LR:ty:jal 06/11/2007

1	A N A CT <i>to repeal</i> 46.56 (8) (L), 46.56 (8) (p) and (q), 46.56 (14) (c) 8. and 46.56 (15)
2	(e); to renumber and amend 46.56 (3) (d) 2. a.; to amend 46.56 (title), 46.56 (1) (a),
3	46.56 (1) (b), 46.56 (1) (c), 46.56 (1) (e) to (i), 46.56 (1) (L) to (p), 46.56 (2) (title),
4	46.56 (3) (a), 46.56 (3) (b) 1., 2., 4., 5., and 7., 46.56 (3) (d) 1., 46.56 (4), 46.56 (5),
5	46.56 (6), 46.56 (6) (c), 46.56 (7), 46.56 (8) (a) to (g), and (h) (intro.), 2., 3., 4., 5.,
6	and 6., 46.56 (8) (i) to (k), 46.56 (8) (m) to (o), 46.56 (8) (r) and (s), 46.56 (9), 46.56
7	(10) to (13), 46.56 (14) (a), (b) (intro.), 1. and 3. and (c) (intro.) and 1., 46.56 (14)
8	(c) 3. and 4., 46.56 (14) (c) 6. and 7., 46.56 (14) (d), 46.56 (15) (a) and (b) (intro.),
9	46.56 (15) (b) 2. to 4. and 46.56 (15) (c) and (d); to repeal and recreate 46.56 (14)
10	(c) 2.; and <i>to create</i> 20.435 (7) (cr), 46.56 (1) (ar), 46.56 (1) (bm), 46.56 (1) (im),
11	46.56 (1) (ir), 46.56 (1) (q), 46.56 (3) (a) 8., 46.56 (3) (b) 8. to 17., 46.56 (3) (d) 1.
12	e. to i., 46.56 (5) (j), 46.56 (6) (d) and (e), 46.56 (8) (h) 7. and 8., 46.56 (15) (b) 1r.,
13	46.56 (15) (b) 5. and 59.53 (7m) of the statutes; relating to: collaborative systems of
14	care for families with children who are involved in multiple systems of care.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

JOINT LEGISLATIVE COUNCIL PREFATORY NOTE: This draft is prepared for the joint legislative council's special committee on strengthening Wisconsin families.

Under current law, s. 46.56, stats., governs the integrated services programs (ISP) for children with severe disabilities. A child with severe disabilities" is defined as follows:

"46.56 (1) (c) "Child with severe disabilities" means an individual who has not attained 18 years of age and whose mental, physical, sensory, behavioral, emotional or developmental disabilities, or whose

combination of multiple disabilities meets all of the following conditions:

- 1. Is severe in degree.
- 2. Has persisted for at least one year or is expected to persist for at least one year.
- 3. Causes substantial limitations in the child's ability to function in the family, the school or the community and with the child's ability to cope with the ordinary demands of life.
- 4. Causes the child to need services from 2 or more service systems.".

The ISP began in 1989. As of November 2006, 18 counties operated ISPs. The statute requires a county who operates an ISP to establish a coordinating committee comprised of representatives from multiple systems of care. The coordinating committee must prepare interagency agreements that participating organizations in the ISP agree to follow in creating and operating the ISP. The interagency agreements components are also outlined by statute. The ISP must have one or more service coordination agencies. The service coordinating agency must identify a service coordinator for each child with severe disabilities that participates in the program. Referrals into the ISP may come from many different types of public agencies or organizations, or from the child or the child's family. A treatment team is developed which includes representatives of all service providers working with the family, as well as the family members and the child.

In 2002, the department of health and family services developed a request for proposal for counties to develop coordinated services teams (CST). The CST model is based on the ISP model of integrated services for children and families with multiple needs. As of January 2007, 25 counties operate CSTs.

This draft amends s. 46.56, stats., relating to ISPs, to include CSTs within this statute.

SECTION 1. 20.005 (3) (schedule) of the statutes: at the appropriate place, insert the

2 following amounts for the purposes indicated:

1	2007-08 2008-0	9
2	20.435 Health and Family Services, department of	
3	(7) Disability and elder services and local	
4	ASSISTANCE	
5	(cr) Coordinated services teams GPR -0- \$1,357,00	0
6	SECTION 2. 20.435 (7) (cr) of the statutes is created to read:	
7	20.435 (7) (cr) The amounts in the schedule for coordinated services teams under	s.
8	46.56 (1) (cr).	
9	SECTION 3. 46.56 (title) of the statutes is amended to read:	
10	46.56 (title) Integrated service programs for children with severe disabiliti	es
11	Coordinated services team initiatives for children.	
12	SECTION 4. 46.56 (1) (a) of the statutes is amended to read:	
13	46.56 (1) (a) "Administering agency" means a county department designated by the	he
14	county board of supervisors or tribal governing body to administer the program initiative.	,
15	SECTION 5. 46.56 (1) (ar) of the statutes is created to read:	
16	46.56 (1) (ar) "Advocacy" means the act of assisting a person in pursuing the person	ı's
17	interests or pursuing program benefits to which the person is entitled.	
	COMMENT: Please carefully review this definition.	
18	SECTION 6. 46.56 (1) (b) of the statutes is amended to read:	
19	46.56 (1) (b) "Agency" means a <u>public or</u> private nonprofit organization that provid	es
20	treatment services for children with severe disabilities and their families services and support	rts
21	for children and families.	
22	SECTION 7. 46.56 (1) (bm) of the statutes is created to read:	

1 46.56 (1) (bm) "Child" or "children" means a person or persons who is under age 18 2 and is involved in multiple systems of care, or both. COMMENT: Should "child" be defined more broadly for purposes of educational eligibility? 3 **SECTION 8.** 46.56 (1) (c) of the statutes is amended to read: 4 46.56 (1) (c) "Child with severe Severe disabilities" means an individual who has not 5 attained 18 years of age and whose mental, physical, sensory, behavioral, emotional or 6 developmental disabilities, or whose a combination of multiple disabilities that meets all of 7 the following conditions: 8 1. Is severe in degree. 9 2. Has persisted for at least one year or is expected to persist for at least one year. 10 3. Causes substantial limitations in the child's ability to function in the family, the 11 school or the community and with the child's ability to cope with the ordinary demands of life. 12 4. Causes the child to need services or supports from 2 or more service systems. 13 **SECTION 9.** 46.56 (1) (e) to (i) of the statutes are amended to read: 14 46.56 (1) (e) "Intake" means the process by which the service coordination agency 15 initially screens a child with severe disabilities and the child's family to see if a complete 16 assessment is needed determine eligibility. 17 (f) "Integrated services Coordinated services" means treatment, education, care, and support services, and supports provided, in a coordinated manner, for a child with severe 18 19 disabilities and his or her family. 20 (g) "Integrated service plan Coordinated services plan of care" means the plan for 21 treatment, education and support, care services, and supports for an eligible child with severe 22 disabilities and the child's family under sub. (8) (h).

(h) "Interagency agreement" means a written document of understanding among

2	service providers and other partner agencies that identifies mutual responsibilities for
3	implementing integrated coordinated services for children with severe disabilities and their
4	families.
5	(i) "Interdisciplinary team Coordinated services team" means a group of professionals,
6	assembled by the service coordinator, from various service systems who meet all of the
7	following criteria:
8	1. Are skilled in providing treatment, education and support services for children with
9	severe disabilities and their families.
10	2. Conduct comprehensive evaluations of the child with severe disabilities and the
11	child's family's needs for treatment and support services.
12	3. Possess skills and knowledge of the needs or dysfunctions of the specific type
13	presented by the child being assessed.
14	4. Are providing treatment, education or support services to the child with severe
15	disabilities or the child's family, if the child or the child's family is receiving any treatment,
16	education or support services process by which a group of individuals, including family
17	members, service providers, and informal support persons, work together to respond to service
18	needs faced by a child and his or her family who is involved with multiple systems of care.
19	SECTION 10. 46.56 (1) (im) of the statutes is created to read:
20	46.56 (1) (im) "Multiple systems of care" means more than one system that provides
21	treatment, services and supports, or sanctions to an individual or family, including mental
22	health, alcohol or other drug abuse, education, corrections, economic support, and child
23	welfare.
24	SECTION 11. 46.56 (1) (ir) of the statutes is created to read:

1 46.56 (1) (ir) "Participant" means a child, or a member of the child's family.

SECTION 12. 46.56 (1) (L) to (p) of the statutes are amended to read:

46.56(1) (L) "Service coordination" means a case management service that coordinates the coordination of multiple service providers and informal supports who are serving a particular child with severe disabilities and the child's family the identified participant. The term includes arrangement for coordination of the assessment process, development of an integrated service plan a coordinated plan of care based on the strengths and needs identified in the assessment, advocacy for the needs of the child and the child's family participant, monitoring of the child's participant's progress, facilitation of periodic reviews of the integrated service plan plan of care and coordination and maintenance of clear lines of communication among all service providers and supports and the child and the child's family participant.

- (m) "Service coordination agency" means a county department, <u>tribe</u>, agency, school district, cooperative educational service agency or county children with disabilities education board designated in an interagency agreement by a coordinating committee to provide intake and service coordination for one or more target groups of eligible children with severe disabilities and their families.
- (n) "Service coordinator" means an individual who is qualified by specialized training and elinical experience with children with severe disabilities and their families, who receive ongoing coaching and support, and who is appointed by the service coordination agency to provide coordination of treatment, education and, support, and services for eligible children with severe disabilities and their families.
- (o) "Service system" means the public and private organizations that provide specialized services for children with mental, physical, sensory, behavioral, emotional or

1 developmental disabilities or that provide child welfare, alcohol or other drug abuse, juvenile 2 justice, educational or health care services for children. 3 (p) "Treatment services Services and supports" means the individualized social, 4 emotional, behavioral and medical services and supports designed to bring about habilitation, 5 rehabilitation, recovery, and appropriate developmental growth of a child with severe 6 disabilities the child, based on the child and family's identified strengths and needs. 7 **SECTION 13.** 46.56 (1) (q) of the statutes is created to read: 8 46.56 (1) (q) "Tribal governing body" means the governing body of a federally 9 recognized American Indian tribe or band. 10 **SECTION 14.** 46.56 (2) (title) of the statutes is amended to read: 11 46.56 (2) (title) ESTABLISHMENT OF PROGRAMS COORDINATED SERVICES TEAM INITIATIVES. 12 If a county board of supervisors or tribal governing body establishes a program under s. 59.53 13 (7), it shall appoint a coordinating committee and designate an administering agency. The 14 program or coordinated services team may be funded by the county or the county board of 15 supervisors or tribal governing body may apply for funding by the state in accordance with 16 sub. (15). 17 **SECTION 15.** 46.56 (3) (a) of the statutes is amended to read: 18 46.56 (3) (a) The coordinating committee shall have the responsibilities specified in par. 19 (d) and shall include representatives from all of the following: 20 1. The county or tribal department responsible for child welfare and protection services. 21 2. The county or tribal department responsible for mental health and alcohol and drug 22 abuse services for children and families. 23 3. The county or tribal department responsible for providing services for children who

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are developmentally disabled.

1	4. The family support program under s. 46.985 if the county or tribe has a family support
2	program.
3	5. The juvenile court administrator or another representative appointed by the judge
4	responsible for cases heard under chs. 48 and 938.
5	6. The largest school district in the county or tribe and any cooperative educational
6	service agency, if it provides special education in the county or tribe, or any county or tribal
7	children with disabilities education board in the county or tribe, and any other school district
8	in the county or tribe that is willing to participate in the program initiative, at the discretion
9	of the administering agency.
10	7. At least 2 parents of children with severe disabilities, or the number of parents of
11	children with severe disabilities that it will take to make the parent representation equal to 25%
12	of the coordinating committee's membership, whichever is greater.
13	SECTION 16. 46.56 (3) (a) 8. of the statutes is created to read:
14	46.56 (3) (a) 8. The agency responsible for economic support programs.
15	SECTION 17. 46.56 (3) (b) 1., 2., 4., 5., and 7. of the statutes are amended to read:
16	46.56 (3) (b) The coordinating committee may include any of the following:
17	1. Representatives of the vocational rehabilitation office that provides services to the
18	county or tribe.
19	2. Representatives of a technical college district that is located in the county or tribe.
20	4. Representatives of health maintenance organizations that are operating in the county
21	or tribe.
22	5. Representatives of law enforcement agencies that are located in the county or tribe.
23	7. Representatives of agencies that are located in the county or tribe.
24	Section 18. 46.56 (3) (b) 8. to 17. of the statutes are created to read:

1	46.56 (3) (b) 8. Elected Officials.
2	9. Representatives of vocational and technical school.
3	10. Local business representatives.
4	11. Community organizations serving children and families.
5	12. Representatives of the county board or tribal council.
6	13. Representatives of the regional offices of the department.
7	14. Representatives of the local clergy.
8	15. Representatives of probation and parole.
9	16. Representatives of economic support agencies.
10	17. Representatives of vocational rehabilitation programs.
11	SECTION 19. 46.56 (3) (d) 1. of the statutes is amended to read:
12	46.56 (3) (d) 1. a. Prepare one or more interagency agreements in accordance with sub
13	(5) that all participatory organizations in the program initiative agree to follow in creating and
14	operating a program an initiative. The interagency agreement shall outline the mission
15	values, and principles of the initiative, as well as expectations for partner organizations
16	including funding match.
17	b. Assess how the program initiative relates to other service coordination programs
18	operating at the county, tribal, or local level and take steps to work with the other service
19	coordination programs and to avoid duplication of activities, services, and supports.
20	c. If a county or tribe applies for funding under sub. (15), assist the administering agency
21	in developing the application required under sub. (15) (b).
22	d. Review determinations by the service coordination agency regarding eligibility
23	assessment appropriate services and supports or funding of services and supports at the

request of any applicant, recipient, parent, or participating county department or tribe, agency,

1	school district, cooperative educational service agencies, or county children with disabilities
2	education boards. The committee shall adopt written procedures for conducting reviews.
3	SECTION 20. 46.56 (3) (d) 1. e. to i. of the statutes are created to read:
4	46.56 (3) (d) 1. e. Establish operational policies and procedures, such as referral and
5	screening procedures, conflict resolution policy, and a flexible funding policy and ensure they
6	are monitored and adhered to.
7	f. Ensure quality, including adherence to core values as adopted by the state advisory
8	commission.
9	g. Develop a plan for orientation of new coordinating committee members and
10	coordinated services team members to the coordinated services team process.
11	h. Identify and address gaps in services.
12	i. Ensure agency and partner satisfaction.
13	SECTION 21. 46.56 (3) (d) 2. a. of the statutes is renumbered 46.56 (3) (d) 1. h. and i.
14	and amended to read:
15	46.56 (3) (d) 1. h. Act Plan for sustainability of the system change beginning in the first
16	year of funding and thereafter by:
17	a. Acting as a consortium to pursue additional funding for the program initiative
18	through grants from the state or federal government or private foundations.
19	b. Maintaining formal collaborative agency relationships.
20	c. Including families in the process.
21	d. Addressing funding and required match issues.
22	e. Planning for realized savings from substitute care budgets to be reinvested in
23	community-based care.

1 i. Establish target groups of children with severe disabilities and their families to be served based on disability of the child, age of the child, geographic areas within the county 2 3 and other factors with the approval of the department by the initiative. If a county or tribe 4 applies for funding under sub. (15), children with severe emotional disabilities are required 5 to be a target group target groups. 6 **Section 22.** 46.56 (4) of the statutes is amended to read: 7 46.56 (4) ROLE OF ADMINISTERING AGENCY. The administering agency designated under 8 sub. (2) shall do all of the following: 9 (a) Oversee Assist the coordinating committee in oversight of the development and 10 implementation of the program initiative and designate the staff needed for the program 11 initiative. 12 (b) Assist the coordinating committee in drafting and executing interagency 13 agreements and any other operations policies and procedures necessary for the start-up and 14 operation of the program initiative. 15 (c) Distribute Assist the coordinating committee in distributing information about the 16 availability and operation of the program initiative to the general public as well as to public 17 or private service providers who might seek to make referrals to the program initiative. 18 (d) If the county board of supervisors or tribal governing body decides to seek state 19 funding under sub. (15), develop the application in cooperation with the coordinating 20 committee. 21 (e) Undertake such other activities in compliance with another provision of the statutes, 22 department rules and guidelines, interagency agreements and the directions of the 23 coordinating committee as are necessary to ensure the effective and efficient operation of the

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program initiative.

1 **SECTION 23.** 46.56 (5) of the statutes is amended to read: 2 46.56 (5) Interagency agreement shall include all of the 3 following: 4 (a) The identity of every county department, tribal, county, or private agency, school 5 district, cooperative educational service agency or county children with disabilities education 6 board, technical college district or other organization that will participate in the program 7 initiative. 8 (b) The identification of services and resources that the participating organizations will 9 commit to the program initiative or will seek to obtain, including joint funding of services and 10 supports and funding for the qualified staff needed to support the program initiative. 11 Examples may include, but are not limited to, cash or in-kind services and support such as staff 12 time and availability to participate on teams and committees; meeting space for teams and 13 committee meetings; role and responsibilities of agencies at the coordinated services team 14 level; and role and responsibilities of agencies at the coordinating committee level. 15 (c) The designation of service coordination agencies. 16 (d) The identification of any group of children with severe disabilities, involved in 17 multiple systems of care, or both, who will be targeted for services and supports through the 18 program initiative. 19 (e) The procedures for outreach, referral, intake, assessment, case planning and service 20 coordination that the program initiative will use. 21 (f) The specific criteria, based on sub. (7), that will be used for deciding whether a child 22 with severe disabilities, involved in multiple systems of care, or both, and his or her family

are eligible for services and supports through the program initiative.

1	(g) The procedures to be followed to obtain any required authorizations for sharing of
2	confidential information among organizations providing treatment, education and, support,
3	and services to a child with severe disabilities involved in multiple systems of care, or both,
4	and his or her family.
5	(h) The procedures that will be used for resolving conflicts among service providers.
6	coordinated services team members, or between clients and service providers.
7	(i) The methods that will be used to measure program initiative effectiveness, including
8	client satisfaction, and for revising the operation of the program initiative in light of evaluation
9	results.
10	SECTION 24. 46.56 (5) (j) of the statutes is created to read:
11	46.56 (5) (j) The mission and core values of the coordinated services team initiative.
12	SECTION 25. 46.56 (6) of the statutes is amended to read:
13	46.56 (6) Roles of Service Coordination agency, Service Coordinator, Project
14	COORDINATOR, AND INTERDISCIPLINARY THE COORDINATED SERVICES TEAM. (a) There may be one
15	or more service coordination agencies participating under the program initiative. The
16	organizations and the target groups that are to be served shall be identified in the interagency
17	agreement under sub. (5). A service coordination agency shall:
18	1. Be selected based on the experience of the service coordination agency or its staff
19	in providing services and supports;
20	2. Identify a specific individual to act as service coordinator for each child with severe
21	disabilities and the child's family to facilitate the implementation of the integrated service plan
22	coordinated services plan of care;
23	3. Provide or arrange for intake, assessment, case planning development of the plan of

care, and service coordination under sub. (8); and

1	4. Act as a resource for information about other services and supports for children with
2	severe disabilities and their families who are not eligible for the program initiative, if the
3	coordinating committee determines that this service or support can be provided without
4	interfering with the primary purpose of the program initiative.
5	SECTION 26. 46.56 (6) (c) of the statutes is amended to read:
6	46.56 (6) (c) The interdisciplinary coordinated services team shall have the functions
7	specified under sub. (8) (f) and (h).
8	SECTION 27. 46.56 (6) (d) and (e) of the statutes are created to read:
9	46.56 (6) (d) The project coordinator shall ensure the following functions are
10	performed:
11	1. Bring together parents and relevant staff from various agencies and organizations to
12	comprise the coordinating committee as specified in sub. (3) (a) and (b), and support their
13	activities, ensuring compliance with established policies and procedures specified in sub. (3
14	(d).
15	2. Work with the coordinating committee to maintain active organizational support as
16	established in the interagency agreement.
17	3. Work with the coordinating committee and service coordination agency to receive
18	and review referrals.
19	4. Work with the coordinating committee and service coordination agency to assure
20	provision of service coordination services for all family teams.
21	5. Guide the development of family teams, ensuring compliance with basic principles
22	of the coordinated services team initiative core values.
23	6. Review plans of care, including crisis response plans for consistency with
24	coordinated services team process and core values.

1 7. Assist the coordinating committee and family teams in establishing consistent 2 measures for initiative development, implementation, evaluation, and monitoring of the 3 project and outcomes. 4 8. Facilitate public education and awareness of issues and programming for families 5 and children. 6 9. Ensure ongoing support and training related to the coordinated services team process 7 to families and providers, including orientation for coordinated services team members. 8 10. Support service providers in developing strategies to enhance existing 9 programming, increasing resources, and establishing new resources relevant to project goals 10 and objectives. 11 11. Conduct liaison duties with local and state agencies ensuring data and reports are 12 submitted in an accurate and timely manner. 13 (e) Additional duties may include: 14 1. Maintain data of enrollments and screening results. 15 2. Establish and report monitoring and evaluation results. 16 3. Monitor targeted case management and Medicaid in-home activities, including 17 record keeping and billing processes. 18 4. Assist in developing and maintaining additional funding sources, including 19 collaborative efforts with system partners. 20 5. Assist in the development and implementation of family advocacy services. 21 **SECTION 28.** 46.56 (7) of the statutes is amended to read: 22 46.56 (7) ELIGIBILITY OF CHILDREN AND FAMILIES. Children with severe disabilities and 23 their families shall be eligible for the program initiative. The coordinating committee may

establish specific additional criteria for eligibility for services and may establish certain target

groups of children with severe disabilities to receive services. If target groups are established, only children with severe disabilities falling within the target groups are eligible for the program or the coordinated services teams. Any eligibility criteria shall meet all of the following conditions:

- (a) Be based on a community assessment that identifies areas of greatest need for integrated coordinated services for children with severe disabilities.
- (b) Give priority to children with severe disabilities who are at risk of placement outside the home or who are in an institution and are not receiving integrated coordinated community—based services and supports, or who would be able to return to community placement or their homes from an institutional placement if such services and supports were provided.
- (c) Not exclude a child with severe disabilities or that child's family from services or supports because of lack of ability to pay.
- **SECTION 29.** 46.56 (8) (a) to (g), and (h) (intro.), 2., 3., 4., 5., and 6., of the statutes are amended to read:
- 46.56 (8) (a) Referrals to the program initiative may come from any county departments tribal governing bodies, agencies, school districts, cooperative educational service agencies, county children with disabilities education boards, technical college districts, courts assigned to exercise jurisdiction under chs. 48 and 938 or any other organization or the child with severe disabilities or his or her family may contact the administering agency or service coordination agency to request services and supports.
- (b) Upon referral, staff from the service coordination agency or designated by the coordinating committee shall screen the referral to determine if the child with severe disabilities and the child's family appear to meet the eligibility criteria and any target groups

established by the coordinating committee. If the child with severe disabilities and the child's family appear to be eligible, the staff shall gather assist the referring person, and parent or parents, in gathering necessary information from the child's family and any current service providers to prepare an application for the program initiative.

- (c) Consent for release of information and participation of a child with severe disabilities and his or her family in the program initiative and in the program initiative evaluation must be obtained from the child's parent, or the child, if appropriate or required, or by order of a court with appropriate jurisdiction.
- (d) The <u>individuals designated by the coordinating committee or</u> service coordination agency shall review the completed application <u>with the family</u>, and, in light of the eligibility criteria in the interagency agreement and sub. (7), determine whether the child with severe disabilities and the child's family are appropriate for services through the program enrollment in the coordinated services team initiative. The service agency individuals designated by the coordinating committee or service coordination agency shall approve or disapprove each application within 30 days after the date on which the application was received.
- (e) If the child with severe disabilities and the child's family are found to be ineligible, or it is determined that involvement in the initiative is not the best way to meet the needs, staff from the identified by the coordinating committee or service coordination agency shall assist them in obtaining identifying and accessing needed services or supports from appropriate providers or resources.
- (f) If the child with severe disabilities and the child's family are found to be eligible for the program enrollment in the coordinated services teams initiative, the agency shall assign a service coordinator who shall assemble an interdisciplinary a coordinated services team to

assess the <u>strengths and needs of the</u> child with severe disabilities and the child's family's need for treatment, education, care and support.

- (g) The service coordinator shall assemble the results of all prior relevant assessments and evaluations documenting the service strengths and needs of the child with severe disabilities and the child's family, including individualized education program team evaluations under s. 115.782 or independent educational evaluations, court-ordered evaluations under s. 48.295 or 938.295, family support program evaluations, community integration program or community options program assessments, and any other available medical, psychiatric, psychological, vocational or developmental educational, medical, vocational, and psychosocial evaluations.
- (h) (intro.) The interdisciplinary coordinated services team, the family of the child with severe disabilities and the service coordinator shall, based on a review of a summary of existing assessments of strengths and needs that have been assembled and any additional evaluations and plans that they or the family find to be necessary, prepare an integrated service a strength—based, gender and culturally competent, coordinated services plan of care within 60 days after the date on which the application was received approved. The integrated service coordinated services plan of care shall include all of the following:
- 2. The short–term and long–term goals for treatment and support services for to address the needs of the child with severe disabilities and the child's family.
- 3. The <u>supports and</u> services needed by the child with severe disabilities and the child's family, including the identity of each <u>individual and</u> organization that will be responsible for providing a portion of the treatment, education and support services to be offered to the child and the child's family, and the specific services that each organization will provide the services

1 and supports. Emphasis shall be placed on resources available through community and natural 2 supports. 3 4. Criteria for measuring the effectiveness and appropriateness of the integrated service 4 plan coordinated services plan of care so that it can be modified as needed to better meet the 5 child's and the child's family's needs. Plans shall be oriented to meaningful outcomes and to 6 the least restrictive setting possible. 7 5. Identification of any administrative or judicial procedures under ch. 48, 51, 55, 115, 8 118, or 938 that may be necessary in order to fully implement the integrated service plan 9 coordinated services plan of care and the identity of the individual or organization that will 10 be responsible for initiating those procedures, if any are required. 11 6. Identification of available sources of funding to support the services and supports 12 needed for the child with severe disabilities and his or her family and an allocation of funding 13 responsibility among organizations where more than one organization is responsible for the 14 child's and the child's family's treatment, education and support services. 15 **SECTION 30.** 46.56 (8) (h) 7. and 8. of the statutes are created to read: 16 46.56 (8) (h) 7. Clear statements articulating the specific needs of the child and family 17 to be addressed. Needs may not be stated in terms of services. 18 8. Plans for responding to possible crisis situations that may occur with the child and 19 the child's family at home, in school, or in the community. 20 **SECTION 31.** 46.56 (8) (i) to (k) of the statutes are amended to read: 21 46.56 (8) (i) If additional evaluations are needed, the service coordination agency 22 <u>coordinated services team</u> shall arrange for them or assist the child's family in obtaining them. 23 (j) The proposed integrated service plan coordinated services plan of care shall be

submitted to any service providers who would be included in the integrated service plan and

the court assigned to exercise jurisdiction under chs. 48 and 938 if participation in the program has been court ordered under s. 48.345 (6m) or 938.34 (6m) coordinated services plan of care.

- (k) Upon written approval of the integrated service plan coordinated services plan of care by the proposed service providers and, the child's family, and coordinated services team unless the child's involvement in the program is through court order under s. 48.355 or 938.355, in which case approval of the court may be substituted for that of the family, the integrated service plan coordinated services plan of care shall be implemented by the service coordination agency and the service providers individuals and organizations designated to provide services and supports under the integrated service plan coordinated services plan of care.
 - **SECTION 32.** 46.56 (8) (L) of the statutes is repealed.

- SECTION 33. 46.56 (8) (m) to (o) of the statutes are amended to read:
 - 46.56 (8) (m) Each <u>organization or</u> service provider designated to provide services <u>and</u> <u>supports</u> under the <u>integrated service</u> <u>coordinated services</u> plan <u>of care</u> shall identify a specific staff person who shall serve as the ongoing <u>member of a treatment team contact person</u> to ensure continuity and communication while services are being provided to the child <u>with</u> severe disabilities and his or her family under the <u>integrated service</u> <u>coordinated services</u> plan <u>of care</u>. The service coordinator shall coordinate the operations of the <u>treatment coordinated</u> <u>services</u> team.
 - (n) The service coordinator shall advocate for the child with severe disabilities and the child's family and ensure that they are provided the opportunity to participate in assessment, planning and ongoing review of services to the fullest extent possible.

(o) Services <u>and supports</u> under this section shall be provided in the community in the least restrictive and least intrusive setting, and preferably in the home or home community, and manner which meets the best interests of the child with severe disabilities.

SECTION 34. 46.56 (8) (p) and (q) of the statutes are repealed.

SECTION 35. 46.56 (8) (r) and (s) of the statutes are amended to read:

46.56 (8) (r) The On a regular basis, as defined by the specific strengths and needs of each coordinated services team, the service coordinator shall, when necessary and at least every 6 months, assemble the treatment coordinated services team, the family of the child with severe disabilities, the child with severe disabilities, where appropriate, and any counsel, guardian ad litem or other person advocating for the interests of the child with severe disabilities or the child's family to review the integrated service coordinated services plan of care, progress toward the goals of the integrated service plan of care, establish new goals, request the inclusion of new participating organizations or individuals, or otherwise modify the integrated service coordinated services plan of care to better meet the needs of the child with severe disabilities and the child's family. Decisions to amend the integrated service coordinated services plan of care must be approved by the service coordinator, the treatment coordinated services team, the family and, where the integrated service plan of care is being provided under a court order, by the court. Coordinated services teams shall meet at least once every 3 months.

(s) Services under the integrated service plan may be terminated The team process may be transitioned by the agreement of all participants on the coordinated services team that the goals of treatment and support have been met and that an integrated service plan is no longer needed, by order of the court if services are being provided under court order, or are being met; by withdrawal of the family of the child with severe disabilities unless participation is court

ordered, or; by the service coordination agency upon a recommendation from the service coordinator and the treatment coordinated services team; that further services are not in the child's best interests, or the family refuses to participate in the process; or that the child with severe disabilities and child's family no longer meet the eligibility criteria for the program or for the coordinated services team; or by court order, if services are being provided under court order.

SECTION 36. 46.56 (9) of the statutes is amended to read:

46.56 (9) IMMEDIATE CARE. Individual county departments, <u>tribal governing bodies</u>, <u>other</u> agencies and other service providers <u>may shall</u> provide immediate services <u>and supports</u> as necessary and appropriate to children <u>with severe disabilities</u> and their <u>families</u> who have been referred for participation in the <u>program initiative</u> while assessment and planning take place.

SECTION 37. 46.56 (10) to (13) of the statutes are amended to read:

46.56 (10) RELATION TO FAMILY OTHER SUPPORT PROGRAM PROGRAMS. In any county or tribe that has a family support program under s. 46.985, or other support programs such as comprehensive community services or office of justice assistance programs, the integrated service program coordinated services initiative shall coordinate its activities with the family other support program programs. The administering agency for the family support program may act as a service coordination agency for the integrated service program and the family support program advisory committee may act as the coordinating committee if the requirements of this section are met and the department gives its approval.

(11) INFORMAL CONFLICT CONFLICT MANAGEMENT. The department, administering agency, service coordination agencies and service coordinators shall establish and use informal means for conflict management, including consultation, mediation and independent

assessment, whenever possible. A formal conflict management policy shall be established in writing by the coordinating committee for use by families, providers, and other individuals involved in the coordinated services team initiative.

- (12) Administrative appeals. Decisions by the service coordination agency regarding eligibility, denial, termination, reduction or appropriateness of services may be appealed to the coordinating committee by a child with severe disabilities who is a service applicant or recipient or the parent or guardian or guardian ad litem of the applicant or recipient. Decisions of the coordinating committee may be appealed to the department under ch. 227.
- (13) REVIEW OF ACTIONS BY INDIVIDUAL AGENCIES. Nothing in this section shall limit, modify or expand the rights, remedies or procedures established in federal or state law for individuals or families receiving services provided by individual organizations that are participating in the integrated service plan of care.

SECTION 38. 46.56 (14) (a), (b) (intro.), 1. and 3. and (c) (intro.) and 1. of the statutes are amended to read:

46.56 (14) (a) In order to support the development of a comprehensive system of coordinated care for children with severe disabilities and their families, the department shall establish a statewide advisory committee with representatives of county departments and tribal governing bodies, the department of public instruction, educational agencies, the department of corrections, the correctional system, professionals experienced in the provision of services to children with severe disabilities, and their families with children with severe disabilities, advocates for such families and their children, the subunit of the department of workforce development that administers economic support programs and vocational rehabilitation, the technical college system, health care providers, courts assigned to exercise jurisdiction under chs. 48 and 938, the subunit of the department administering child welfare,

child welfare officials, and other appropriate persons as selected by the department. The department may use an existing committee for this purpose if it has representatives from the listed groups and is willing to perform the required functions. This committee shall monitor the development of programs <u>initiatives</u> throughout the state and support communication and mutual assistance among operating <u>programs initiatives</u> as well as those that are being developed.

- (b) (intro.) The department shall provide, either directly or through purchase of services, the following support services to the counties <u>and tribes</u> that elect to participate in the <u>program initiative</u>:
- 1. Consultation in the areas of developing <u>and maintaining</u> individual <u>integrated service</u> plans <u>initiatives</u>, <u>and</u> finding appropriate resources, and establishing and maintaining local programs.
- 3. Assessment resources for cases where no local evaluation resource is available or sufficient to enable development of an effective integrated service plan coordinated services plan of care. These may be provided directly through state—operated programs or by referral to private service providers.
- (c) (intro.) The department shall evaluate the <u>programs initiatives</u> funded under this section. All organizations participating in the <u>program initiative</u> shall cooperate with the evaluation. The evaluation shall include information about all of the following:
- 1. The number of days that children-with severe disabilities served in the programs spent in out-of-home placement compared to other children with severe disabilities in the target group and the costs associated with these placements.
- **SECTION 39.** 46.56 (14) (c) 2. of the statutes is repealed and recreated to read:
- 24 46.56 (14) (c) 2. A systems change and sustainability plan.

1 **SECTION 40.** 46.56 (14) (c) 3. and 4. of the statutes are amended to read: 2 46.56 (14) (c) 3. A comparison between any changes in problem behaviors of 3 participants before and after participation in the program initiative. 4 4. A comparison between school attendance and performance of participants before and 5 after participation in the program initiative. 6 **SECTION 41.** 46.56 (14) (c) 6. and 7. of the statutes are amended to read: 7 46.56 (14) (c) 6. Parent and child satisfaction with the program initiative. 8 7. Types of services provided to children with severe disabilities and their families in 9 the program initiative through the integrated service plan coordinated services initiative and 10 the cost of these services. 11 **SECTION 42.** 46.56 (14) (c) 8. of the statutes is repealed. 12 **SECTION 43.** 46.56 (14) (d) of the statutes is amended to read: 13 46.56 (14) (d) Notwithstanding sub. (1) (c) (intro.), if the state is funding the program 14 <u>initiative</u> in a particular county under sub. (15), the department may permit the county to serve 15 any individual who has severe disabilities and who has not attained 22 years of age if the 16 individual's mental, physical, sensory, behavioral, emotional or developmental disabilities or 17 whose combination of multiple disabilities meets the requirements specified in sub. (1) (c) 1. 18 to 4. 19 **SECTION 44.** 46.56 (15) (a) and (b) (intro.) of the statutes are amended to read: 20 46.56 (15) (a) From the appropriation under s. 20.435 (7) (co) and (cr), the department 21 shall make available funds to implement programs. The funds may be used to pay for the 22 intake, assessment, case planning and service coordination provided under sub. (8) and for 23 expanding the capacity of the county to provide community-based care and treatment for 24 children with severe disabilities initiatives as outlined in this section.

1 (b) (intro.) In order to apply for funds under this section the county board of supervisors 2 or tribal governing body shall do all of the following: 3 **SECTION 45.** 46.56 (15) (b) 1r. of the statutes is created to read: 4 46.56 (15) (b) 1r. Demonstrate that the process is followed, and principles and core 5 values, as outlined by the advisory committee established by the department, are adhered to. 6 **SECTION 46.** 46.56 (15) (b) 2. to 4. of the statutes are amended to read: 7 46.56 (15) (b) 2. Establish children with severe emotional disturbances to be the priority 8 target group served by the program initiative. **COMMENT:** Is this correct? 9 3. Submit a plan to the department for implementation of the integrated service program 10 coordinated services team initiative in accordance with the requirements of this section. 11 4. Submit a description of the existing services and supports in the county or tribe for 12 children with severe disabilities, an assessment of any gaps in services, and a plan for using 13 the funds under this program <u>initiative</u> or from other funding sources to develop or expand any needed community-based services such as in-home treatment, treatment foster care, day 14 15 treatment, respite care or crisis services the initiative. 16 **SECTION 47.** 46.56 (15) (b) 5. of the statutes is created to read: 17 46.56 (15) (b) 5. Comply with s. 46.56. 18 **SECTION 48.** 46.56 (15) (c) and (d) of the statutes are amended to read: 19 46.56 (15) (c) In order to obtain funds under this section, matching funds equal to 20% 20 of the requested funding shall be provided by the participating county departments and school 21 districts agencies and organizations. All of the participating county departments and school 22 districts agencies and organizations shall participate in providing the match, which may be 23 cash or in-kind. The department shall determine what may be used as in-kind match.

(d) In order to apply for funding, at least one school district, cooperative educational
service agency or county children with disabilities education board serving children with
severe disabilities in the county must participate in the program there shall be a coordinating
committee that meets the requirements under sub. (3) (a) and (b), that will carry out the
responsibilities under sub. (3) (d).
SECTION 49. 46.56 (15) (e) of the statutes is repealed.
SECTION 50. 59.53 (7m) of the statutes is created to read:
59.53 (7m) COORDINATED SERVICES TEAMS. The board may establish a program of
coordinated services teams under s. 46.56.

(END)