

2005 Annual Report on Integrated Services Projects and Coordinated Services Teams Executive Summary

Each year, the Bureau of Mental Health and Substance Abuse Services (BMHSAS) prepares an annual report for the Children Come First Advisory Committee, the group statutorily responsible for monitoring the development of Wisconsin's Integrated Services Projects. This summary report highlights some of the accomplishments and challenges faced by collaborative systems of care, specifically the Integrated Services Projects (ISP) and Coordinated Services Teams (CST). The full report can be viewed and downloaded from:

http://dhfs.wisconsin.gov/mh_bcmh/CST_ISP/ISPAnnualReports%20.htm

Wisconsin has been developing collaborative systems of care since 1989. The original initiatives, ISPs, focused on supporting families with children with Severe Emotional Disabilities (SED) in their homes and communities. ISPs receive \$80,000 annually in Mental Health Block Grant (MHBG) funds.

Beginning in 2002, the collaborative process employed by ISP was expanded with the development of CST. While CST uses the same wraparound process as ISP, the target group is broader and includes families and children who do not necessarily have an SED diagnosis but who do have complex needs. Funding for CST sites range from about \$33,000 to \$63,000 annually.

In 2005, 40 ISP/CST projects received funding through contracts with the BMHSAS. MHBG, Substance Abuse Grants and Hospital Diversion were the sources of funding. In addition, the Division of Children and Family Services collaborated with BMHSAS to contribute funding for CST sites.

At the end of December 2005, the BMHSAS released a new Request for Proposals (RFP) soliciting additional sites interested in starting CST. This followed the funding of all 2002 RFP respondents who were interested in beginning CST with the funding level available at that time. The most recent RFP is offering funding to begin two new CST sites in 2006.

Profile of Children and Families Served

The ISP/CST served:

- 1,103 children and youth in 2005
- 2,739 additional family members of enrolled children – services which may not have been received if not for the family's involvement in a collaborative system of care.

Referral sources to programs include: Mental Health – 22.2%, Child Welfare – 21.4%, Juvenile Justice – 17.9%, Schools – 17.5%, Family – 9.1%, AODA – 2.9% and Other – 9.0%.

Demographic data collected indicated that the children in programs were 67% male and 33% female, with the average age of 11.3.

Outcomes

One tool used to collect data in these projects is the Child and Adolescent Functional Assessment Scale (CAFAS) which provides a “behavioral snapshot” of a child’s functioning across eight subscales: role performance at school, role performance at home, role performance in the community, behavior toward others, moods and emotions, self-harmful behaviors, substance use, and thinking. Data are reported at enrollment, 6 months post enrollment, and 12 months post enrollment. The data collected show:

- 26 percent problem severity reduction and corresponding improvements in functioning during that time period;
- 21 percent school problem severity reduction and corresponding improvements in school functioning; and
- 28 percent reduction in delinquency severity and corresponding improvements in community functioning.

Consumer Satisfaction

Each year, enrolled ISP/CST families are asked to complete a Family Satisfaction Survey. The survey gathers information from a family perspective about areas of strength and need. Results show:

- 92% agree they are treated as an important member of their child and family team;
- 69% agree their family is getting better at coping with life and its daily challenges;
- 87% agree their team is sensitive to their cultural, ethnic, and religious preferences and values; and
- 89% agree that overall they are satisfied with the efforts of the team on their families’ behalf.

Financial Savings

Counties with ISP/CST are asked to fill out an annual “Collaborative Systems of Care Update” survey that captures information on the impact of the collaborative initiative on the larger service system. Twenty-eight of 32 sites identified financial savings. Below are selected comments:

In the year 2000, we had 17 youth at Lincoln Hills (correctional facility for youth) at a cost of \$734,255. Since then, placements have dropped to 1 youth at Lincoln Hills at a cost of \$47,994.

The number of children placed in out-of-home care went from 375 children in 2001 to 217 children in 2005.

We diverted 2-4 foster care placements that could have cost us in upwards of \$450-\$1,000/month each.

As of 11/30/05, we’ve spent \$27,420 on services to keep children in homes. The estimated cost of out of home placement, either residential, treatment foster care, or regular foster care would be \$167,008.

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