Training on Service Coordination



- Families and system providers are informed about FCFC's service coordination through various channels (including but not limited to):
  - a. Annual community training open to families, community partners, social services agencies + more.
  - b. Brochures detailing services are distributed across the county, including but not limited to juvenile courts, mental health agencies, health departments, hospitals, and schools.
  - c. Participation in community and school resource fairs to address families' questions.
  - d. Presentations to agencies, community groups, FCFC Council & subcommittees, and schools.
  - e. The WCFCCFC website contains the updated annual report, referrals, and link to service coordination information.

In addition, the FCFC Coordinator, and other FCFC Team members regularly attend community meetings and local agency staff meetings to share new/changing information related to service coordination.

**(B) Procedure for referring a child and family**

➤ **Multi-Need Children 0-21**

In August 2001, the Coordinated Care program was founded by the Warren County Educational Service Center and the Warren County Commissioners with the support of Warren County Family and Children First Council member agencies, including those that are part of the Clinical Committee. Coordinated Care was designed to implement services and support for children and youth ages 0-21 with complex needs. The goal of Coordinated Care is to provide a child-centered, family-focused venue for those needing services not addressed by traditional systems. Coordinated Care has become the primary intervention for children and youth with complex needs to access service in our local system of care.

The process starts when a family, individual, or agency representative identifies a need for a coordinated, strength-based planning approach for a struggling youth, child + family. To initiate this process a referral should be completed and submitted to Coordinated Care. The referral can be found at [www.warrencountyesc.com](http://www.warrencountyesc.com) under Coordinated Care Program. Families and professionals can submit a referral by contacting Kevin Stevens, Coordinated Care Director, at 513-695-2900 Ext. 2916 or submit a referral by email to [Kevin.Stevens@warrencountyesc.com](mailto:Kevin.Stevens@warrencountyesc.com). Families and agencies also may contact

Holly Wooldridge, FCFC Coordinator at 513-695-2900 Ext. 1653 or email [Holly.Wooldridge@WarrenCountyESC.com](mailto:Holly.Wooldridge@WarrenCountyESC.com)

Referral date will be documented and reviewed upon receipt and Coordinated Care staff will contact the family within 10 days. The process for service coordination/wraparound is explained to the family/caregiver and an initial family meeting is scheduled, upon first contact. The family is informed and asked about OhioRise. Current team members and current service and service providers are identified by the family. The family is provided with an opportunity to express needs and offered voice and choice when determining which local agencies they will request additional support from. ***The completed Coordinated Care referral form is utilized by Clinical Committee.***

- ❖ Coordinated Care Service Coordination/Wraparound services from least intensive to most intensive include but are not limited to:
  1. Referrals prevention groups – at-risk children
  2. Parent training – parents of children displaying behavior problems
  3. Referral to Family Support Specialist
  4. Unruly Diversion Services – unruly children
  5. Service Coordination/Wraparound – multi-need children exhibiting behavior problems
  6. Referrals for intensive home-based therapy – multi-need children at high-risk of placement
  7. Respite services – multi-need children who are in danger of needing residential treatment or are returning from residential treatment
  8. Truancy prevention/intervention
  9. Mentoring services
  10. Residential Placement as a last resort

Not all youth referred to Coordinated Care for Service Coordination or Wraparound require the same level of service or assistance. The Warren County Family and Children's First Council recognizes that families have different levels of needs. Level of service will be determined by level of need, family/youth agreeing to the level of service and the present risk to self and the community. Some families can be served through information and referral. Other families will need a higher level of service than others and may obtain the most appropriate service listed below:

➤ **Information and Resource Referral**

For youth whose needs can be met through traditional services that are currently available within Warren County or who may not have multi-systemic needs.

➤ **Level I (Basic Case Management)**

Level I/early intervention is intended for children and families who are not currently meeting the criteria for service coordination or wraparound services but still could benefit from additional support through a Coordinated Care Case Manager.

Unruly youth who do not have multi-systemic needs or their needs can be met through traditional services are provided services on this level. Youth who are at risk of future system involvement may be served through level I services.

Assessment: Ohio Child and Adolescent Needs and Strengths (CANS).

Case consultation with family/guardian, school, and/or present service providers already in place. If services meet the needs of the family/guardian and child, then level I services can be offered and are only provided with the consent of the parent/guardian. Unruly and/or diversion services are offered. Monthly face-to-face case management is offered. This service is not considered to be service coordination or wraparound. Services at this level are intended for education of family/guardian and child, referral and prevention and general guidance. The goal at this level is to help meet the present needs of the family/guardian and child in order to divert them from further system involvement. At any point in this process the family/youth, Coordinated Care Case Manager, school or agency can request a higher level of service.

Youth who are receiving Level I services can be moved up to Level II or III service if it is later determined that the youth has multi-systemic needs that are not being met at the present level of service. A referral for service coordination/wrap can be made by family, agency or school or other professional. The dispute resolution process is open to all families and youth on Level I, who believe a higher level of service is needed (i.e. service coordination/wraparound).

➤ **Level II (Service Coordination)**

Level II Services are reserved for youth who have multi-systemic needs, needs are not being met through traditional services and supports and who could benefit from the coordination of services and systems to address individual needs of the youth and family.

Assessment: Ohio CANS and other assessments and evaluations as needed with development of input from the family/guardian, Clinical Family Team, and Clinical Committee. In addition, services and assessments will be tracked through OASCIS. Team membership will be guided by the family.



All of the above listed services for Level I youth and Service Coordination, development of Clinical Family Team services with guidance from the family/youth, Clinical Committee services, Juvenile Court services (if ordered) diagnostic assessments, regular outpatient mental health treatment services, Family Support Specialist, Intensive Home Base Services, Multi-Systemic Therapy, regular outpatient diagnosis and assessment services, Children Services (as needed or ordered, Court involvement (if ordered), services through WCBDD (if eligible), educational services and a person (s) of support as identified by the family/youth and out of home placement. Out of home placement is only considered when all other options have been exhausted but may be offered at this level. A Service Coordination meeting will be held at a minimum every 90 days and more often as needed.

Warren County FCFC accepts the following definition of Service Coordination as provided from the Ohio Family and Children First Guidance: A broad-based, neutrally positioned, youth and family-driven, cross-system (team) planning process by which previously identified and existing resources and supports are coordinated to determine the least restrictive plan of success for youth with complex needs.

### ➤ **Level III (Wraparound)**

Level III services are reserved for youth needing a higher level of service than what the service coordination model provides. This level of service is intended for children, youth and families needing a comprehensive team to develop a uniquely designed plan based on unmet needs. As an integral component of our system of care, service coordination and wraparound is a process of service planning and system collaboration that provides individualized services and supports to families who have needs across multiple systems. It is child-centered, and family focused, with the strengths and needs of the child and family guiding the types and mix of services to be provided. It is critical that services and supports are responsive to the cultural, racial, and ethnic characteristics of each family.

Assessments: Ohio CANS, Community Outcomes, Family Satisfaction, Family Support, School outcomes, Team Process and youth support and/or other assessments and evaluations with input from the family/guardian.

Youth on level III will be offered wraparound services that include all services listed on levels I and II. Warren County FCFC accepts the following definition of wraparound services as provided from the Ohio Family and Children First Guidance:

High-Fidelity Wraparound- A specific evidence-based intensive planning and facilitation process, utilizing a comprehensive team to develop a uniquely designed plan based on the youth and family's unmet needs. At Level III special emphasis will be placed on development of a team, planning, implementation, reviewing results and transition

programming. Team meetings will be held at least every 45 days or more often when needed.

The services at Level III are centered around the National Wraparound Initiative 10 principles: 1. Family voice and choice, 2. Team based, 3. Natural Supports, 4. Collaboration, 5. Community based, 6. Culturally competent, 7. individualized, 8. Strengths based, 9, Persistence and 10. Outcome based.

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

➤ **Multi-Need Children Ages 0-21**

- ❖ Coordinated Care serves as the lead provider for multi-need Clinical Committee children and is unless otherwise noted responsible for setting up service coordination/wraparound plan meetings. Coordinated Care consults with the family regarding date and time availability in scheduling the meeting. The family may initiate a meeting by contacting the assigned Coordinated Care Service Coordinator or by contacting Kevin Stevens at 513-695-2900 Ext. 2916 or at [Kevin.Stevens@warrencountyesc.com](mailto:Kevin.Stevens@warrencountyesc.com).
- ❖ Coordinated Care provides notice to the family, any identified family support persons, representatives from all appropriate agencies, a representative from the child's school district. In non-emergency cases a service coordination meeting is offered within 14 days of a referral. A written notice is sent to invited participants as soon as the date, time, and location have been set. In an emergency, a meeting is offered within seven days, and all participants are notified by phone or email or person as to the date, time, and location of the meeting. Coordinated Care works with the family to set the date, time and location of the meeting, taking into consideration the family's needs and limitations. The family may appoint someone of their choosing to assist in this matter. Families may invite a family advocate, mentor or support person of the family's choice to participate in any such meetings and to assist in monitoring progress.

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

- When receiving services, a parent/family can request a meeting at any time by contacting their Service Coordinator. Meetings are scheduled at the family's

convenience, and the facilitator will notify all team members of the details. Team members to invite are reviewed, and any additional team members are notified.

**(E) 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:**

- Coordinated Care's goal is to prevent out-of-home placements. In all service coordination/wraparound cases Coordinated Care, agency representatives, a school representative, and the family/invited support individuals meet to develop a service coordination/wraparound plan to provide community and home-based services. Service coordination/wraparound meetings should take place before an out of home placement occurs. If an emergency placement is unavoidable and needed immediately without time for a service coordination plan meeting prior to placement, a meeting is conducted within ten days of placement.
- Warren County established a pooled fund that is supported by Butler County Board of DD, Warren County Children Services, MHRSWCC and Juvenile Court. Parents/guardians and youth are partners in many pooled funding decisions and are permitted to receive least restrictive services in their community or voluntarily place their children. The primary purpose of service coordination/wraparound planning is to preserve the family. Least restrictive community based and/or in-home services are explored first. Services offered at service plan meetings through the pooled fund and other resources include but are not limited to:
  1. Respite
  2. Mentor services
  3. Parent Success
  4. Partial hospitalization
  5. Evaluations: CANS, Mental health, drug and alcohol, sex offender, risk assessments and cognitive functioning evaluations
  6. Residential Placement
  7. Reunification services through Coordinated Care and Solutions Community Counseling and Recovery Services.
  8. Intensive home-based treatment

Residential placement only occurs through agreement with the family. Parent/caregivers retain custody. If placement is necessary, the parent/guardian and team work together on completing the PASSS application as applicable, the Multi-System Youth application and/or use of local pooled funds.



- **Co-Pay:** The parent/guardian and team will work together on determining an appropriate copay if applicable. Failure of the parent/guardian to make timely copay payments may result in an application for child support to be filed. All parents/guardians with youth in placement may access the dispute resolution process.

If a youth remains in placement beyond his/her 18<sup>th</sup> birthday then child support or copays if applicable will continue to be paid to the Warren Co. Clinical Committee until one of the following occurs: the youth graduates high school, withdrawals from school, turns the age of 19, the death of the youth, the youth's marriage, the youth's emancipation, the youth's enlistment in the armed services, the youth's deportation, the youth's adoption, the death of the parents/guardians, or for any other reason the court deems appropriate. This policy will apply to cases that have an agreed upon copay or order for support. The county will not pursue copays or orders for support if MSY is fully funding placement.

**(F) Procedure for monitoring progress and tracking outcomes:**

The Ohio family and children first cabinet council state office shall establish and maintain the Ohio Automated Service Coordination Information System (OASCIS). The information system shall contain county family and children first council records detailing funding sources and information regarding families seeking services from a county council. O.R.C 121.37 (C) (5)

- **Multi-Need Children Ages 0-21**

Service coordination/wraparound plans are monitored on an on-going basis and changes are made on an as needed basis. At minimum, service coordination meetings are held every 90 days and wraparound meetings are held every 45 days and as needed. Families, agencies and or schools may request a meeting at any point.

Procedure for monitoring and tracking progress will be completed through OASCIS. All of the following are required components for tracking, monitoring data collection of service coordination/wraparound referrals per ORC 121/376 (A):

(1) Demographics including: (a) number and relationship of family members; (b) genders of youth; (c) ages of youth; (d) races of youth; (e) education of youth; (2) Youth financial resource eligibility information; (3) History and desired outcomes; (4) Youth's physical and behavioral health histories, when available; (5) Names of youth's insurers and physicians, when available; (6) Individualized plans including: (a) referrals made to services; (b) services and supports received; (c) crisis plans; (d) safety plans; (7) All Relevant case file documents; (8) Any other information related to families served, services provided, or the financial resources used to provide the services. The results of this monitoring and tracking should be reported to the

county FCFC on a regular basis. Data and information collected through the monitoring and tracking system should be used to inform the decision-making process of the county FCFC as required under ORC 121.37(B)(2)(b).

The results of this monitoring and tracking should be reported to Warren County FCFC on a regular basis. Data and information collected through the monitoring and tracking system should be used to inform the decision-making process of the county FCFC as required under ORC 121.37(B)(2)(b). The information will be used to inform the decision-making process of the Warren County FCFC as it fulfills its responsibilities to annually evaluate and prioritize services, fill service gaps and invent new approaches to achieve better results for families and children [as found in 121.37(B)(2)(b)].

Ohio CANS are to be completed every 90 days and will assist in monitoring the following domains:

- ❖ Strengths, life functioning, behavioral/emotional needs, risk behaviors, cultural factors, potentially traumatic/Adverse childhood experience, early childhood, transition age and caregiver resources and needs. .

The Individualized Family Service Coordination Plan/POC (Plan of Care) contain the following required data sharing, tracking, monitoring components:

- ❖ identification of family members/guardians, identification of team members, crisis plan, team mission, levels of engagement of families, needs, outcomes strategies and updates will be obtained at each meeting on how these have or have not been successfully completed. Additional tracking requirements are listed below under section 6. Quality Assurance of Service Coordination/Wraparound.

### **Youth in Residential Placement**

Youth in placement are visited at minimum, once a month by Coordinated Care or an identified agency team member to monitor the child's progress. Families are highly encouraged to visit youth and to participate in their treatment. Residential centers are required to provide timely written and verbal information concerning major unusual incidents and the child's treatment. Service plan team members receive and share information on a timely basis. All information is shared with family unless otherwise ordered by the court. Efforts are made to shorten residential stays for children and to preserve families. Team will review progress of youth in out-of-home placements, and the develop a re-entry plan to establish continuity of care after discharge, which should include but is not limited to, planning for housing, ongoing treatment, and education. Termination of a residential placement is a team decision that includes input from the parent/guardian.

- The Clinical Committee meets monthly and receives updates at meetings concerning all residential placements and on youth who are receiving services through the pooled fund. Non-identifying information is provided at FCFC meetings. The Clinical Committee is responsible for identifying service gaps for multi-need children with complex needs in Warren County. The Clinical Committee reports to FCFC any identified gaps and plans to fill those gaps.

**(G) Procedure for protecting family confidentiality:**

A time limited release of information for participants is agreed to and signed by the family. This release should contain all potential community partners including all applicable local school districts and applicable community schools as needed. In addition, the release contains acknowledgement that information will be placed in OASCIS, CANS portal (when applicable) and that information may contain protected health information. All documents are kept in locked file cabinets. All email containing identifying information are password protected. Before each Clinical Committee/Family Team meetings a statement of confidentiality is signed to assure that none of the family personal information shared by team members during an individual family team meetings will be shared with others outside the identified individual family team members without written consent of the family.

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

**Multi-Need Children Ages 0-21**

Upon initial contact with the family the lead case manager assesses the strengths, needs and cultural information of the family. The lead case manager begins by obtaining information from the family and collateral resources that will assist in the completion of the Ohio CANS and other pertinent background information. This allows the family to give specific input on their perceptions of problems, strengths, cultural issues, what they hope to change and what services they believe that they could benefit from. Parent/guardian are encouraged to consider natural supports and person(s) who may be interested in attending team meetings.

The Ohio CANS is used to help track the strengths and needs of the child and family and to track therapeutic progress. This information is used to develop an individualized IFSP/POC and to guide the team planning process.

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

**Multi-Need Children Ages 0-21**



Wraparound plans offer family teams a structured approach to identify, monitor, and track prioritized needs with clear outcomes and objectives. Family involvement in choosing appropriate services and providers in the planning, implementation, and evaluation of services on behalf of the family must be respected.

Upon the first contact with the family/guardian the Coordinated Care Case Manager will assess the needs of the child and family. This information is used to complete the Ohio CANS. The Coordinated Care Case Manager gathers input from parents or potential team members, natural supports, as well as contact information and completes a release of information. The parent is offered support from the Family Support Specialist or Family Advocate.

During the initial service coordination/wraparound meetings the team will discuss team mission, team strengths, and family vision, team abilities, team preferences and family level of engagement. This discussion will help assist in developing Individualized Family Service Plan or Plan of Care (IFSP/POC).

➤ **Multi-Need Children Ages 0-21**

- A. Warren County will utilize OASCIS when developing/writing service coordination/wraparound plans.
- B. During the development of the service coordination plan the strengths and needs are discussed and documented in the service coordination plan. Family voice and choice is emphasized during the development of the service coordination/POC. The family is given an opportunity to express a vision for what they want. The CANS assessment is completed prior to the development of the Individualized Service Coordination Plan/Plan of Care. Cultural discovery and sensitivity regarding the strengths and needs are emphasized at this time.
- C. Previously completed evaluations, including the Ohio CANS are reviewed.
- D. The Individualized Family Service Plan/Plan of Care includes the following: Name of recipient, date developed, team start date, description of the needs, strategy description for identified needs, estimated timeline to implement strategies, team member responsibilities to implement strategy, task description, task date due, estimated time of strategy, team goals, identify how progress will be made and tracked, identify community resources accessed.

Special effort should be made by all team members to work collaboratively with the family and to give the family the opportunity to define the services that are most appropriate for them and which services they will engage in. The Service Coordination Plan, when possible, should be linked to other comprehensive or treatment plans to help eliminate duplication and conflicting expectations of the family.

Families should be consulted about informal supports that may be available such as ministers, fellow church members, club members, neighbors, friends, relatives and community events and activities that may be of benefit.

Team members should seek the family's opinion as to what has worked or believed could work. All team members should collaborate to help remove any barriers to service (i.e. transportation, cost, etc.).

Warren County uses a pooled funding mechanism. Warren County Juvenile Court, Children Service, WCBDD, MHRSWCC pool money each year to serve Clinical Committee children in the least restrictive environment. Pooled funding monies can be used for support and treatment options for children who are at a high risk for residential treatment and for the purpose of avoiding residential treatment. If residential treatment is necessary, then the pooled fund is used for out-of-home placement.

Coordinated Care is responsible for Clinical Committee coordination services in Warren County, however the family may designate a Clinical Family Team member or person approved by the family to track the progress of the family service coordination plan, schedule reviews as necessary and help facilitate the family service coordination plan meeting process. The family will be offered a family advocate as available at the time of intake. OASCIS will be used to help track progress for all service coordination and wraparound cases.

### **Multi-Need Children Ages 0-21**

Coordinated Care is the service coordination provider for multi-need children in Warren County. The goal of Coordinated Care is to identify children early and provide effective intervention and coordination of services for families to prevent out-of-home placements. Coordinated Care is a service provider of the following services to meet this goal:

1. Prevention services
2. Parent training
3. Unruly diversion services
4. Intensive case management
5. Intensive home-based therapy
6. Respite care
7. Truancy prevention and intervention
8. Mentoring Services
9. Referrals for community services

All efforts are designed to avoid unnecessary residential placements, and the accepted concept of least restrictive placement is to be followed at all times.

The family is part of the service coordination team and is encouraged to offer information and suggestions and participate in decision making. Identified assistance and services are provided in the least restrictive environment possible.

Warren County Clinical Committee respects family involvement in planning, implementation, and evaluation of services while at the same time adhering to well-documented principles of practice.

Agency members strive to be aware of all racial/ethnic/cultural identity and gender issues. Accommodations are made to address any and all language and communication barriers. Further cultural competency training is sought when needed. The Clinical Committee/Family Clinical Team will ensure services are responsive to the strengths, needs, family culture, race and ethnic background, as identified in the Individualized Family Service Plan (IFSP)/Plan of Care (POC) and are provided in the least restrictive environment.

### **Safety/Crisis Planning**

This service coordination/wraparound manual recognizes that crisis events and safety risks are two very different things. There is a need for different responses for different reasons to support families more effectively than a one size fits all process.

Coordinated Care provides services early in order to help avoid emergencies. It is the goal of Coordinated Care and FCFC to serve potential service coordination/wraparound children before a crisis occurs. Agencies, schools and parents are encouraged to make early referrals to the Coordinated Care program.

Any child who is accepted into service coordination/wraparound will have a Crisis/Safety Plan developed and written by the Coordinated Care team facilitator with team input according to the needs of the youth and family. Much emphasis will be given to family voice and choice with youth input to determine what constitutes a crisis situation vs. a situation of safety risks. Safety plans will only be written, individualized and developed as needed for each family.

The plan will include input from parent/guardians and involved members. The plan will target strategies that provide support to the child and family and promotes family preservation. The plan will consider the strengths and needs of the child and family. Referral regarding safety are made to the appropriate agencies as needed. The



Crisis/Safety Plan will be reviewed at service coordination/wraparound meetings and will be updated as needed. The plan will include:

Name of youth, current date, team start date, emergency contact, physician/counselor/therapist contact information, relevant youth diagnosis, current relevant medications, brief history of past crisis events, identify all relevant triggers, identify all responsible persons and their roles in crisis planning, and identification of potential crises with action steps.

**(J) How alleged unruly children will be supported using service coordination including a method for diverting them from the juvenile court system:**

In April 2002 the Unruly Diversion Program was implemented through Warren County Educational Service Center as part of the Coordinated Care program.

The Diversion program works with unruly children and their families to decrease unruly behavior and prevent children from becoming involved with Juvenile Court. Diversion specialists meet with the children and families referred to the program. For more information see level I services.

➤ **An emphasis on the personal responsibilities of the child and the parental responsibilities of the parents, guardian, or custodian of the child**

Parents and custodians are referred to Coordinated Care for diversion services upon filing unruly charges in Juvenile Court alleging unruly behavior. Referrals are also made directly by schools, police departments, families, or other service providers in the county.

Parents are advised to contact Coordinated Care immediately following referral. If a parent does not contact the program within two days of filing charges, a Diversion Specialist will contact them.

Initial meetings are conducted to identify the issues and a plan for resolution. Diversion workers focus on the personal responsibilities of both the child and guardian/custodian through all interventions. See interventions listed in E2

➤ **Involvement of local law enforcement agencies and officials**

At the inception of the Diversion program in-services were held with all local police departments regarding Diversion services. These in-services are repeated as needed. Police departments are encouraged to distribute supplied fliers regarding Diversion services to parents and community members.

Juvenile Court processes unruly filings and refers parents to the Coordinated Care Diversion program. If an unruly charge is filed Juvenile Court statistically closes the child's case and makes the status of the case Coordinated Care Services. This excludes truancy and runaways.

➤ **Method to divert a child from the juvenile court system included in the service coordination process**

❖ **Strategies Diversion uses to address unruly behavior:**

It is the goal of the Diversion program to reduce unruly behavior in Warren County. The program works to help youth avoid progressive misbehavior which leads to criminal or delinquent behavior.

- ❖ Diversion provides home- and school-based services to children and their families. The Juvenile Diversion Team contacts parents within one working day of a phone call from a parent or community referral requesting services or two working days of an unruly charge being filed. The strategies used to address the unruly behavior include but are not limited to:

- parent-child mediation
- parent training
- behavior management
- behavior charts
- home visits
- school visits
- prevention services in the schools
- outings for youth (reward for good behavior)
- connection to the schools for parents
- attendance and participation in IEP meetings
- support in finding and completing community service
- emergency 24-hour crisis services

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

**Children 0-5 years old**

If a family has a disagreement about something in Help Me Grow Early Intervention or Home Visiting, the most effective and efficient way is to work with the assigned EI Service Coordinator or Home Visitor and the local contract manager.

ATTN: Stefanie Post  
 Birth to Three Program Director  
 1879 Deerfield Rd.

Lebanon, Ohio 45036  
513-695-2900 Ext. 2919  
[Stefanie.post@warrencountyesc.com](mailto:Stefanie.post@warrencountyesc.com)

If parents want to file a complaint with the Department of Children and Youth, they must put in writing a description of what happened and which rules or rights have been violated. The complaint must be signed and sent to

Ohio Early Intervention  
Ohio Department of Children and Youth  
P.O. Box 183204  
Columbus, Ohio 43218

For the EI dispute resolution process, please see the Ohio Department of Children and Youth (DCY) created Parent Rights brochure.

For HV program please see Ohio Department of Children and Youth (DCY) created Family Rights, Responsibilities, and Confidentiality Policy Consent for Home Visitation Services form.

- Both documents are reviewed and provided to families when the EISC or HV completes their first visit with the family.
  
- Both documents can be found on the DCY website at <https://childrenandyouth.ohio.gov/>

### **Multi-Need Children Ages 0-21**

Family Clinical Teams make every effort to put supports and services into place that are helpful to the family and youth. Even though team members are working together to meet the youth and family needs, there may be times when a parent/guardian or young adult questions decisions or the process of decision making by the Family Clinical Team. It is important for Family Clinical Team members to share their voice, and it is important for parents, custodians, legal guardians, foster parents, kinship care providers, adoptive parents and children/youth be given an opportunity to share their concerns when making team decisions.

Many cases involving multisystem youth can be complex and at times require difficult decisions to be made. Family Clinical Teams are encouraged to seek guidance from Project ECHO or Technical Assistance from the Multisystem Youth Grant (MSY Grant) at any time during the service coordination/wraparound process. The Warren Co. FCFC Coordinator can assist Family Clinical Teams in seeking further guidance from Project ECHO or from the MSY Grant.



If a parent/guardian or young adult shares their concerns with their Family Clinical Team and still does not believe their needs are being adequately addressed by the team, parents/guardians/custodians or young adult have the option of using the below, sequential steps.

➤ Step I

Any team member may report either verbally or in writing their concern and to request access to the dispute resolution process. Please include your name and phone number when reporting a concern. Concerns can be sent to the lead Case Manager or to the Warren Co. FCFC Coordinator at 513-695-2900 Ext. 1653, or by fax 513-6952961, or by email at [Holly.Wooldridge@Warrencountyesc.com](mailto:Holly.Wooldridge@Warrencountyesc.com). The Warren Co. FCFC Coordinator will contact the complainant within 5 business days for routine complaints and within 2 business days for concerns of safety. Parents, custodians, legal guardians, foster parents, kinship care providers, adoptive parents should call emergency services as necessary.

➤ Step II

In an effort to resolve the complaint the Warren Co. FCFC Coordinator will contact the complainant. For routine complaints the FCFC Coordinator will contact the complainant within 5 business days. For concerns of safety the Warren Co. FCFC Coordinator will contact the complainant within 2 business days. Parents, custodians, legal guardians, foster parents, kinship care providers, adoptive parents should call emergency services as necessary.

The Warren Co. FCFC Coordinator will contact the person with the complaint in an effort to resolve the complaint. If the complaint cannot be resolved then the issue will be discussed at a Family Clinical Team Meeting within 7 business days from when the Warren Co. FCFC Coordinator contacted the complainant. The Family Clinical Team will hold a meeting with the Warren Co. FCFC Coordinator present to hear the complaint and to see if a resolution can be found.

➤ Step III

If the complaint cannot be resolved at the Family Clinical Team level then the matter may be referred to the Warren County Clinical Committee. The Warren County Clinical Committee will hold a meeting within 7 business days in an attempt to resolve the complaint. Complaints should be sent to the lead Facilitator or to the Warren Co. FCFC Coordinator at 513-695-2900 Ext. 1653, or by fax 513-695-2961 or by email at [Holly.Wooldrdige@warrencountyesc.com](mailto:Holly.Wooldrdige@warrencountyesc.com).

The Warren Co. Clinical Committee will make a good faith effort to resolve the complaint and to review/further develop a plan for the child/youth that is consistent with the child/youth's needs and meeting the concerns of each system for providing services and /or funding.

➤ Step IV

If the complaint cannot be resolved by the Warren Co. Clinical Committee the person or agency with the complaint may refer the matter to the County Directors. The County Directors are made up of Directors from the following agencies: Warren Co. Children Services, Mental Health Services of Warren and Clinton Counties, Warren Co. Bd. Of Developmental Disabilities and Warren Co.

Juvenile Court. To refer the matter to the County Directors notice should be sent to the Warren Co. FCFC Coordinator at 513-695-2900 Ext. 1653 or by fax 513-695-2961 or by email to [Holly.Wooldridge@Warrencountyesc.com](mailto:Holly.Wooldridge@Warrencountyesc.com) .

The County Directors will meet within 10 business days to review the dispute. The County Directors will provide a written decision within 5 business days. All decisions made by the County Directors are final with the exception being those disputes specified in ORC 121.38- Resolving agency disputes concerning services or funding. In this situation, the Warren County Juvenile Court Judge is the final arbitrator of disputes between agencies.

**The child/youth will receive necessary services while the dispute is being resolved. Necessary services are those services which the child/youth was receiving prior to the dispute resolution process being accessed.**

This dispute resolution process does not replace other rights or procedures that parents or custodians may have under other sections of the Ohio Revised Code.

This dispute resolution process cannot be interpreted to override or affect decisions of a juvenile court regarding out of home placements or other court orders.

All disputes are resolved within 60 days or less.

**(L) Fiscal Strategies for supporting FCFC service coordination:**

- Funding decisions are made for services identified in the family service coordination plan/wraparound

The Clinical Committee meets monthly and makes decisions regarding how services identified in service coordination plans will be funded.

- **Flexible resources are maximized**

FCSS funds are used for Therapeutic Mentoring, respite care, camps and service coordination/wraparound services. FCSS funds are reviewed monthly by the Clinical Committee. FCSS funds are only utilized in accordance to the Ohio Family and Children First state office.

- **Funds are pooled to support service coordination/wraparound**

WCBDD, Mental Health, Juvenile Court and Children Services contribute to Warren County's pooled fund. Each agency contributes equally financially on a quarterly basis.

- **Resources are reallocated from institutional services to community-based, preventative, and family centered service**

The pooled fund is used to provide, but not limited to the following: respite care, camps, mentoring services, and specialized assessments.

Pooled fund dollars may only be used for placement purposes if all other options have been exhausted. These services are community-based and aimed at avoiding unnecessary placements. Other resources are used to provide service coordination and home-based therapy.

- **How decisions will be made regarding the use of the Family Centered Services and Supports funds for children and their families in service coordination.**

Family Centered Services and Support (FCSS) funds are for those children (ages 0 through 21) with multi-systemic needs, who are receiving service coordination through the local FCFC. FCSS funds are designed to meet the unique non-clinical needs of children and families identified on the individualized family service coordination plan developed through the service coordination process and/or to support the FCFC service coordination process, as described in the service coordination mechanism.

FCSS funding decisions are made by the Warren County Clinical Committee. The Warren County Clinical Committee meets monthly and are provided a detailed list of all expenditures and revenue. When service coordination plans require funding for the implementation of recommended services/supports, Clinical Committee access the following (as appropriate to the needs of the family and the requirements and/or restrictions of the funds) including but not limited to: Pooled funding, FCSS funds, MSY State funding.

The Family & Children First Council, along with leaders of public child and family systems, collaborates to plan, make decisions, and finance the system of care in Warren County. This committee identifies systemic needs, addresses service gaps, sets goals, determines data requirements for decision-making, regularly reviews data, incorporates it into annual planning, and analyzes evaluation processes for effectiveness.

#### **(M) Quality Assurance of Service Coordination Mechanism**

- **Service coordination mechanism process will be monitored and reviewed.**



### Children 0-5

Help Me Grow Early Intervention contract manager will complete and present to FCFC the EI Service Coordination Oversight Report twice a year to provide a more in-depth perspective of the local EI program.

Head Start and Early Head Start are funded by HHS, and the Regional Office periodically reviews and monitors all program operations, including child and family services. WCCS Early Learning Centers conducts an annual self-assessment process with participation of parents, school representatives, community agency representatives, and Board members. If any areas are identified as needing improvement, an action plan is written, along with objectives for program improvement. Quarterly program reports and budget reports are provided to the Board, Policy Council, and the regional office, to share progress on meeting program objectives.

### Multi-Need Children Ages 0-21

Review and monitoring of the Service Mechanism document will be conducted by the Clinical Committee with oversight by the full Family and Children First Council and the Warren County Commissioners. This will be accomplished on an incremental basis to allow for adequate review time by the committee members. The following table illustrates a suggested timeline for data review; however variations are allowable as long as the information is presented at the frequently specified in parentheses. All information will be gathered and presented by Coordinated Care to the Clinical Committee. The Clinical Committee will provide quarterly presentations to FCFC and an annual review to the County Commissioners.

Recommended Month of Review	Quality Indicator
July	1. Service Coordination Mechanism Review (annually) to ensure: <ul style="list-style-type: none"> <li>• It is compliant with current OFCF guidelines and ORC</li> <li>• All processes, services, entities are still current</li> </ul> If no to either, changes must be made by Clinical Committee and a revised Service Coordination Mechanism presented to FCFC for approval. 2. Fiscal Year end Pooled Fund & FCSS Expenditures Review (July 1 – June 30) (annually)
August	Prior Fiscal Year Review of Service Coordination/Wraparound Outputs (annually): <ul style="list-style-type: none"> <li>• Number of Referrals received and demographics (age, gender, involved agencies)</li> <li>• Number admitted and demographics Service coordination/wraparound (age, gender, involved agencies or needs at intake)</li> <li>• Number placed in Residential Care</li> <li>• Number receiving Respite Care</li> <li>• Number receiving specialized evaluation services</li> </ul>

	<ul style="list-style-type: none"> <li>• Number receiving other services paid through Pooled Fund</li> </ul>
September	<p>Prior Fiscal Year Review of Service Coordination Services Outcomes (annually):</p> <ul style="list-style-type: none"> <li>• Average length of time client receives Service Coordination</li> <li>• Average length of time clients are placed in Residential Care (paid by Pooled Fund)</li> <li>• Outcome Results using tool specified in Service Coordination Mechanism (pre/post)</li> </ul>
October	Quarter 1 Pooled Fund & FCSS Expenditures Review (quarterly)
November	<p>Prior Fiscal Year Review of Service Coordination Accessibility (annually):</p> <ul style="list-style-type: none"> <li>• Average length of time between client referral to Service Coordination and first in person meeting</li> <li>• Frequency of IFSP Goal Review - Average and Range (in months)</li> <li>• Number of families offered a Parent Advocate</li> <li>• Number of families accepting a Parent Advocate</li> </ul>
December	Client Satisfaction Survey
January	Quarter 1 & 2 Pooled Fund & FCSS Expenditures Review (quarterly)
February	Review of all Dispute Resolutions conducted during prior 12 months, to include detail on process and time frames (annually)
March	Service Coordination Mechanism Training provided in prior 12 months - Quantity by type (annually)
April	Quarter 1, 2 & 3 Pooled Fund & FCSS Expenditures Review (quarterly)
May	<p>Temporary Crisis/Safety Plan (TCSP) Review (annually)</p> <ul style="list-style-type: none"> <li>• Of clients admitted in past 12 months, percentage of Service Coordination clients who had a TCSP developed and written by the end of the first service coordination team meeting</li> </ul>
June	<ul style="list-style-type: none"> <li>• Overview of Quality Assurance data presented during the fiscal year (annually)</li> <li>• Lessons Learned Discussion (annually)</li> </ul>