LR:tyjal;wu 11/19/2007

AN ACT to repeal 46.56 (8) (L), 46.56 (8) (p) and (q), 46.56 (14) (c) 8. and 46.56 (15) 1 2 (e); to renumber 46.56 (1) (j); to renumber and amend 46.56 (1) (c), 46.56 (1) (f) 3 and (g), 46.56 (1) (h), 46.56 (1) (i), 46.56 (1) (L) to (n), 46.56 (1) (o), 46.56 (3) (d) 4 2. a. and b. and 46.56 (8) (r) and (s); to amend 46.56 (title), 46.56 (1) (a), 46.56 (1) 5 (b), 46.56 (1) (e), 46.56 (2) (title), 46.56 (3) (a), 46.56 (3) (b) (intro.) 1., 2., 4., 5., 6 and 7., 46.56 (3) (d) 1., 46.56 (4), 46.56 (5), 46.56 (6), 46.56 (6) (c), 46.56 (7), 46.56 7 (8) (a) to (g), and (h) (intro.), 2., 3., 4., 5., and 6., 46.56 (8) (i) to (k), 46.56 (9), 46.56 8 (10) to (13), 46.56 (14) (a), (b) (intro.), 1. and 3. and (c) (intro.) and 1., 46.56 (14) 9 (c) 3. and 4., 46.56 (14) (c) 6. and 7., 46.56 (14) (d), 46.56 (15) (a) and (b) (intro.), 10 46.56 (15) (b) 2. to 4., 46.56 (15) (c) and (d), 48.345 (6m) and 938.34 (6m); to 11 repeal and recreate 46.56 (14) (c) 2. and 59.53 (7); to create 20.435 (7) (cs), 46.56 12 (1) (ar), 46.56 (1) (bm), 46.56 (1) (de), (dm), and (ds), 46.56 (1) (g), 46.56 (1) (L), 13 46.56 (1) (q), 46.56 (3) (a) 8., 46.56 (3) (b) 8. to 17., 46.56 (3) (d) 1. e. to i., 46.56 14 (5) (j), 46.56 (6) (cr), 46.56 (6) (d) and (e), 46.56 (8) (h) 7. and 8., 46.56 (15) (b) 1r. 15 and 46.56 (15) (b) 5. of the statutes; and to affect 46.56 (8) (m) to (o) of the statutes; relating to: collaborative systems of care for families with children who are 16 17 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 agreement's 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 proposals for counties to develop coordinated services teams (CSTs). 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 makes several changes to s. 46.56. Specifically, the draft does the following:

• Expands the ISP's coverage to include not just children with severe disabilities, but other children who are involved with multiple systems of

care, as well as their families, and changes the name of the program to the CST initiative.

- Provides \$1,466,000 general purpose revenue in 2008–09 to provide grants to counties for CST initiatives.
- To reflect the expansion of the program's focus, changes the terms "integrated services", "integrated services plan", and "interdisciplinary team" to "coordinated services", "coordinated services plan of care", and "coordinated services team", respectively.
- Includes tribes as entities that may administer the CST initiative.
- Provides funding to begin to phase in the remaining counties and tribes that do not currently operate either an ISP or a CST, to enable these counties and tribes to establish the CST.
- Amends the definition of CST to emphasize the process by which the child's family, service providers, and informal resource persons work together to respond to the needs of the child and family, rather than by describing the characteristics of the individuals on the team.
- Expands the required and optional representatives that serve on the coordinating committee in a county or tribe. The coordinating committee is the entity that:
 - -- prepares interagency agreements for the operation of a CST.
 - --assesses how the CST relates to other service coordination programs operating in the county or tribe.
 - --assists the administering agency in developing the application for CST funding.
 - --reviews determinations by the service coordination agency regarding program eligibility and operation.
- Expands the duties of the coordinating committee to include:
 - —establishing operational policies and procedures.
 - —ensuring quality, including adherence to core values as adopted by the state advisory committee.
 - --developing a plan for orientation of new coordinating committee members and CST members to the CST process.
 - --identifying and addressing gaps in services.
 - --ensuring agency and partner agency satisfaction.

- Creates the role of project coordinator, and defines the project coordinator's duties, which are to:
 - —bring together parents and staff from agencies and organizations to comprise the coordinating committee, and support their activities.
 - —work with the coordinating committee to maintain support agency participation as established in the interagency agreement.
 - —work with the coordinating committee and service coordination agency to receive and review referrals and assure provision of service coordination services.
 - --guide the development of groups of people working with the child and the child's family to ensure compliance with the basic principles of the CST initiative's core values.
 - --review plans of care.
 - —assist the coordinating committee and family teams in establishing consistent measure for initiative development, implementation, evaluation, and monitoring of the project and outcomes.
 - --facilitate public education and awareness of issues and programming for families and children.
 - --ensure ongoing support and training related to the CST process to families and providers.
 - --provide support to service providers in developing strategies to enhance existing programming, increasing resources, and establishing new resources.
 - --ensure that local and state agencies submit data and reports in an accurate and timely manner.
- 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 2008-09
2	20.435 Health and Family Services, department of
3	(7) DISABILITY AND ELDER SERVICES AND LOCAL
4	ASSISTANCE
5	(cs) Coordinated services teams GPR -0- \$1,466,000
6	SECTION 2. 20.435 (7) (cs) of the statutes is created to read:
7	20.435 (7) (cs) The amounts in the schedule for coordinated services teams under s.
8	46.56.
9	SECTION 3. 46.56 (title) of the statutes is amended to read:
10	46.56 (title) Integrated service programs for children with severe disabilities
11	Coordinated services team initiatives for children and their families.
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
14	county board of supervisors or tribe to administer the program coordinated services team
15	<u>initiative</u> .
16	SECTION 5. 46.56 (1) (ar) of the statutes is created to read:
17	46.56(1) (ar) "Advocacy" means actively supporting a child in the coordinated services
18	team initiative, and the child's family, to ensure they receive the full benefits of the coordinated
19	services team initiative, by ensuring that the coordinated services team process and principles
20	are followed; by helping families gain access to and a voice in the decision-making that
21	establishes the child's and family's plan of care; and by fostering strong working relationships
22	between families, service systems, and providers which will result in a clear improvement in
23	children's and families' lives

1	SECTION 6. 46.56 (1) (b) of the statutes is amended to read:
2	46.56 (1) (b) "Agency" means a <u>public or</u> private nonprofit organization that provides
3	treatment services for children with severe disabilities and their families services and other
4	resources for children and families.
5	SECTION 7. 46.56 (1) (bm) of the statutes is created to read:
6	46.56 (1) (bm) "Child" or "children" means a person or persons under age 18 with
7	severe disabilities, involved in multiple systems of care, or both.
8	SECTION 8. 46.56 (1) (c) of the statutes is renumbered 46.56 (1) (o) and amended to read:
9	46.56 (1) (o) "Child with severe Severe disabilities" means an individual who has not
10	attained 18 years of age and whose mental, physical, sensory, behavioral, emotional or
11	developmental disabilities, or whose a combination of multiple disabilities that meets all of
12	the following conditions:
13	1. Is severe in degree.
14	2. Has persisted for at least one year or is expected to persist for at least one year.
15	3. Causes substantial limitations in the child's ability to function in the family, the
16	school or the community and with the child's ability to cope with the ordinary demands of life.
17	4. Causes the child to need services or other resources from 2 or more service systems.
18	SECTION 9. 46.56 (1) (de), (dm), and (ds) of the statutes are created to read:
19	46.56 (1) (de) "Family" means a child's primary caregiver or caregivers and the child's
20	siblings.
21	(dm) "Family resources" means the child's extended family and community
22	relationships, housing, environments, institutions, sources of income, services, education, and
23	other programs families need to raise their children.".

1	(ds) "Initiative" means a practice of utilizing a strength-based system to provide
2	coordinated services to a child and a child's family.
3	SECTION 10. 46.56 (1) (e) of the statutes is amended to read:
4	46.56 (1) (e) "Intake" means the process by which the service coordination agency
5	initially screens a child with severe disabilities and the child's family to see if a complete
6	assessment is needed determine eligibility and to determine the need for a comprehensive
7	clinical mental health assessment.
8	SECTION 11. 46.56 (1) (f) and (g) of the statutes are renumbered 46.56 (1) (c) and (cm)
9	and amended to read:
10	46.56 (1) (c) "Integrated services Coordinated services" means treatment, education,
11	care, and support services and other resources provided, in a coordinated manner, for a child
12	with severe disabilities and his or her family.
13	(cm) "Integrated service plan Coordinated services plan of care" means the plan for
14	treatment, education and support, services and other resources for an eligible a child with
15	severe disabilities and the child's family under sub. (8) (h).
16	SECTION 12. 46.56 (1) (g) of the statutes is created to read:
17	46.56 (1) (g) "Multiple systems of care" means more than one system that provides
18	treatment, services and supports, or programming to a child or family, including the health
19	care, mental health, alcohol or other drug abuse, education, juvenile justice, economic
20	support, and child welfare systems.
21	SECTION 13. 46.56 (1) (h) of the statutes is renumbered 46.56 (1) (f) and amended to
22	read:
23	46.56 (1) (f) "Interagency agreement" means a written document of understanding
24	among service providers and other partner agencies that are represented on the coordinating

1	committee under sub. (3) that identifies mutual responsibilities for implementing integrated
2	coordinated services for children with severe disabilities and their families.
3	SECTION 14. 46.56 (1) (i) of the statutes is renumbered 46.56 (1) (cs) and amended to
4	read:
5	46.56 (1) (cs) "Interdisciplinary team Coordinated services team" means a group of
6	professionals, assembled by the service coordinator, from various service systems who meet
7	all of the 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 individuals, including family members, service providers, and
17	informal resource persons, who work together to respond to service needs faced by a child and
18	his or her family.
19	SECTION 15. 46.56 (1) (j) of the statutes is renumbered 46.56 (1) (h).
20	SECTION 16. 46.56 (1) (L) to (n) of the statutes are renumbered 46.56 (1) (i) to (k) and
21	amended to read:
22	46.56 (1) (i) "Service coordination" means a case management service that coordinates
23	the coordination of multiple service providers who and family resources that are serving a
24	particular child with severe disabilities and the child's family. The term includes arrangement

for coordination of the assessment process, development of an integrated service plan a coordinated services 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, monitoring of the child's participant's progress, facilitation of periodic reviews of the integrated service plan family centered coordinated services plan of care and coordination and maintenance of clear lines of communication among all service family resource providers and the child and the child's family.

- (j) "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 <u>eligible</u> children with severe <u>disabilities</u> and their families.
- (k) "Service coordinator" means an individual who is qualified by specialized training and clinical experience with children with severe disabilities and their families, who receives ongoing coaching and support from the service coordination agency and the project coordinator in sub. (6) (d), and who is appointed by the service coordination agency to provide coordination of treatment, education and support services, and other family resources for eligible children with severe disabilities and their families.

SECTION 17. 46.56 (1) (L) of the statutes is created to read:

- 46.56 (1) (L) "Service provider" means a professional from a service system who meets one or more of the following criteria:
- 1. Is skilled in providing treatment services, education, and other family resources for children and their families.

1	2. Conducts comprehensive evaluations of the needs of children and their families for
2	family resources.
3	3. Possesses skills and knowledge of the specific types of needs or dysfunctions
4	presented by the child who is undergoing an assessment.
5	4. Is currently providing treatment, education, or other family resources for a child, a
6	family, or both.
7	SECTION 18. 46.56 (1) (o) of the statutes is renumbered 46.56 (1) (m) and amended to
8	read:
9	46.56 (1) (m) "Service system" means the public and private organizations that provide
10	specialized services for children with mental, physical, sensory, behavioral, emotional, or
11	developmental disabilities or that provide child welfare, alcohol or other drug abuse, juvenile
12	justice, educational, or health care services for children, based upon the child and family's
13	identified strengths and needs.
14	SECTION 19. 46.56 (1) (q) of the statutes is created to read:
15	46.56 (1) (q) "Tribe" means a federally recognized American Indian tribe or band in
16	this state.
17	SECTION 20. 46.56 (2) (title) of the statutes is amended to read:
18	46.56 (2) (title) Establishment of Programs Coordinated Services Team Initiatives
19	If a county board of supervisors or tribe establishes a program a coordinated services team
20	initiative under s. 59.53 (7), it shall appoint a coordinating committee and designate an
21	administering agency. The program coordinated services team initiative may be funded by
22	the county or tribe, or the county board of supervisors or tribe may apply for funding by the
23	state in accordance with sub. (15).

SECTION 21. 46.56 (3) (a) of the statutes is amended to read:

46.56(3) (a) The coordinating committee shall have the responsibilities specified in par.
(d) and shall include representatives from all of the following:
1. The county department responsible for child welfare and protection services or, for

- 1. The county department responsible for child welfare and protection services or, for an initiative established by a tribe, the tribal agency responsible for child welfare and protection.
- 2. The county department responsible for mental health and alcohol and drug abuse services for children and families <u>or</u>, <u>for an initiative established by a tribe</u>, <u>the tribal agency responsible for these services</u>.
- 3. The county department responsible for providing services for children who are developmentally disabled <u>or</u>, for an initiative established by a tribe, the tribal agency responsible for providing these services.
- 4. The family support program under s. 46.985 if the county <u>or tribe</u> has a family support program.
- 5. The juvenile court administrator or another representative appointed by the judge responsible for cases heard under chs. 48 and 938 or, for an initiative established by a tribe, a representative of the tribal court.
- 6. The largest school district in the county and any cooperative educational service agency, if it provides special education in the county, or any county children with disabilities education board in the county, and any other school district in the county that is willing to participate in the program coordinated services team initiative, at the discretion of the administering agency. If the initiative is established by a tribe, the tribe must include a representative of the school district serving the majority of pupils who reside on the reservation of the tribe or on trust lands held for the tribe and any cooperative educational service agency providing special education services to these pupils.

1	7. At least 2 parents of children with severe disabilities, or the number of parents of
2	children with severe disabilities that it will take to make the parent representation equal to 25%
3	of the coordinating committee's membership, whichever is greater.
4	SECTION 22. 46.56 (3) (a) 8. of the statutes is created to read:
5	46.56 (3) (a) 8. The agency responsible for economic support programs.
6	SECTION 23. 46.56 (3) (b) (intro.) 1., 2., 4., 5., and 7. of the statutes are amended to read:
7	46.56 (3) (b) The coordinating committee may include any of the following:
8	1. Representatives of the vocational rehabilitation office that provides services to the
9	county or tribe.
10	2. Representatives of a technical college district that is located in the county or serving
11	members of the tribe.
12	4. Representatives of health maintenance organizations that are operating in the county
13	or serving members of the tribe.
14	5. Representatives of law enforcement agencies that are located in the county or
15	representatives of a tribal law enforcement agency.
16	7. Representatives of agencies that are located in the county or serving members of the
17	<u>tribe</u> .
18	SECTION 24. 46.56 (3) (b) 8. to 17. of the statutes are created to read:
19	46.56 (3) (b) 8. Local elected officials.
20	9. Representatives of a vocational and technical school.
21	10. Local business representatives.
22	11. Community organizations serving children and families.

12. Representatives of the county board or of the elected governing body of the tribe.

13. Representatives of the regional offices of the department.

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1 14. Representatives of the local faith–based community. 2 15. Representatives of probation and parole agencies. 3 16. Representatives of economic support agencies and the W-2 agency, if a different 4 agency. 5 17. Representatives of vocational rehabilitation programs. 6 **SECTION 25.** 46.56 (3) (d) 1. of the statutes is amended to read: 7 46.56 (3) (d) 1. a. Prepare one or more interagency agreements in accordance with sub. 8 (5) that all participatory organizations in the program coordinated services team initiative 9 agree to follow in creating and operating a program an initiative. The interagency agreement 10 shall outline the mission, values, and principles of the coordinated services team initiative, as 11 well as expectations for partner organizations represented on the coordinating committee 12 under sub. (3), including the funding match required under sub. (15) (c). 13 b. Assess how the program coordinated services team initiative relates to other service 14 coordination programs operating at the county, tribal, or local level and take steps to work with 15 the other service coordination programs and to avoid duplication of activities, services, and 16 supports. 17 c. If a county or tribe applies for funding under sub. (15), assist the administering agency 18 in developing the application required under sub. (15) (b). 19 d. Review determinations by the service coordination agency regarding eligibility, for 20 assessment, appropriate services family resources, or funding of services at the request of any 21 applicant, recipient, parent of a child, or participating county department, or tribal agency, 22 school district, cooperative educational service agencies, or county children with disabilities

education boards. The committee shall adopt written procedures for conducting reviews.

SECTION 26. 46.56 (3) (d) 1. e. to i. of the statutes are created to read:

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1	46.56 (3) (d) 1. e. Establish operational policies and procedures, such as referral and
2	screening procedures, a conflict management policy, and a flexible funding policy, and ensure
3	they are monitored and adhered to.
4	f. Ensure quality, including adherence to core values as adopted by the state advisory
5	committee.
6	g. Develop a plan for orientation of new coordinating committee members and
7	coordinated services team members to the coordinated services team process.
8	h. Identify and address gaps in services for children and families enrolled in the
9	coordinated services team initiative.
10	i. Ensure agency and partner agency satisfaction through performance of a client and
11	partner satisfaction survey.
12	SECTION 27. 46.56 (3) (d) 2. a. and b. of the statutes are renumbered 46.56 (3) (d) 1. j.
13	and k. and amended to read:
14	46.56 (3) (d) 1. j. Act Plan for sustainability of the system change started by the
15	coordinated services team initiative beginning in the first year of funding and thereafter by
16	acting as a consortium to pursue additional funding for the program coordinated services team
17	initiative through grants from the state or federal government or private foundations-;
18	maintaining formal collaborative agency relationships; including families in the process by
19	emphasizing rights and advocacy; addressing funding and issues related to matching funds
20	required under sub. (15) (c); and recommending a plan for realized savings from substitute
21	care budgets to be reinvested in community-based care.
22	k. Establish target groups of children with severe disabilities and their families to be
23	served based on disability of the child, age of the child, geographic areas within the county

and other factors with the approval of the department by the coordinated services team

1 initiative. If a county or tribe applies for funding under sub. (15), children with severe 2 emotional disabilities are required to be a target group. 3 **SECTION 28.** 46.56 (4) of the statutes is amended to read: 4 46.56 (4) ROLE OF ADMINISTERING AGENCY. The administering agency designated under 5 sub. (2) shall do all of the following: 6 (a) Oversee Assist the coordinating committee in oversight of the development and implementation of the program coordinated services team initiative and designate the staff 7 8 needed for the program coordinated services team initiative. 9 Assist the coordinating committee in drafting and executing interagency (b) 10 agreements and any other operations policies and procedures necessary for the start-up and 11 operation of the program coordinated services team initiative. 12 (c) Distribute Assist the coordinating committee in distributing information about the 13 availability and operation of the program coordinated services team initiative to the general 14 public as well as to public or private service providers who might seek to make referrals to the 15 program coordinated services team initiative. 16 (d) If the county board of supervisors or tribe decides to seek state funding under sub. 17 (15), develop the application in cooperation with the coordinating committee. 18 (e) Undertake such other activities in compliance with another provision of the statutes, 19 department rules and guidelines, interagency agreements and the directions of the 20 coordinating committee as are necessary to ensure the effective and efficient operation of the 21 program coordinated services team initiative. 22 **SECTION 29.** 46.56 (5) of the statutes is amended to read: 23 46.56 (5) Interagency agreement shall include all of the 24 following:

(a) The identity of every county department, agency, school district, cooperative educational service agency or county children with disabilities education board, technical college district or other organization that will participate in the program coordinated services team initiative.

- (b) The identification of services and resources that the participating organizations will commit to the program coordinated services team initiative or will seek to obtain, including joint funding of services and supports and funding for the qualified staff needed to support the program coordinated services team initiative. Examples include cash or contribution of in–kind services and resources as identified by the department under sub. (15) (c). This identification shall specify the roles and responsibilities of the coordinated services team and the coordinating committee.
 - (c) The designation of service coordination agencies.

- (d) The identification of any group of children with severe disabilities who will be targeted for services <u>and supports</u> through the <u>program coordinated services team initiative</u>.
- (e) The procedures for outreach, referral, intake, assessment, case planning, and service coordination that the program coordinated services team initiative will use.
- (f) The specific criteria, based on sub. (7), that will be used for deciding whether a child with severe disabilities and his or her family are eligible for services and supports through the program initiative.
- (g) The procedures to be followed to obtain any required authorizations for sharing of confidential information among organizations providing treatment <u>services</u>, education and services, and other resources to a child with severe disabilities and his or her family.

1	(h) The procedures that will be used for resolving managing conflicts among service
2	providers or coordinated services team members, or between clients the child or the child's
3	<u>family</u> and service providers.
4	(i) The methods that will be used to measure program coordinated services team
5	initiative effectiveness, including elient satisfaction of the child and the child's family, and for
6	revising the operation of the program coordinated services team initiative in light of
7	evaluation results.
8	SECTION 30. 46.56 (5) (j) of the statutes is created to read:
9	46.56 (5) (j) The mission and core values of the coordinated services team initiative.
10	SECTION 31. 46.56 (6) of the statutes is amended to read:
11	46.56 (6) Roles of Service Coordination agency, Service Coordinator, Project
12	COORDINATOR, AND INTERDISCIPLINARY THE COORDINATED SERVICES TEAM. (a) There may be one
13	or more service coordination agencies participating under the program coordinated services
14	team initiative. The organizations and the target groups that are to be served shall be identified
15	in the interagency agreement under sub. (5). A service coordination agency shall do all of the
16	following:
17	1. Be selected based on the experience of the service coordination agency or its staff
18	in providing services; and supports.
19	2. Identify a specific individual to act as service coordinator for each child with severe
20	disabilities and the child's family to facilitate the implementation of the; integrated service
21	plan coordinated services plan of care.
22	3. Provide or arrange for intake, assessment, case planning development of the plan of
23	care, and service coordination under sub. (8); and.

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and review referrals.

4. Act as a resource for information about other services and resources for children with severe disabilities and their families who are not eligible for the program coordinated services team initiative, if the coordinating committee determines that this service or resource can be provided without interfering with the primary purpose of the program coordinated services team initiative. **SECTION 32.** 46.56 (6) (c) of the statutes is amended to read: 46.56 (6) (c) The interdisciplinary coordinated services team shall have the functions specified under sub. (8) (f) and (h). **SECTION 33.** 46.56 (6) (cr) of the statutes is created to read: 46.56 (6) (cr) Every county and tribe that operates a coordinated services team initiative shall develop written policies and procedures specifying the selection process for the project coordinator. The primary responsibility of the project coordinator shall be to promote collaborative relationships in the service system. **SECTION 34.** 46.56 (6) (d) and (e) of the statutes are created to read: 46.56 (6) (d) The project coordinator shall ensure the following functions are performed: 1. Bring together parents and relevant staff from various agencies and organizations to comprise the coordinating committee under sub. (3) (a) and (b), and support their activities, ensuring compliance with established policies and procedures specified in sub. (3) (d). 2. Work with the coordinating committee to maintain and support agency participation as established in the interagency agreement. 3. Work with the coordinating committee and service coordination agency to receive

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screening.

4. Work with the coordinating committee and service coordination agency to assure provision of service coordination services for all groups of people working with the child and the child's family. 5. Guide the development of groups of people working with the child and the child's family to ensure compliance with basic principles of the coordinated services team initiative core values. 6. Review plans of care, including crisis response plans, for consistency with coordinated services team process and core values. 7. Assist the coordinating committee and family teams in establishing consistent measures for the development, implementation, evaluation, and monitoring of the initiative and its outcomes. 8. Facilitate public education and awareness of issues and programming for families and children. 9. Ensure provision of ongoing support and training related to the coordinated services team process to families and providers, including orientation for coordinated services team members. Support service providers in developing strategies to enhance existing 10. programming, increasing resources, and establishing new resources relevant to project goals and objectives. 11. Ensure that local and state agencies submit data and reports in an accurate and timely manner. (e) The project coordinator may perform additional duties that include the following:

1. Maintain data of enrollments in the coordinated services team and results of

2. Establish and report monitoring and evaluation results.

- 3. Monitor, or ensure proper monitoring by the appropriate entity of, targeted case management and Medicaid in–home activities, including record–keeping and billing processes.
 - 4. Assist in developing and maintaining additional funding sources, including collaborative efforts with system partners.
 - 5. Assist in the development and implementation of family advocacy services.
 - **SECTION 35.** 46.56 (7) of the statutes is amended to read:
 - 46.56 (7) ELIGIBILITY OF CHILDREN AND FAMILIES. Children with severe disabilities, involved with multiple systems of care, or both, and their families shall be eligible for the program coordinated services team 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 team initiative. 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 other resources, or who would be able to return to community placement or their homes from an institutional placement if such services and other resources were provided.

(c) Not exclude a child with severe disabilities or that child's family from services or other resources because of lack of ability to pay.

SECTION 36. 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 coordinated services team initiative may come from any county departments, tribal agencies, 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, tribal courts, 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 group requirements 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 entity that made the referral under sub. (8) (a), and the parent or parents, in gathering necessary information from the child's family and any current service providers to prepare an application for the program coordinated services team initiative.
- (c) Consent for release of information and participation of a child with severe disabilities and his or her family in the program coordinated services team initiative and in the program coordinated services team initiative evaluation must be obtained from the child's parent, or the child, if appropriate or required by law, 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 <u>with severe disabilities</u> and the child's family are appropriate for <u>services through the program enrollment in the coordinated services team initiative</u>. The <u>service agency individuals designated by the coordinating committee or service coordination agency</u> shall approve or disapprove each application within 30 days after the date on which the application was <u>received completed</u>.

- (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 coordinated services team initiative is not the best way to meet the needs of the child and the child's family, staff from the identified by the coordinating committee or service coordination agency shall assist them in obtaining identifying and accessing needed services or resources from appropriate providers.
- (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 strengths and needs of the child with severe disabilities and the child's family's need for treatment, education, care, and support. The service coordinator shall coordinate the operations of the coordinated services team.
- (g) The service coordinator shall assemble the results of all prior relevant assessments and evaluations documenting the <u>service strengths and</u> needs of the child <u>with severe</u> disabilities and the child's family, including <u>individualized education program team</u> 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, family–centered 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 services <u>and supports</u> 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 and other resources. Emphasis shall be placed on resources available through community and <u>informal supports</u>.
- 4. Criteria for measuring the effectiveness and appropriateness of the integrated service plan coordinated services plan of care so that it can be modified as needed to better meet the child's and the child's family's needs. Plans shall be oriented to meaningful outcomes and for services to be provided into the least restrictive setting possible.
- 5. Identification of any administrative or judicial procedures under ch. 48, 51, 55, 115, 118, or 938 that may be necessary in order to fully implement the integrated service plan

coordinated services plan of care and the identity of the individual or organization that will be responsible for initiating those procedures, if any are required.

- 6. Identification of available sources of funding to support the services <u>and other</u> <u>resources</u> needed for the child <u>with severe disabilities</u> and his or her family and an allocation of funding responsibility among organizations where more than one organization is responsible for the child's and the child's family's treatment, education and support services.
 - **SECTION 37.** 46.56 (8) (h) 7. and 8. of the statutes are created to read:

- 46.56 (8) (h) 7. Clear statements articulating the specific needs of the child and family to be addressed. Needs may not be stated solely in terms of the need for services but may be stated in a strength-based manner with a response that is readily achievable.
- 8. Plans for responding to possible crisis situations that may occur with the child and the child's family.
 - **SECTION 38.** 46.56 (8) (i) to (k) of the statutes are amended to read:
- 46.56 (8) (i) If additional evaluations are needed, the service coordination agency coordinated services team shall arrange for them or assist the child's family in obtaining them.
- (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

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coordination agency and the service providers individuals and organizations designated to provide services and other resources under the integrated service plan coordinated services plan of care. **SECTION 39.** 46.56 (8) (L) of the statutes is repealed. **SECTION 40.** 46.56 (8) (m) to (o) of the statutes are renumbered 46.56 (8) (L) to (n) and amended to read: 46.56 (8) (L) Each organization or service provider designated to provide services and other resources under the integrated service coordinated services plan of care shall identify a specific staff person who shall serve as the ongoing member of a treatment team contact person to ensure continuity and communication while services are being provided to the child with severe disabilities and his or her family under the integrated service coordinated services plan of care. The service coordinator shall coordinate the operations of the treatment team. (m) 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. (n) Services and other resources under this section shall be provided in the community in the least restrictive and least intrusive setting, and preferably in the child's home or home community, and manner which meets the best interests of the child with severe disabilities. **SECTION 41.** 46.56 (8) (p) and (q) of the statutes are repealed. **SECTION 42.** 46.56 (8) (r) and (s) of the statutes are renumbered 46.56 (8) (o) and (p) and amended to read: 46.56 (8) (o) 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 and 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.

(p) Services under the integrated service plan may be terminated The team process may be ended 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 that by the family's refusal to participate in the process; if the child with severe disabilities and child's family no longer meet the eligibility criteria for the program coordinated services team; or by court order, if services are being provided under court order.

SECTION 43. 46.56 (9) of the statutes is amended to read:

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

SECTION 44. 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.

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(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 45. 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 service system of coordinated care for children with severe disabilities and their families, the department shall establish a statewide state advisory committee with representatives of county departments and tribal governing bodies, the department of public instruction, educational agencies, the department of corrections, the juvenile 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, a representative of the local workforce development board established under 29 USC 2832, a representative of the philanthropy community, 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 coordinated services team initiatives throughout the state and support communication and

1 mutual assistance among operating programs coordinated services team initiatives as well as 2 those that are being developed. 3 (b) (intro.) The department shall provide, either directly or through purchase of services, the following support services to the counties and tribes that elect to participate in 4 5 the program coordinated services team initiative: 6 1. Consultation in the areas of developing and maintaining individual integrated service 7 plans initiatives, and finding appropriate resources, and establishing and maintaining local 8 programs. 9 3. Assessment resources for cases where no local evaluation resource is available or 10 sufficient to enable development of an effective integrated service plan coordinated services 11 plan of care. These may be provided directly through state—operated programs or by referral 12 to private service providers. 13 (c) (intro.) The department shall evaluate the programs coordinated services team 14 initiatives funded under this section. All organizations participating in the program 15 coordinated services team initiative shall cooperate with the evaluation. The evaluation shall 16 include information about all of the following: 17 1. The number of days that children with severe disabilities served in the programs 18 participating in the coordinated services team initiative spent in out-of-home placement 19 compared to other children with severe disabilities in the target group and the costs associated 20 with these placements. 21 **SECTION 46.** 46.56 (14) (c) 2. of the statutes is repealed and recreated to read: 22 46.56 (14) (c) 2. A systems change and sustainability plan.

SECTION 47. 46.56 (14) (c) 3. and 4. of the statutes are amended to read:

1 46.56 (14) (c) 3. A comparison between any changes in problem behaviors of 2 participants before and after participation in the program coordinated services team initiative. 3 4. A comparison between school attendance and performance of participants before and 4 after participation in the program coordinated services team initiative. 5 **SECTION 48.** 46.56 (14) (c) 6. and 7. of the statutes are amended to read: 6 46.56 (14) (c) 6. Parent and child satisfaction with the program coordinated services 7 team initiative. 8 7. Types of services provided to children with severe disabilities and their families in 9 the program through the integrated service plan coordinated services team initiative and the 10 cost of these services. 11 **SECTION 49.** 46.56 (14) (c) 8. of the statutes is repealed. 12 **SECTION 50.** 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 coordinated services team initiative in a particular county or tribe under sub. (15), the 15 department may permit the county to serve any individual who has severe disabilities and who 16 has not attained 22 years of age if the individual's mental, physical, sensory, behavioral, 17 emotional or developmental disabilities or whose combination of multiple disabilities meets 18 the requirements specified in sub. (1) (c) 1. to 4. 19 **SECTION 51.** 46.56 (15) (a) and (b) (intro.) of the statutes are amended to read: 20 46.56 (15) (a) From the appropriation appropriations under s. 20.435 (7) (co) and (cs), 21 the department shall make available funds to implement programs. The funds may be used 22 to pay for the intake, assessment, case planning and service coordination provided under sub. 23 (8) and for expanding the capacity of the county to provide community-based care and

1 treatment for children with severe disabilities coordinated services team initiatives under this 2 section. 3 (b) (intro.) In order to apply for funds under this section the county board of supervisors 4 or tribe shall do all of the following: 5 **SECTION 52.** 46.56 (15) (b) 1r. of the statutes is created to read: 6 46.56 (15) (b) 1r. Demonstrate that the process is followed, and principles and core 7 values, as outlined by the advisory committee established by the department, are adhered to. 8 **SECTION 53.** 46.56 (15) (b) 2. to 4. of the statutes are amended to read: 9 46.56 (15) (b) 2. Establish children with severe emotional disturbances to be the priority 10 target group served by the program coordinated services team initiative. 11 3. Submit a plan to the department for implementation of the integrated service program 12 coordinated services team initiative in accordance with the requirements of this section. 13 4. Submit a description of the existing services <u>and other resources</u> in the county <u>or tribe</u> 14 for children with severe disabilities, an assessment of any gaps in services, and a plan for using 15 the funds under this program coordinated services team initiative or from other funding 16 sources to develop or expand any needed community-based services such as in-home 17 treatment, treatment foster care, day treatment, respite care or crisis services the coordinated 18 services team initiative. 19 **SECTION 54.** 46.56 (15) (b) 5. of the statutes is created to read: 20 46.56 (**15**) (b) 5. Comply with this section. 21 **SECTION 55.** 46.56 (15) (c) and (d) of the statutes are amended to read: 22 46.56 (15) (c) In order to obtain funds under this section, matching funds equal to 20% 23 of the requested funding shall be provided by the participating county departments and school 24 districts agencies and organizations. All of the participating county departments and school

1 districts agencies and organizations shall participate in providing the match, which may be 2 cash or in-kind. The department shall determine what may be used as in-kind match. 3 (d) In order to apply for funding, at least one school district, cooperative educational 4 service agency or county children with disabilities education board serving children with 5 severe disabilities in the county must participate in the program there shall be a coordinating 6 committee that meets the requirements under sub. (3) (a) and (b), that will carry out the 7 responsibilities under sub. (3) (d). 8 **SECTION 56.** 46.56 (15) (e) of the statutes is repealed. 9 **SECTION 57.** 48.345 (6m) of the statutes is amended to read: 10 48.345 (6m) If the report prepared under s. 48.33 (1) recommends that the child is in 11 need of an integrated service a coordinated services plan of care and if an integrated service 12 program a coordinated services team initiative under s. 46.56 has been established in the 13 county, the judge may order that an integrated service coordinated services plan of care be 14 developed and implemented. 15 **SECTION 58.** 59.53 (7) of the statutes is repealed and recreated to read: 16 59.53 (7) COORDINATED SERVICES TEAMS. The board may establish a coordinated 17 services team initiative under s. 46.56. 18 **SECTION 59.** 938.34 (6m) of the statutes is amended to read: 19 938.34 (6m) INTEGRATED SERVICE COORDINATED SERVICES PLAN. If the report prepared 20 under s. 938.33 (1) recommends that the juvenile is in need of an integrated service a 21 <u>coordinated services</u> plan <u>of care</u> and if an integrated service program <u>a coordinated services</u> 22 team initiative under s. 46.56 has been established in the county, order that an integrated

service a coordinated services plan of care be developed and implemented.

24 (END)