

Washington County Family & Children First Council
Service Coordination Mechanism
Approved August 2019

OVERVIEW

Ohio Revised Code (ORC) Section 121.37 states, “The purpose of the county council is to streamline and coordinate existing government services for families seeking services for their children.” ORC requires each county to develop a county service coordination mechanism which serves as the guiding document for coordination of services in the county. Those involved in developing and approving the Washington County Service Coordination Mechanism (SCM) include the Washington County Family & Children First Council (FCFC) (including parents, Children Services, Job and Family Services, Juvenile Court, City and County Health Departments, EI Collaborative Representative, Development Disabilities, Education, Behavioral Health Board; behavioral health provider; domestic violence provider); the Community Options Team (COT) and Council staff. Implementation of the SCM becomes effective upon approval from Ohio Family and Children First (OFCF).

Washington County utilizes the evidence-based Hi-Fidelity Wraparound model in its service coordination process. The purpose of Service Coordination (SC) and High-Fidelity Wraparound (Hi-Fi WA) through the county FCFC is to provide a neutral venue for families requiring services where their needs may not have been adequately addressed in traditional agency systems. These processes serve as a safety net for children needing a more intensive collaboration of multi-system providers.

Service Coordination (SC) is a broad-based, neutrally-positioned, youth and family-driven, cross-system (team) planning process by which previously identified and existing resources and supports are coordinated to determine the least restrictive plan of success for youth with complex needs. **High-Fidelity Wraparound (Hi-Fi WA)** is a specific evidence-based intensive planning and facilitation process utilizing a comprehensive team to develop a uniquely designed helping plan based on the youth and family’s unmet needs, and is inclusive of uniquely-designed resources linked to youth and family strengths.

A System of Care (SOC) is a coordinated network of community-based services and supports that are organized to meet the challenges of children and youth with multiple needs and their families. SC and Hi-Fi WA are collaborative, coordinated, cross-system team-based planning processes implemented to address the needs of youth and families where those needs are multiple and complex. These processes account for: a broad array of services/supports available; individualized plan; least restrictive setting; coordinated at both system and service level; family-driven, youth guided; emphasis on early identification and early intervention.

Additional values and guidelines used in the SC and Hi-Fi WA process include:

- ✓ Family-focused and strength-based
- ✓ Responsive to the culture, race, and ethnicity of the family
- ✓ Families and youth fully involved in decision-making
- ✓ Teams composed of family, community, care provider representatives, family advocates and those who know the family best
- ✓ Commitment to community based care
- ✓ Fosters a blame free environment and ability to ‘hear’ family needs
- ✓ Service outcomes are evaluated
- ✓ Available funding resources are fully utilized or integrated
- ✓ Specialized and evidence-based treatment services are encouraged
- ✓ Duplicative efforts are reduced or eliminated
- ✓ Embodies the community’s commitment to unconditional care

POLICIES

Any agency, entity, school, juvenile court, person or family may refer a child/youth to Washington County Family & Children First (FCFC) for service coordination. A *Referral Packet* must be completed in its entirety and returned to Washington County Family & Children First.

Criteria for referral and target population:

1. Child/youth must be a resident of Washington County and under the age of 22.
2. Families (parent/guardians) and referring entity must be willing to accept and actively participate in the Service Coordination or Wraparound Planning process.
3. Child/youth must have multi-systemic needs (i.e. child is not necessarily involved in two or more systems, but child's needs involve more than one system. Schools are considered a system).

The following specific targeted populations are also eligible for SC/WA services:

4. Youth in the Juvenile Justice System
5. Youth in custody of Child Protective Services

Collaborative Services are those services specified on an **Individualized Comprehensive Family Service Coordination Plan** (Family Plan) representing a unified service delivery system for a child and family. Collaborative services planning includes the monitoring of each service provider to assure that services are implemented as stated in the plan and that outcomes of the services are recorded and reported to the Council. In all cases, the reporting mechanisms shall ensure the confidentiality of each individual child and family.

LEVELS OF COORDINATION (*Note: a family is not considered "enrolled" in Service Coordination or High-Fidelity Wraparound until a Family Plan is completed.)

All referrals for Service Coordination or Wraparound services must be submitted to the FCF office on the appropriate **Referral to Family & Children First** packet. Upon receipt of a referral packet, it shall be reviewed by the FCF Director and FCF Service Coordinator/ Wraparound Facilitator (SC/WF) and shared with the Community Options Team. Through the below processes, a level of service determination will be made.

Level 1 – Information and Referral

Families of children/youth, who are seeking specific services but are having a difficult time accessing agencies or services, may be referred to the FCF SC/WF who will assist the family in coordination by referring and connecting to existing services, community resources, or supports. These less intrusive or intensive options will be pursued before rising to a higher level. The SC/WF will present the referral to the Community Options Team at their next regularly scheduled meeting to determine if there are any other available assistance/resources from the community partners at the table, and share the information with the family if appropriate. The referral will then be exited.

Level 2 – Assessment – Non-Enrollment

Families of children/youth who may have needs in more than one system can seek assistance from the FCF Service Coordinator/WA Facilitator. Once a referral is received, the FCF SC/WF shall contact the referring entity to gather more information and reason for the referral. The FCF SC/WF will then contact the family and schedule a meeting to assess and determine the level of

need, utilizing the Child and Adolescent Needs and Strengths (CANS) Assessment Tool. This tool may be used to categorize a youth/family's level of need based on measuring a variety of life domains and to identify priority planning areas of needs that can be used in the development of the *Individualized Comprehensive Family Service Coordination Plan* (Family Plan). The referral and assessment tool data shall be shared with the Community Options Team (COT), who will provide input into the level of care, as well as offer potential additional resources and services from individual organizations. If COT, the SC/WF, and the assessment tool concur that the family can be assisted with standard services, it shall be referred back to the referring entity for assistance to the family, and/or the SC/WF shall assist in identifying existing services, community resources, and supports. These less intensive or intrusive options, which may be more appropriate, shall be explored with the family. The referral will then be exited within three (3) months once all information is shared with the family.

Level 3- Assessment and Enrollment in Service Coordination

Families of children/youth whose needs are multi-systemic, although they may not yet be involved in more than one agency, and the needs of the family cannot be met through already existing collaborative efforts, may seek enrollment in the Service Coordination process. After an initial meeting with the child/youth and family, the FCF SC/WF shall complete an assessment utilizing the CANS tool, to determine the level of need/care. The referral and result of the CANS will be shared with the Community Options Team. If a need is determined through the assessment process and COT review, the FCF SC/WF shall enroll the child/youth in FCF Service Coordination and begin the process of team and Plan development. The assessment tool should be conducted every 90 days or more often as needed. Once a Family Team is in place and a Family Plan is developed, the initial Plan will be shared with the Community Options Team for further input and monitoring. The functions that will occur in Service Coordination include: coordinate previously identified and exiting resources and supports; systems-level problem solving; safety monitoring/ planning function; placement monitoring function; manage risk and complex decisions; neutrally positioned facilitation and planning process. Families in the SCM at Level 3 may access direct-service funds, if available, to meet needs identified on their Family Plan.

Level 4 – Assessment and Enrollment in High-Fidelity Wraparound

Children and youth that are at a very high risk of experiencing poor outcomes and/or potential out of home placement may be enrolled in High-Fidelity Wraparound (Hi-Fi WA). The Hi-Fi WA planning process identifies a unique set of natural supports that are designed to sustain and assist the youth and a family after the expiration of formal resources and supports. Once the referral is received by FCF, the FCF SC/WF will contact the parent and referring entity; arrange for a meeting with the family; and complete the CANS assessment tool to determine the level of care/need. COT will then review the results of the CANS and provide input. Once it is determined that the child/youth meets the level of care for Wraparound Services, the SC/WF will begin the process of Team and Plan development. The assessment tool should be conducted every 90 days or more often as needed. Once a Family Plan is developed, the initial Plan will be shared with the Community Options Team for further input and monitoring. Distinct phases of the Wraparound process will occur that include: engagement and team preparation; initial plan development; implementation of plan; and transition. Families in the SCM at Level 4 may access direct-service funds, if available, to meet needs identified on their Family Plan.

Level 5 – Out-of-Home Placement for a youth involved in Family & Children First Service Coordination or Wraparound

For children/youth already in the FCF Service Coordination Mechanism, a Family Team meeting must be conducted *before* a non-emergency out-of-home placement for all children. This process assures that alternatives have been exhausted. If the Family Team has identified that there is a potential for out-of-home placement, the FCF SC/WF shall call a meeting of the Community Options Team to assess placement and funding options. The parent is required to attend this meeting along with the SC/WF and a parent advocate, if applicable. Placement must be approved by the *Family Team* and documented on the Family Plan. Nothing in this document shall be interpreted as overriding or affecting decisions of a juvenile court regarding an out-of-home placement. If it is determined that placement is imminent, the Community Options Team shall make recommendations to the Pooled Funds Group for placement and funding approval utilizing pooled funds. The SC/WF will continue to monitor and track progress for children in out-of-home placements to assure continued progress, appropriateness of placement, and continuity of care after discharge from placement with appropriate arrangements for housing, treatment, and education. The Team can also begin planning for community supports for the family during placement and re-entry of the youth.

If an emergency placement of a child/youth in Service Coordination occurs, the Family Team must meet within ten days of the placement. The above procedures would then be followed.

TIMELINES:

- ➔ *Within one (1) week of referral:* The SC/WF makes initial contact with the referred family.
- ➔ *Within three (3) weeks of referral:* The SC/WF completes an initial face-to-face meeting with referred family.
- ➔ *Within six (6) weeks of referral:* The SC/WF completes the CANS Assessment tool; facilitates an initial Team Meeting; and the Family Plan is drafted.
- ➔ *Within one (1) week of initial Team Meeting:* The SC/WF distributes the Family Plan to all Team members.
- ➔ *Ongoing:* Team meetings are held at least bi-monthly or as requested by a Team Member. Minutes from Family Team meetings are distributed to all team members within one (1) week of meetings.

If any timelines identified in this document are not met, documentation must identify reason for a delay.

PROCEDURES:

The SC/WF shall meet with the child and family to gather, review and complete the following:

- a. Family history and timelines*
- b. Consent for Release of Information (Attachment A)*
- c. Dispute Resolution Process (Attachment B)*
- d. Identify Potential Family Team Meeting Participants*
- e. Complete the CANS Assessment Tool*

Each family in the SCM process shall be given information regarding “Service Coordination” and/or “Wraparound” upon entry into the system. The SC/WF shall explain the required component of parent involvement in the process. All families in the SCM shall be offered and encouraged to access the services of a Parent Advocate who shall become an active team member. The SC/WF will assist the family in identifying a parent advocate and appropriate

community, agency, school district reps, family members, support persons and/or advocates to serve on a *Family Service Coordination Plan Team* (Family Team). While families will be encouraged to have participants from all appropriate agencies and the child's school district, as well as family support persons, both formal and informal, it is ultimately up to the family who is on their Family Team.

Once the Team is identified, the SC/WF will contact those potential members to seek their participation on the Family Team. Upon establishment of the Family Team, the SC/WF will assure that all Family Team members are notified at least ten (10) days in advance of the initial Family Team meeting and subsequent meetings. Notification can occur through phone, email, text or mail.

The SC/WF will schedule and facilitate the initial Family Service Coordination Plan Team Meeting. At each Family Team meeting, team members will sign the *Team Signature / Confidentiality Page (Attachment C)*. The confidentiality of all personal family information disclosed during Team Meetings or contained in the Family Plan shall be assured by those assisting in the Plan and the mechanism. Information gathered on family/child strengths shall be shared; ground rules identified; and family goals identified. The CANS Assessment Tool is utilized as a method to identify strengths and needs which are incorporated into the Family Plan and includes all appropriate services and supports. The Family Team will develop the initial *Individualized Comprehensive Family Service Coordination Plan* (Family Plan). The Family Plan identifies the responsibilities of all involved parties. Resources and steps to achieve goals will be identified and written in the Family Plan, which shows who will do what and when they will do it, in order for families to accomplish goals.

As approved by the family, the trained FCF SC/WF will track the progress of the Family Plan, schedule reviews and facilitate the meeting process. The plan ensures that assistance and services to be provided are responsive to the strengths and needs of the family, with special attention given to issues related to racial/ethnic/cultural identify and to gender. Families are encouraged to offer information and suggestions and participate in decisions. The Family Plan promotes early intervention to prevent unnecessary out-of-placements while keeping children and communities safe, and promotes least restrictive environments. Each Family Plan identifies a timeline for completion of goals written into the plan. These goals are reviewed at each Team Meeting. The Family Plan will also identify a plan for dealing with short-term crisis situations and safety concerns. The crisis plan will detail options for preventing a known crisis, as well as responses to a crisis by those supporting the youth and family, and is developed based on family need and preference. By having a safety plan in place in advance of a crisis, it assures that members will not overreact, if the need arises to implement the plans. Where applicable, the Family Plan includes a process for dealing with a child who is alleged to be an unruly child and stipulates the methods to divert the child from the juvenile court system. The Family Plan will include a plan of care for an alleged unruly child that may include: emphasis on personal responsibilities; involvement of law enforcement; methods to divert from the juvenile court system; respite; mentoring; parent education; alternative school.

The location of Family Team meetings shall be identified with the approval and preference of the family, when possible. The SC/WF assures that all required reporting information is input into an electronic health record data collection system. The SC/WF maintains Team Rosters and case files, as well as scribes minutes and disperses to all Team members within one (1) week of meetings. A *Team Leader* shall be identified by the team and approved by the family. The SC/WF may serve as the Team Leader, or an identified Team Leader may assist the SC/WF in all

aspects of planning, scribing and documentation, as well as facilitation and shall be responsible for monitoring the plan with the SC/WF. Team Leaders assure that meetings stay focused and on time. If funding needs are identified on the Family Plan, the SC/WF must present the funding request to the Community Options Team for a vote of approval or denial.

GUIDING PRINCIPLES

- a. Family Team meetings shall be held at safe and neutral locations.
- b. Family Team meetings do not take the place of nor should they be held in conjunction with other required meetings of agencies/schools (example: IEP meetings).
- c. Children/youth in the Service Coordination Mechanism should be in the process no longer than 18 months, with a goal of all children exiting the process by one year.
- d. While other agency-specific plans may be developed, the *Individualized Comprehensive Family Service Coordination Plan* shall be the guiding document for family-centered, family-driven goals and services.
- e. All processes are responsive to the culture, race, and ethnicity of the family.
- f. Person-centered care planning efforts for transition-aged youth are implemented to reduce reliance on formal systems.
- g. Washington County commits to utilizing the High-Fidelity Wraparound Model in its Service Coordination Mechanism process. Wraparound is a ‘process’ used to deliver service coordination.
- h. Per guidance of Washington County Juvenile Court, when a youth who is receiving Service Coordination/Wraparound is placed in the Washington County Juvenile Center, the case will be placed ‘on hold’. No services will be offered through the Service Coordination Mechanism or Community Options Team. The Juvenile Court COT representative will notify the FCF Service Coordinator/Wraparound Facilitator when the youth is exiting placement so that they can re-enter Service Coordination if desired.

SERVICE COORDINATION MECHANISM TEAM COMPONENTS

Individualized Comprehensive Family Service Coordination Plan Team (Family Team)

The Family Team shall:

- Meet at least bi-monthly; however, a team member or parent may call a team meeting at any time by notifying the SC/WF.
- Develop, monitor and track the Family Plan for progress and outcomes in order to assure continued progress.
- Identify wraparound services, associated costs, and providers to meet goals identified on the Family Plan.
- Close a case when appropriate and agreed upon by all team members. Service Coordination or Wraparound cases may be closed for the following reasons:
 - Lack of participation / engagement by family
 - Family requests services to terminate
 - Goals on plan are achieved
 - Youth ages out of system

Community Options Team (COT)

The Community Options Team shall meet twice monthly to:

- Review initial referrals and CANS assessment tools and provide input
- Review initial Service Coordination and Wraparound Plans developed by Family Teams

- Approve and/or recommend funding requests for wraparound/direct services identified on Plans
- Monitor the planning process to ensure fidelity to the SCM and/or Wraparound model
- Offer additional resources and recommendations to Family Teams that they may not be aware of or have access to
- Review data and outcome collection
- Address individual systems issues
- Serve as the ‘gatekeeper’ of information within each system
- Monitor referrals from their respective systems before referral is submitted to FCF
- Review and/or revise the FCF Service Coordination Mechanism on a bi-annual basis
- Review placement options for out-of-home placements
- Review and recommend requests for pooled funding for out-of-home placement, assuring that all funding sources have been identified and tapped

Membership on the Community Options Team includes, at a minimum:

1. Supervisory Representatives from: Washington County Department of Job & Family Services/Child Protective Service; Washington County Juvenile Court; Washington County Board of Developmental Disabilities; Washington County Behavioral Health Board
2. Representative(s) of a local behavioral health provider
3. Representative from Education
4. Parent Representative
5. FCF Council Director
6. FCF Service Coordinator/Wraparound Facilitator
7. Others as identified (i.e. law enforcement; faith-based, domestic violence shelter rep; community rep)

The FCF Council Director shall serve as the Chair of the Community Options Team. ~~Approvals~~ of Funding request approvals shall be made by a majority of members present at a COT meeting, with final funding approval by the FCF Director. If Pooled Funds are being utilized, final approval must be provided by the Pooled Funds Group per the Pooled Funds Agreement policy. In emergency or time-sensitive situations, approval may be gained by email from a majority of COT members. All members of COT shall sign a statement of confidentiality assuring the confidentiality of family information.

The Pooled Funds Group (PFG) of Washington County Family & Children First is comprised of:

- The Social Services Administrator of Washington County Department of Job & Family Services and/or the WCDJFS Director
- The Executive Director of the Behavioral Health Board.
- The Superintendent of the Board of Developmental Disabilities
- The Juvenile Court Judge

Each of these agencies may contribute dollars to be used jointly to provide funds for special services, including: out-of-home parental placement costs; wraparound services to children in the SCM; and for administrative costs of Council. The Pooled Funds Group is responsible for establishing a ceiling on total benefits to be provided by the pooled funds and for funding approvals dictated by caps in the Pooled Funds Agreement. The committee also explores options for additional funding, and identifies and addresses gaps in services to meet the needs of Washington County families and children.

FISCAL STRATEGIES

Washington County utilizes various fiscal strategies in order to carry out the mandate of Service Coordination:

Family Centered Service and Support (FCSS) - FCSS dollars are utilized specifically for the provision of Service Coordination/Wraparound, since there are no other sources of funds to support the Service Coordinator/Wraparound Facilitator position.

Pooled Funds – The County maintains a ‘pool’ of funds from Juvenile Court, DJFS/Children Protective Services, Board of Developmental Disabilities, and Behavioral Health Board that are available to assist in out-of-home parental placement costs, as well as wraparound services to children/youth in Service Coordination/Wraparound

OFCC Flexible Funding Pool – Agencies may utilize this mechanism to provide funding for the local ‘pool’.

County Commissioners – The County Commissioners may contribute funding to support out-of-home parental placements.

Community Partners – At various times, additional community partners may contribute funding to assist with placement costs and/or wraparound services.

Ohio Early Intervention Service Coordination Grant – Funding received from the Ohio Department of Developmental Disabilities Early Intervention Service Coordination grant supports early intervention service coordination.

QUALITY ASSURANCE and MONITORING

Washington County utilizes an electronic health record data collection system for monitoring, tracking and accountability purposes. Washington County’s Service Coordination Mechanism (SCM) is overseen by the FCF Council’s Community Options Team (COT). This committee meets twice monthly to review processes, funding, Family Plans, etc. Biannually COT will review the SCM to assure that protocols and policies are being followed and recommend any revisions as necessary. The FCF Director oversees the daily implementation of service coordination and reviews plans, data, referrals and implementation processes. The FCF Council reviews the SCM and receives updates at Council meetings. At the completion of each initial and review of the Family Plan, the SC/WF will distribute a Post Meeting Survey (wraparound fidelity measure) to the Family Team for completion for the purposes of quality assurance and monitoring. The surveys are compiled and tabulated by the SC/WF and a summary shared with the Family Team and the Community Options Team. If surveys indicate an immediate concern, the SC/WF will address the concerns at the next Family Team meeting and document. Annual survey results will be shared with the FCF Council. Once a case is closed, the SC/WF will send a Transition Survey (family satisfaction and empowerment measure) form to the family to provide feedback on services received and a case closure form will be completed in-house that will identify the amount of funds expensed during the tenure of the case. Transition Surveys are compiled and tabulated by the SC/WF and results shared with the Community Options Team and FCF Council. The FCF Director bi-annually conducts a Satisfaction Survey with Team members, including families, who have participated in Family Teams. Survey data is shared with COT, the FCF Council, and the SC/WF to assist in identification of areas of weakness or concern and to celebrate achievements. A caseload report is maintained and shared with the Director and COT at each meeting. This report identifies information on each child/youth including: diagnoses, referral entities, referral dates, meeting dates, status of case, birthdate, CANS completion date, case closure dates, and notes. The Pooled Funds Group meets quarterly to review, assess and approve parental placements and funding expenditures of Pooled Funds (per the Pooled Funds Agreement) and to address gaps in funding or services. All information gathered through the

above processes shall be utilized to annually evaluate and prioritize services, fill service gaps and invent new approaches to achieve better results for families and children.

DISPUTE RESOLUTION PROCESS

The Dispute Resolution Process shall be shared with and explained to each family in Service Coordination / Wraparound prior to development of the Family Plan. Children and families shall continue to receive necessary services while any disputes are being resolved. *See Attachment B.*

PUBLIC AWARENESS / OUTREACH

Washington County Family & Children First Council communicates with local child serving agency staff, juvenile court, school districts, community coalitions and others to explain and identify the services provided through the Service Coordination Mechanism. Staff is available to present the Service Coordination Mechanism to county partners and staff. Information and education on the SCM is also shared at various venues such as fairs, and to other community organizations such as the Community Health Council, Prevention Committee, Prevention Connection Group; domestic violence shelter, Head Start, The Right Path, etc. The completed and approved Washington County Family & Children First Service Coordination Mechanism and referral packets shall be dispersed to all Council members and the Community Options Team. A SCM brochure is distributed to schools and throughout the county, along with referral packets for accessing the referral process. Parent representatives on Council shall be encouraged to share their knowledge of the Service Coordination Mechanism with other parents. Referral packets, information, and the county's Service Coordination Mechanism can be accessed on the Washington County Family & Children First website at www.wcfcfc.org.

EARLY INTERVENTION SERVICE COORDINATION

Per the Grant Agreement with the Ohio Department of Developmental Disabilities (DODD), Washington County Family & Children First (FCF) is the provider of Early Intervention Service Coordination in Washington County and is responsible for oversight and administration of **Early Intervention (EI)** Service Coordination.

1. If a child under the age of three is referred to FCF due to a suspected delay, disability or medical diagnosis with a high probability of developing a delay, the referral is forwarded to the statewide Central Intake and Referral System for Help Me Grow Early Intervention. Washington County Help Me Grow Early Intervention (EI) abides by the laws and rules set forth by Part C of the federal Individuals with Disabilities Education Act (IDEA) and DODD rule. The EI Service Coordinator serves as the lead provider.
2. If a family has been referred to EI, but does not meet EI eligibility, the EI Service Coordinator will assist the family in identifying other appropriate resources in the community. This may include a referral to the FCF Service Coordination Mechanism.
3. If a family has been receiving EI services, but no longer has a need for EI services, the EI Service Coordinator may refer the family to FCF Service Coordination/ Wraparound, if appropriate.
4. If a child under the age of 3 is referred to FCF Service Coordination/ Wraparound, and there is no concern for development, the Family & Children First Service Coordinator/ Wraparound Facilitator (FCF SC/WF) shall follow the normal process for referral into FCF Service Coordination. However, if during the course of assessing the referral, a developmental concern is noted, the FCF SC/WF shall refer the child to Help Me Grow EI.

5. If an infant or toddler is being served in EI Service Coordination, but has additional needs in more than one system, outside of the delay or disability, the EI SC may refer that family to the FCF SC process for further assistance.
6. Families can access both service coordination models, however, when a family is eligible for EI, the EI Service Coordinator must be the lead provider and the FCF SC Team should support and assist with the family's EI Individualized Family Service Plan (IFSP) as needed or requested.
7. When a family ages out of EI, the EI SC assists each family in the transition process in accordance with DODD rule and federal law. If a family transitions from Part C to Part B, the Interagency Transition Agreement, developed in collaboration with school districts, FCF, and the EI Team, guides the responsibilities of the EI SC, as well as the local education agency (i.e. school district). Additionally, the EI SC will assist families who do not qualify for Part B in their potential search for preschool programs and/or child care.

The FCF Director serves as the EI Contract Manager and Supervisor of the two (2) EI Service Coordinators. The Early Intervention Team, consisting of the FCF EI Service Coordinators and Washington County Board of Developmental Disabilities (WCBDD) Early Intervention staff, meet weekly at the FCF office to: assign Primary Service Providers (PSP); review cases, files and data; schedule meetings; develop programming, etc. Additional specialized team members are available for teaming on a regular basis and include: Early Childhood Mental Health Consultant and Regional Infant Hearing Consultant. Parents are also invited to attend the meetings. The FCF Director is available for participation in all meetings and provides information to the EI Team. The EI Team helps to identify gaps in services and funding and works closely with multiple in-and-out of county resources to assist families with infants and toddlers with delays and disabilities. If a funding need is identified, outside of EI services, a request may be submitted to the FCF Director for further consideration and potential funding opportunities. The DODD EI Service Coordination Agreement specifically funds the provision of 2 EI Service Coordinators. WCBDD provides EI staff (3 developmental specialists, physical therapist, and speech therapist) to support EI mandated services, and FCF contracts with WCBDD for the provision of Evaluations and Assessments. Outreach is made to community partners to seek expansion of services to support Early Intervention. The Early Childhood Committee comprised of 15 members from partner agencies (including early childhood programs and parent representatives), meets quarterly to review data, provide input, identify gaps, reduce duplication and collaborate around services to the birth to 3 population. The FCF Director/EI Contract Manager serves as the Chair of the Early Childhood Committee. The FCF Director also presents Early Intervention Service Coordination data, service gaps, and funding topics to the FCF Council. The FCF Council approves all EI funding agreements and contracts.

Early Intervention Service Coordination is an integral part of Washington County Family & Children First's services and imbedded in our service coordination model. Washington County offers a seamless system of services and continuum of care between Early Intervention Service Coordination and FCF Service Coordination/Wraparound due to the proximity of all staff employed under Family & Children First and housed in the same office. Ongoing in-house teaming occurs regularly around any child, youth or family being dually served, and assures continuity of services and a seamless transition between systems.