Section F. Special Populations

States may wish to refer to the October 1998 HCFA document entitled "Key Approaches To The Use of Managed Care Systems For Persons With Special Health Care Needs" as guidance for efforts to ensure access and availability of services for persons with special needs. To a certain extent, key elements of that guide have been incorporated into this waiver application form.

I. General Provisions for Special Populations

Previous Waiver Period

a._____ During the last waiver period, the program operated differently for special populations than described in the waiver governing that period. The differences were:

b. [Required for all elements of applicable sections checked in the previous waiver submittal] Please provide results from all monitoring efforts for each subpopulation noted in the previous waiver, including a summary of any analysis and corrective action taken, to determine the level of compliance with State requirements in the area of special populations for the previous waiver period [items F.I.a-g of the 1999 initial preprint; as applicable in 1995 preprint].

c. Please describe the transition plan for situations where an enrollee with special health care needs will be assigned to a new provider when the current provider is not included in the provider network under the waiver.

Upcoming Waiver Period -- For items a. through g. of this section, please identify any responses that reflect a change in program from the previous waiver submittal(s) by placing two asterisks (i.e., "**") after your response. Please check all items which apply to the State.

a.___ The State has a specific definition of "special populations" or "populations with special health care needs." The definition should include populations beyond those who are SSI or SSI-related, if appropriate, such as persons with serious and persistent mental illness, and should specify whether they include adults and/or children. Some examples include: Children with special needs due to physical and/ or mental illnesses, Older adults (over 65), Foster care children, Homeless individuals, Individuals with serious and persistent mental illness and/or substance abuse, Non-elderly adults who are disabled or chronically ill with developmental or physical disability, or other. Please describe.

b.___ There are special populations included in this waiver program. Please list the populations.

c.___ The State has developed and implemented processes to collaborate and coordinate with, on an ongoing basis, agencies which serve special needs clients, advocates for special needs populations, special needs beneficiaries and their families. If checked, please briefly describe.

d. The State has programs/services in place which coordinate and offer additional resources and processes to ensure coordination of care among:

1.___ Other systems of care (Please specify, e.g. Medicare, HRSA Title V grants, Ryan White CARE Act, SAMHSA Mental Health and Substance Abuse Block Grant Funds)
2.___ State/local funding sources
3.___ Other (please describe):

e.___ The State has in place a process for ongoing monitoring of its listed special populations by special needs subpopulation included in the waiver in the following areas:
1.___ Access to services (please describe):
2.___ Quality of Care (please describe):
3.___ Coordination of care (please describe):
4.___ Enrollee satisfaction (please describe):
5.___ Other (please describe):

f.___The State has standards or efforts under way regarding a location's physical Americans with Disabilities Act (ADA) access compliance for enrollees with physical disabilities. Please briefly describe these efforts, and how often compliance is monitored.

g.___ The State has specific performance measures and performance improvement projects for their populations with special health care needs. Please identify the measures and improvement projects by each population. Please list or attach the standard performance measures and performance improvement projects:

II. State Requirements for MCOs/PHPs

Previous Waiver Period

a.___ During the last waiver period, the program operated differently for special populations than described in the waiver governing that period. The differences were:

b. [Required for all elements checked in the previous waiver submittal] Please provide results from all monitoring efforts for each subpopulation noted in the previous waiver, including a summary of any analysis and corrective action taken, to determine the level of compliance with State requirements in the area of special populations for the previous waiver period [items F.II.a-h of the 1999 initial preprint;

as applicable in 1995 preprint].

Upcoming Waiver Period For items a. through h. of this section, please identify any responses that reflect a change in program from the previous waiver submittal(s) by placing two asterisks (i.e., "**") after your response. Please check all the items which apply to the State or MCO/PHP.

a._ The State has required care coordination/case management services the MCO/PHP shall provide for individuals with special health care needs. Please describe by population.

b.__ As part of its criteria for contracting with an MCO/PHP, the State assesses the MCO/PHP's skill and experience level in accommodating people with special needs. Please describe by population.

c._ The State requires MCOs/PHPs to either contract or create arrangements with providers who have traditionally served people with special needs, for example, Ryan White providers and agencies which provide care to homeless individuals. If checked, please describe by population.

d.___ The State has provisions in contracts with MCOs/PHPs which allow beneficiaries who utilize specialists frequently for their health care to be allowed to maintain these types of specialists as PCPs. If **not** checked, please explain by population.

e.___The State collects or requires MCOs/PHPs to collect population-specific data for special populations. Please describe by population.

f.___The State requires MCOs/PHPs that enroll people with special health care needs to provide special services, have unique medical necessity definitions and/or have unique service authorization policies and procedures.

1. Please note any services marked in the table in Section A.III.d.1 that are for special needs populations only by population.

2. Please note for Section C.II.b any unique definitions of "medically necessary services" for special needs populations by population.

3. Please note for Section C.II.d any unique written policies and procedures for service authorizations for special needs populations by population. For example, are MCOs required to coordinate referrals and authorizations of services with the State's Title V agency for any special needs children who qualify for Title V assistance.

g.___ The State requires MCOs/PHPs to identify individuals with complex or serious medical conditions in the following ways:
1.___ An initial and/or ongoing assessment of those conditions
2.___ The identification of medical procedures-to address and/or monitor the conditions.
3.__A treatment plan appropriate to those conditions that specifies an adequate number of direct access visits to specialists to accommodate implementation of the treatment plan.
4.___ Other (please describe):

h.__ The State specifies requirements of the MCO/PHPs for the special populations in the waiver that differ from those requirements described in previous sections and earlier in this section of the application. Please describe by population.

1.Addendum to Section F:

Review Criteria for Certain Children with Special Health Care Needs in Mandatory Capitated Managed Care Programs

December 2000

When addressing these criteria, States should ensure that each of the following are addressed, as appropriate: the State's responsibilities in managed care programs enrolling children with special health care needs; the State's requirements for MCOs/PHPs enrolling children with special health care needs; and how the State monitors its own actions and that of its contracting MCOs and PHPs. Please also note additional resources that may be helpful to States, which are included as endnotes to this document.

Public Process

1) The State has in place a public process for the involvement of relevant parties (e.g., advocates, providers, families, caregivers, consumer groups, State agencies, MCOs/PHPs) that treat or otherwise serve children with special health care needs. The

State seeks the participation of these parties during the development and ongoing operation of the managed care program.

2) The State assures that MCOs/PHPs have a process to seek input from these same groups on relevant operational and monitoring issues on a regular basis.

Please see Section A. General Impact I. Background for the state's response to these questions.

Definition of Children with Special Health Care Needs

1) Using health status/functioning or a categorical basis, the State has developed a definition or definitions of children with special health care needs. At a minimum, the State's definition must include the following five subsets (inasmuch as such groups are enrolled in a mandatory capitated managed care program).[1]

Medicaid-eligible children under age 19 who are:

1. Blind/Disabled Children and Related Populations (eligible for SSI under title XVI);
2. Eligible under section 1902(e)(3) of the Social Security Act;[2]
3. In foster care or other out-of-home placement;
4. Receiving foster care or adoption assistance;
5. Receiving services through a family-centered, community-based coordinated care system that receives grant funds under section 501(a)(1)(D) of title V, as defined by the State in terms of either program participant or special health care needs.

Identification and Enrollment

1) To ensure that the safeguards in this document are applied, the State identifies and/or requires MCOs/PHPs to identify children with special health care needs once they are enrolled in an MCO/PHP. The State indicates which entity is to determine if a child is identified as having a special health care need.[3]

2) For foster-care children only, the State describes the enrollment provisions that address the broader, unique issues occurring because of out-of-home, out-of-geographic area placement.

The following definitions are the statutory definitions for the public mental health system for children we serve along with the definition of medically necessary described in WAC 388-865-0150.

> "Severely emotionally disturbed child" means a child who has been determined by the regional support network to be experiencing a mental disorder as defined in chapter 71.34 RCW, including those mental disorders that result in a behavioral or conduct disorder, that is clearly interfering with the child's functioning in family or school or with peers and who meets at least one of the following criteria:

(a) Has undergone inpatient treatment or placement outside of the home related to a mental disorder within the last two years;
(b) Has undergone involuntary treatment under chapter 7 1.34 RCW within the last two years;
(c) Is currently served by at least one of the following child- serving systems: Juvenile justice, child-protection/welfare, special education, or developmental disabilities;
(d) Is at risk of escalating maladjustment due to:
(i) Chronic family dysfunction involving a mentally ill or inadequate caretaker;
(ii) Changes in custodial adult;
(iii) Going to, residing in, or returning from any placement outside of the home, for example, psychiatric hospital, short-term inpatient, residential treatment, group or foster home, or a correctional facility;
(iv) Subject to repeated physical abuse or neglect;
(v) Drug or alcohol abuse; or
(vi) Homelessness."

71.34.020 RCW 1998 Definitions

(8) "Gravely disabled minor" means a minor who, as a result of a mental disorder, is in danger of serious physical harm resulting from a failure to provide for his or her essential human needs of health or safety, or manifests severe deterioration in routine functioning evidenced by repeated and escalating loss of cognitive or volitional control over his or her actions and is not receiving such care as is essential for his or her health or safety.

(12) "Medical necessity" for inpatient care means a requested service which is reasonably calculated to: (a) Diagnose, correct, cure, or alleviate a mental disorder; or (b) prevent the worsening of mental conditions that endanger life or cause suffering and pain, or result in illness or infirmity or threaten to cause or aggravate a handicap, or cause physical deformity or malfunction, and there is no adequate less restrictive alternative available.

(13) "Mental disorder" means any organic, mental, or emotional impairment that has substantial adverse effects on an individual's cognitive or volitional functions. The presence of alcohol abuse, drug abuse, juvenile criminal history, antisocial behavior, or mental retardation alone is insufficient to justify a finding of "mental disorder" within the meaning of this section.

There has been no change from the last waiver period for these children. These children are identified by program code on their coupon through the eligibility process. The exception to this is Title V children. Title V children may also be blind/disabled, SSI, in foster care etc.

The MHD has a data sharing agreement with the Department of Health to identify the children on Title V. MHD then matches these children with the information contained in the MHD/CIS.

The RSNs are notified of these children through an encrypted method through our Intranet.

Due to confidentiality MHD does not send individual information back to Department of Health. If a child is on Title V and also receiving mental health services it is possible through the public mental health system that they would have a team providing services and the Department of Health could be represented.

Please see the information that has been sent to CMS though condition #3 on our current waiver.

3) The State explains the processes it has for identifying any child in one of the five groups described in the Definition section, including: relevant information on screening tools; linkages with other State agencies (e.g., Child Protective Services and Title V); Medicaid claims data; new member outreach; and client surveys.

4) The State performs outreach activities that are targeted specifically to reach children with special health care needs and their families, caregivers, providers, and other interested parties regarding the managed care program.

Please see Section III. Program Impact Enrollment/Disenrollment. b. Upcoming waiver #1 Outreach and the stakeholder work from above. The Parent Council and the work with Children's Administration provide both input to the MHD and education to the groups. This information exchange is invaluable within our programs. The use of individualized and tailored care also not only provides needed services but a greater understanding of the specific need of the child and family being served.

5) The State ensures that enrollment counselors have information and training to assist children with special health care needs in selecting appropriate MCOs/PHPs and providers based on their medical needs, including information on how to access up-to-date provider listings. The State articulates the processes it has in place to facilitate interaction between families and enrollment selection counselors.

6) Auto-assignment processes assign children with special health care needs to an MCO/PHP that includes their current primary care provider and/or specialists or to an MCO/PHP that is capable of providing a medical home.[4]

This system is mandatory for Medicaid elegibles and the state does not use enrollment counselors. Please see Sections IV. Capacity Monitoring V. Continutiy and Coordination C. mental health educations and VI. Continuity and Coordination Care Monitotring b. & d. The needs of children and youth are covered in these sections. For clarity, the MHD refers to WrapAround as Individualized and Tailored Care. This training is provided by National experts under contract with the MHD to anyone requesting the training free of charge including.

Children with special health care needs who also have mental health needs are eligible for these voluntary services, as is any one else.

7) A child with special health care needs can disenroll into fee-for-service or transfer enrollment into another MCO/PHP for good cause or without cause. The State describes the process for disenrollment or transfer under these circumstances. The State ensures that such disenrollment information is appropriately factored into its quality assurance efforts.

Please see the disenrollment process described in Section III. Program Impact. Enrollment/Disenrollment 5 a. & c. These requirements apply to all Medicaid eligibles in the RSN. There have been only five fair hearings and one grievance filed on behalf of children. None of these were the five categories of special needs children .

8) If an MCO/PHP requests to disenroll or transfer enrollment of an enrollee to another plan, the reasons for reassignment are not discriminatory in any way -- including adverse change in an enrollee's health status and non-compliant behavior of individuals with mental health and substance abuse diagnoses -- against the enrollee. The State describes the corrective action that would take place in instances of any discrimination.

The RSN may not request disenrollment.

9) The State has processes in place for children with special health care needs who have lost and then regained Medicaid eligibility to re-enroll, if desired, with their most recent MCO/PHP.

Medicaid eligibles are enrolled automatically into the PHP.

Provider and Specialist Capacity

1) The State consults with its Title V agency to determine how "experienced provider" will be interpreted.

The MHD does not consult with DOH to determine how experienced provider will be interpreted. As described, the MHD licenses the Community Mental Health Centers in our state where these children receive public mental health. The provider would include the DOH or its contractor in a joint planning process either through EPSDT or the process of individualized and tailored care should the family request they be included or if the team determined the need for them to be included.
The state does work with DOH on many issues relating to children and DOH does participate on the Children, Family and Youth subcommittee of the Mental Health Advisory Committee.

2) The State ensures that the MCOs/PHPs in a geographic area have sufficient experienced providers with the ability to meet the unique needs of children with special

health care needs (e.g., primary care, specialists, ancillary therapists, hospitals, and mental health providers).

3) The State describes how it monitors access to experienced providers, including those who provide specialty care to children.

4) The State requires ~~particular~~ *child mental health* specialist types to be included in the MCO/PHP network, taking into account the necessity ~~of including pediatric subspecialties to provide care for children with special health care needs~~. If necessary primary or specialty care cannot be provided within the network, arrangements are made for enrollees to access these providers (for Medicaid services covered by the contract).

5) The State has provisions in MCOs/PHPs contracts that allow children with special needs who use specialists frequently for their *mental* health care to be allowed to maintain these types of specialists as PCPs or be allowed direct access /standing referral to specialists for the needed care.[5]

Please see the section above on capacity and capacity monitoring. Also, find the capacity charts that were submitted to CMS as a result of condition #3 of our current waiver are attached as AttachmentF1.

~~6) The State describes how it monitors to ensure access to specialty medical equipment and supplies that may be required by children with special health care needs. The State describes how it resolves situations in which there are disputes regarding supplies and equipment.~~

Coordination

1) The State requires a timely and comprehensive assessment of each child's *mental* health care needs and implementation of a treatment plan based on that assessment, for any of the five subsets of children described above. The State describes the process for ensuring that children receive these assessments, which include face-to-face physical examinations of children with special health care needs by MCO/PHP providers.

2) The State provides or requires the MCOs/PHPs to provide case management or care coordination services to children with special health care needs. The State identifies what entity is held accountable for providing these services.

3) The State has a process for coordination with other systems of care that receive Federal funding (for example, Medicare, HRSA Title V grants, Ryan White CARE Act, SAMHSA Mental Health and Substance Abuse Block Grant Funds) and other State and local funding sources (state education agency, child welfare/other social services, Part

C lead agency).

4) The State requires the MCOs/PHPs to coordinate health care services for children with special health care needs with the services of other agencies (e.g., mental health and substance abuse, public health department, transportation, home and community based care, developmental disabilities, Title V, local schools, IDEA programs, and child welfare), and with families, caregivers, and advocates.

Please see the sections above on access, availability and continuity of care.

By contract the RSNs are required to:

- Refer Medicaid consumers of all ages to the identified necessary physical health care, diagnostic services, treatment, and other measures within the initial 30-day intake.
- Maintain a skilled care coordination process that promotes rapid and successful reintegration of consumers back into the community from long-term placements (e.g. juvenile facilities, state hospitals, nursing homes, Children's long -term inpatient facilities). The process shall ensure the following:
- Ensure Children with multiple service needs who meet the requirements of Early Periodic Screening Diagnosis and Treatment (EPSDT) shall receive services that comply the state's EPSDT Plan.
- Options, including Medicaid Personal Care, are considered to maintain consumers in their own homes, or other least restrictive environments, before final determination of residential placement. This shall include options to keep children in school.

Additionally, consumers, including children and their families, have voice in developing tailored services for individual service plans and crisis management by accessing a range of community support services to meet their needs reflecting: a) consumer/family-defined treatment goals, provided in a language or format they understand; b) that services are informed by, and coordinated with, other formal/informal service system(s), including physical health care, for consumers served by multiple systems.

The RSNs must ensure strength-based services: a) are designed creatively and flexibly to meet the unique needs of the consumer and their family in support of consumer recovery, rehabilitation, and community reintegration; b) ensure consumer, family, formal/informal, natural supports, and community strengths are incorporated into the individual service plan; c) are not hindered by defined services or programs; d) represent a blend of service dollars and community resources

Over the course of the 01-03 biennium the RSNs will have to develop service protocols as

described on page 56 of this document.

Quality of Care

1) The State has specific performance measures for children with special health care needs (for example, Consumer Assessment of Health Plans [CAHPS] for children with special health care needs; Health Employer Data Information Set [HEDIS] measures stratified by children with special health care needs, etc.).[6]

2) The State has specific performance improvement projects that address issues for children with special health care needs.

Please see the Health Information System page 83 and the work of the *16 State pilot project* and the performance measures both now and in development.

Other Policy Guidance

1) To the extent appropriate, the State has adequately addressed any policy guidance that HCFA has issued to date relevant to children with special health care needs.

Payment Methodology

1) The State develops a payment methodology that accounts for children with special health care needs enrolled in capitated managed care.

2) The State provides information on any future plans it may have to institute additional risk adjustment for children with special health care needs, including intentions to work with other appropriate State agencies to develop such risk adjustment methodologies.

These Medicaid eligible children are included in our calculation for payment to the RSNs.

Plan Monitoring

1) The State has in place a process for monitoring children with special health care needs enrolled in MCOs/PHPs for access to *mental health* services ~~(including EPSDT and also □day to day□ services such as wheelchairs, in home therapy, and other supplies),~~ quality of care, coordination of care, and enrollee satisfaction.

The state and the RSNs have monitored access and quality of care for these children. The complete satisfaction survey has been submitted to CMS in July 2001

2) The State has standards or efforts in place regarding MCOs/PHPs compliance with ADA access requirements for enrollees with physical disabilities.

DSHS including MHD requires its contractors to comply with the ADA and monitors for compliance.

3) The State's MCO/PHP contracts specify what constitute medically necessary services for children with special health care needs, and it makes these specifications available to families and advocates. The State's specifications address the extent to which the MCO/PHP is responsible for covering services related to a child's ability to achieve age-appropriate growth and development. Also, the specifications allow approval/authorization of services in a timely fashion.

The RSNs are responsible to serve children who meet the definition of medical necessity and the statutory definition. A child's physical needs is not considered when they seek voluntary mental health services, or if they are involuntary committed.

4) The State monitors MCOs/PHPs service authorization policies to ensure that the criteria are consistent with the medical necessity contract specifications and any practice guidelines adopted by the MCO/PHP that are relevant to children with special health care needs.

All monitoring activities described above of the QA&I and other sections of the MHD will include children. Children's services will be included in the development of practice guidelines this biennium and possibly in conjunction with the service protocols.

Additional monitoring of the system takes place by the Children, Youth and family subcommittee of the MHAC and the Parent Council. This input is provided to the Director of the MHD.

Attachment F.1

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Chelan-Douglas				
Behavioral Health Clinic	Chelan & Douglas Counties	8:166 per month	1 child	
Children's Home Society	Chelan & Douglas Counties	8:120 per month	1 child	
Catholic Family and Child	Chelan & Douglas Counties	6:110 per month	4 child	
Clark				
Columbia River Mental Health Services – Provide a full range of mental health services, including residential, day treatment programs for children, drop in program for adults, crisis services outreach to special populations, case management, MICA, school based mental health services, group treatment, psychiatric services, hospital liaison and individual psychotherapy.	CRMHS operates services in four sites across the County and has staff located at two family resources located in East and North Clark County also. The Agency also provides services at 3 residential sites and 14 schools. Additionally, all of the PCPs meet with consumers in the community; their homes, restaurant, hospital, jail, shelters etc. Where ever they can within the community.	29.710: (Children only: 25 consumers per staff)	25 Children Mental Health Specialists MD: 3 (1 Child Psychiatrist, 1 Psychiatrist who sees adolescents)	
Children's Center – provides a full range of mental health services for children and their families. They provide individual psychotherapy, art therapy, play therapy, case management, psychiatric services, family therapy, group treatment and school based treatment.	Primary clinic is located in downtown Vancouver with services in 26 different schools across the county. They also provide services in in Juvenile Detention. Additionally all of CC's PCP's provide services at the choice of the consumer in the community.	23 590 (26 consumers per staff)	19 Children Mental Health Specialists 7 Children (1 Deaf and DD) Mental Health	

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Children Home Society – is a division of the Childen's Home Society of Washington. In Clark County they provide a range of service to children and their families including case management, services to foster homes, out of home care, group treatment, and psychiatric services.	Primary clinic located in downtown Vancouver with additional offices in Battleground (North County) and East County (Washougal). Additionally, all of CHS PCP's meet with their consumers at the location of the consumer's choice.	8.2:141 (17 consumers per staff)		
PeaceHealth Behavioral Health – This is the newest agency certified in Clark County. They also have an Alcohol/Drug program as well as an inpatient psychiatric facility and A/D residential program in Longview (just 40 miles away). PeaceHealth is currently providing an array of services to adult including individual, case management, individual and group therapy, psychiatric, and psychological services. The PACT program serves 30 high end users which is expanding to 50 consumers July 2000.	The main office is located in downtown Vancouver. Case managers/PCP's provide services in the hospital, jail, and community.	8.2:15 (27 consumers per staff)	1 Children Mental Health Specialist	
Southwest Washington Medical Center – Besides inpatient services SWMC has an outpatient Day Treatment program This program is operated by a muli-disciplinary team and serves as a diversion to hospitalization as well as a step down from hospitalization. This program provides increased capacity for diversions for our Hospital Alternative Program operated by Columbia [illegible] Both are very similar in design and services.	Located in downtown Vancouver.	3:30 (10 consumers per staff) However, they utilize Occupational therapists, social workers, dieticians etc on hospital staff to complement [illegible] treatment plan.		

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Garys Harbor				
Evergreen Counseling Center – Provides comprehensive community mental health to the residents of Grays Harbor County.	5.5 Aberdeen, Hoquiam, Cosmopolis 2 East County 1.5 South Beach 1 North Beach	309:10 or 30:1	9 Children's Mental Health Specialist	
Greater Columbia				
The Rogers Counseling Center, a non-profit agency, under a contract with Asotin County, provides crisis response and a full array of outpatient services. The Center is also certified to provide emergency and outpatient evaluation and treatment services.	Clarkston	1:9*	Children 4 Ethnic Minority African American 1 Asian Pacific Islander Native American Hispanic Developmental Disability Deaf/HOH	None, DCFS services are used.
Benton and Franklin Counties Crisis Response Unit provides crisis and outpatient services to residents in this bi-county area. Benton and Franklin County Human Services operate the Crisis Response Unit. The Crisis Response Unit is also certified to provide emergency and outpatient evaluation and treatment services.	Kennewick	1:16*	Children 4 Ethnic Minority African American Asian Pacific Islander Native American Hispanic 1 ***Developmental Disablity*** Deaf/HOH	*N/A*

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Lourdes Counseling Center, a non-profit agency, under contract with Benton & Franklin Counties, provides outpatient services and is certified to provide outpatient and inpatient evaluation and treatment services. Lourdes Counseling Center also operates a freestanding inpatient psychiatric facility serving adults, children and adolescents. The inpatient unit of Lourdes Counseling Center interfaces with mental health providers in GCBH as well as other Regional Support Networks in Washington State in providing inpatient care.	Richland	1:12*	Children 12 Ethnic Minority African American 1 Asian Pacific Islander Native American 2 Hispanic ***Developmental Disablity*** Deaf/HOH	
La Clinica Migrant Health Care Center, under contract with Benton & Franklin Counties, provides outpatient services through its mental health program, **Nueva Esperanza.** Nueva Esperanza is also certified to provide outpatient evaluation and treatment services.	Pasco	1:13*	Children 2 Ethnic Minority African American Asian Pacific Islander 4 Native American Hispanic ***Developmental Disablity*** Deaf/HOH	0
Lutheran Social Services, a non-profit agency, under contract with Benton & Franklin Counties, provides a therapeutic foster care program.	Kennewick	1:1*	Children 4 Ethnic Minority 1 African American Asian Pacific Islander Native American Hispanic 2 ***Developmental Disablity*** Deaf/HOH	0

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Sunderland Family Treatment Services, a non-profit agency, under contract with Benton & Franklin Counties, provides outpatient services and is certified to provide outpatient evaluation and treatment services.	Kennewick	1:10*	Children 10 Ethnic Minority African American 2 Asian Pacific Islander Native American Hispanic ***Developmental Disablity 2*** Deaf/HOH	
Inland Counseling Network – Dayton, a non-profit agency provides crisis response and a full array of outpatient services in this small rural county. The agency is also certified to provide emergency and outpatient evaluation and treatment services.	Dayton	1:10*	Children 3 Ethnic Minority African American Asian Pacific Islander Native American Hispanic ***Developmental Disablity 2*** Deaf/HOH	
Garfield County Human Services, through a contract with The Rogers Counseling Center, provides crisis response and outpatient services. The agency is also certified to provide emergency and outpatient evaluation and treatment services in this small rural county	Pomeroy	1:4*	Children 4 Ethnic Minority African American Asian Pacific Islander Native American 1 Hispanic ***Developmental Disablity 1*** Deaf/HOH	None/DCFS services used

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Central Washington Comprehensive Mental Health, a non-profit agency, through contracts with Klickitat, Kittitas **and** Yakima Counties, and GCBH provides crisis response and a full array of outpatient services. The agency is also certified to provide emergency and outpatient evaluation and treatment services. This agency provides mental health services in Yakima, Klickitat, and Kittitas Counties, standardizing care for these three counties (member governments). CWCMH has integrated several services under one roof, coordinates crisis care for three counties, and has achieved unprecedented integration of services.	Yakima Sunnyside Ellensburg CleElum Goldendale White Salmon	1:11* 1:6* 1:12*	Children 20 Ethnic Minority 1 African American Asian Pacific Islander Native American 2 Hispanic 4 ***Developmental Disablity*** Deaf/HOH	1 crisis bed
Skamania County Counseling Center provides crisis response and outpatient services in Skamania County. The agency is certified to provide emergency and outpatient evaluation and treatment services.	Stevenson	1:14*	Children 5 Ethnic Minority African American Asian Pacific Islander Native American Hispanic ***Developmental Disablity 1*** Deaf/HOH 1	0
Inland Counseling Network- Walla-Walla, a non -profit agency, under contract with Walla Walla County, provides outpatient services for adults (18-59). This agency provides crisis response services and is certified for emergency and outpatient evaluation and treatment services to all residents in Walla Walla County.	Walla Walla	1:4*	Children 4 Ethnic Minority African American Asian Pacific Islander Native American Hispanic ***Developmental Disablity*** Deaf/HOH	0

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Southeast Children's Home Society of Washington, Southeast Region, a non-profit agency, under contract with Walla Walla County, provides outpatient services for children and adolescents.	Walla Walla	1:7*	Children 4 Ethnic Minority African American Asian Pacific Islander Native American Hispanic Developmental Disability Deaf/HOH	0
Whitman County Counseling Services provides crisis response and a full array of outpatient services in the most northeastern part of the Region. The agency is also certified to provide emergency and outpatient evaluation and treatment services.	Pullman	1:12*	Children 3 Ethnic Minority African American Asian Pacific Islander Native American 1 Hispanic Developmental Disability Deaf/HOH	2
Catholic Family and Child Services, a non-profit agency, under contract with Yakima County, provides outpatient services to children and families in Yakima County The agency in partnership with the Yakima Nation has a developed an outpatient mental health program for Native American children and families.	Yakima	1:17*	Children 3 Ethnic Minority African American Asian Pacific Islander Native American 2 Hispanic Developmental Disability Deaf/HOH	1
Yakima Valley Farm Workers Clinic, under contract with Yakima County, provides outpatient services through its behavioral health unit, Yakima Valley Farm Workers Behavioral Health Services. The behavioral health program also provides crisis response services for children and adolescents in Yakima County.	Yakima	1:20	Children 31 Ethnic Minority African American 1 Asian Pacific Islander Native American 2 Hispanic 10 Developmental Disability 16 Deaf/HOH	2

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Walla Walla County Human Services through contracts with Inland Counseling Network and Children's Home Society provides resource management for children. Additionally, Walla Walla County resource management provides psychiatric hospitalization certification for residents of this County.	Walla Walla	N/A	N/A	N/A
King				
Downtown Emergency Service		1:17		
ACCESS				
Evergreen Community Health Care		1:11		
Fairfax Hospital			Services for Adults NA – Inpatient/Respite bed resource only	
Family Services of King County – sub			This subcontractor of a PHP Provider employs professional staff, some of whom are designated child specialists and/or specialize in the treatment of children.	
Federal Way Youth & Family – sub			This subcontractor of a PHP Provider employs professional staff, some of whom are designated child specialists and/or specialize in the treatment of children.	
Friends of Youth – sub			This subcontractor of a PHP Provider employs professional staff, some of whom are designated child specialists and/or specialize in the treatment of children.	

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Harborview Mental Health Center		1:21	1 Child Specialist 12 Child Specialists 1 Child Psychiatrist	
Highline – West Seattle Mental Health		1:99		
Puget Sound Educational Services District (Blended Funding Project)			Treats children, however, subcontracts clinical services (child specialists from other RSN providers).	
Catholic Community Services -sub			Has been a subcontractor since 1999. This subcontractor of a PHP Provider employs professional staff, some of whom are designated child specialists and/or specialize in the treatment of children.	
Residential:				
Highwest Residence				
Kent Youth and Family – sub				
Lutheran Social Services – sub				
Northshore Youth and Family – sub				
Northwest Behavioral Services		1:118		
Northwest E & T Center			Closed September 30, 1999	
Merino Interpreting			Closed March 30, 1999	
Renton Area Youth & Family – sub			Interpretation Services, only This subcontractor of a PHP Provider employs professional staff, some of whom are designated child specialists and/or specialize in the treatment of children.	
Ruth Dykeman Child Center – sub			This subcontractor of a PHP Provider employs professional staff, some of whom are designated child specialists and/or specialize in the treatment of children.	
Ryther Child Center – sub			This subcontractor of a PHP Provider	

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
			employs professional staff, some of whom are designated child specialists and/or specialize in the treatment of children.	
Seattle Children's Home		1:6	1 Child Psychiatrist 2 African American Specialists (treating children) 24 Child Specialists	
Sea Mar Counseling and Social Services (New provider as of 2000)			2 Social Workers (treating children) 1 Child Psychiatrist 2 Child Specialists	
Seattle Counseling		1:15	2 Child Specialists	
Seattle Indian Health Board – sub			31 Child Specialists	
Seattle Mental Health		1:24	1 Child Psychiatrist	
Residential: (taken over from NWBS)				
Chartley House				
Benson Heights				
Southeast Youth and Family – sub				
Southwest Youth and Family – sub				
Seattle Mental Health [Eastside]		1:54	16 Child Specialists	
Residential				
Stillwater				
Avondale				
Therapeutic Health Services		1:38		
Valley Cities Counseling		1:57		
Vashon Youth and Family – sub			19 Child Specialists 1 Child Specialist This subcontractor is a PCP Provider	

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
			employs professional staff, some of whom are designated child specialists and/or specialize in the treatment of children.	
Young Men's Christian Association (YMCA)		1:7	5 Child Specialists 1 Child Psychiatrist	
Youth Eastside Services – sub			This subcontractor of a PHP Provider employs professional staff, some of whom are designated child specialists and/or specialize in the treatment of children.	
Muckleshoot Indian Tribe				
North Central				
Adams **Community Counseling Services of Adams County** serves all of Adams County and the Royal Slope area. Besides the main office in Othello, the agency maintains an office in Ritzville.	Othello 3.5 Ritzville 2.5	6:116	4 Child	
Grant **Grant Mental Healthcare** serves Grant County, the area around Grand Coulee, and part of the Colville Reservation in Okanogan County. Besides the main	Moses Lake 33 Quincy 4.75 Grand Coulee 3 Mattawa .25	41:419	12 Child	

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
office in Moses Lake, the agency maintains offices in Quincy, Grand Coulee, and Mattawa.				
Okanogan **Okanogan Community Counseling** Services serves most of Okanogan County, including part of the Colville Reservation. Besides the main office in Omak, the agency maintains offices in Tonasket, Brewster, Oroville and Twisp	Omak 12.75 Tonasket 2 Brewster 3 Twisp 2.25 Oroville 1	21:363	4 Child	
Northeast Washington				
Stevens County Courseling Services- Provides comprehensive mental health service in Chewelah, Colville, Nine Mile Falls, and Loon Lake	Chewelah, Colville, Nine Mile Falls, and Loon Lake	1:28	6 Children Specialists 1 Child Psychiatrist	
Ferry County Community Services - Provides comprehensive mental health service in Republic, Keller, Inchelium, Cusick and Orient	Republic, Keller, Inchelium, and Orient	1:35	1 Child Mental Health [illegible]	
Lincoln County Counseling Center Provides comprehensive mental health service in Davenport, Odessa, and Wilbur.	Davenport, Odessa, and Wilbur	1:40	3 Child Mental Health Specialist 1 Child Psychiatrist	
Pend Oreille County Counseling Services- Provides comprehensive mental health service in Newport and Metaline Falls.	Newport and Metaline Falls	1:47	1 Child Mental Health Specialists 1 Child Psychiatrist	
North Sound				
Catholic Community Services provides outpatient mental health services (individual, family, group, case management, medication	Skagit - 5.25 Whatcom - 16.25	33:1 33:1 CHAP 4:1	17 Child (includes 2 child psychiatrists)	Whatcom - 2

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
evaluation/management) for children and families in Skagit and Whatcom Counties, planned respite, crisis residential, CLIP, CHAP, treatment foster care, MICA groups for adolescents, and the ADHD Clinic.				
Community Mental Health Services provides outpatient mental health services (individual, family, group, case management, medication evaluation/management) to children and families in Island, San Juan and Skagit Counties. Bilingual staff are available to provide services for monolingual Hispanic children and their families.	Island - 5 San Juan - 1.5 Skagit - 12	24:1	16 (includes 1 child psychiatrist)	Island - 2 Skagit - 2
Compass Health provides crisis, residential, outpatient counseling and case management services to children, aldults and older adults in Snohomish County. It operates from over 40 different locations. It coordinates the Asian/Pacific Islander Mental Health Program for theNSRSN. It provides specialized services for homeless, mentally ill in jail, developmentally disabled, head injured, etc.	Arlington - 5.2 Lynnwood - 12.93 Monroe - 3.4 Everett - 13.9 Specialized Services - 19	Arlington Level 1&2 = 41.05 to Level 3 = 19.4 Lynnwood Level 1&2 =49 to 1 Level 3 = 16 to 1 Monroe All levels = 20.8 to 1 Everett Level 1 & 2 = 31.1 to 1 Level 3 = 19.4 to 1 Specialized Services MultiCultural = 20.76 to 1 CHAP = 5 to 1 KIT = 7 to 1 Preschool/School based = 13.2 to 1	54 Child 4 Child Psychiatrists	
Sea Mar provides outpatient mental health services (individual, family, case management, psychiatric) to children and	Skagit - 0.5 Snohomish - 2 Whatcom - 1	30:1 30:1 30:1	3 Child Therapists 3 Minority Specialists 1 Child Psychiatrist	0

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
families in Skagit, Snohomish, and Whatcom Counties. Sea Mar specializes in services to the Hispanic community. All Sea Mar counselors are bi-lingual.			1 Psychiatric ARNP (Child Specialist)	
Whatcom Counseling and Psychiatric provides outpatient mental health services (individual, family, group, medication evaluation/management, case management) to children and families in Whatcom Co.	Whatcom - 9	31:1	8 Child Mental Health Specialists 1 Child Psychiatrist 1 Psychiatric ARNP (Child Specialist)	0
Peninsula				
Kitsap Mental Health Services: Provides comprehensive community mental health services within Kitsap County, including crisis services, outpatient services, residential programs, day treatment, as well as inpatient Evaluation and Treatment services.	Bremerton-37 Port Orchard-6	Averages 1:31	16 Child Mental Health Specialists 1 Child Psychiatrist 1 Psychiatrist	
Peninsula Community Mental Health Center: Provides comprehensive community mental health services within East Clallam County, including crisis services, outpatient services, residential programs, day treatment.	Port Angeles/Sequim-22	1:25	7 Children 2 Child Psychiatrists	
Jefferson Mental Health Services - Provides comprehensive community mental health services within East Jefferson County, including crisis services, outpatient services, residential	Port Townsend- 7	1:18	5 Child Mental Helath Specialists 1 Child Psychiatrist	

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
programs, day treatment				
West End Outreach Services: Provides comprehensive community mental health services within Western Clallam and Jefferson Counties, including crisis services, outpatient services, residential programs, day treatment	7.5 Forks .4 Clallam Bay .6 Neah Bay .2 La Push	1:25	3 Child Mental Health Specialists 1 Psychologist 1 Psychiatrist	
Pierce				
Catholic Community Services	Countywide	1:6	23 child	
Comprehensive Mental Health	North (Tacoma) and West Pierce County	1:22	30 child	
Good Samaritan Behavioral Healthcare	East Pierce County	1:20	42 child	
Greater Lakes Mental Health Foundation	South Pierce County	1:24	19 child	
Puyallup Tribal Health Authority	Countywide	1:26	7 child	
Sea Mar Community Health Center	Countywide	1:25	1 child	
Southwest				
Lower Columbia Mental Health Center. Established more than 40 years ago, it provides the full array of outpatient mental health services for children and holds the contract for Crisis Response services for the system.	Longview Kelso (direct service staff have mobile phones and provide outreach services)	Current: 55 per MHPCP	1 child certified nurse practitioner 1 Ph.d. child mental health specialist 4 child mental health specialists (This agency also holds the contract for system wide crisis services and has 3 child mental health specialists designated by the county for involuntary detention.) Contracts with African-American, N American, Hispanic, DD, Hard of hearing/deaf, and Asian specialist	
Center for Behavioral Solutions. Launched in 1998, this consortium has St. John Medical Center as lead. S.L.Start and Toutle River Ranch dba Community	Longview Kelso. (direct service staff have mobile	Current: 69 per MHPCP	2 child psychiatrists 1 child certified Ph.d. psychologist 2 child mental health specialists	

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Connections are partners. CBS emphasizes solution focus treatment and provides the full array of outpatient mental health services for children.	phones and provide outreach services)			
Other RSN services	Mobile services are provided county-wide		1 Children's mental health specialist 1 clinical child psychologist on contract	
Spokane				
Catholic Charities: This agency does not serve children for the 1999-2001 biennium.	N/A	N/A	N/A	
Children's Home Society: Outpatient individual, group and family services Case management. Psychoeducation. ITC.	Valley Office 0.80 NE Community Center, 1.00 West Central Comm. Center, 0.50 Ness Elementary School, 0.10	1:25	2.00 Child Mental Health Specialists 0.05 Child Psychiatrist 1.00 Child MH/SA Therapist	
Deaconess CAP Program	Valley schools	1:12	None	
Excelsior Youth Center: Short-term residential/stabilization services. Crisis respite services.	Excelsior Youth Center, 2.00	1:2	4.00 Child Mental Health Specialists 0.25 Child Psychiatrist 0.25 Child Psychologist	
Family Service Spokane: Outpatient individual, group and family services. Case Management. Psychoeducation. ITC.	Downtown Spokane/office, 4.50 Spokane Valley office, 1.00 Millwood School, 0.50	1:45	1.50 Child MH/SA Therapists	
Grief Counseling Program: Grief work with children and their families.	Central Spokane/main office, 0.25	1:30	None	
Lutheran Social Services: Outpatient individual, group and family services.	Downtown Spokane/office, 8.00 Greenhouse, Deer Park, WA, 1.00	1:24	11.0 Child Mental Health Specialists 0.06 Child Psychiatrist	

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Case management. ITC. Psychoeducation. Specialties: sexual abuse victims' services, therapeutic foster care.	Spokane Valley office, 1.00 St. Marks Lutheran Church, 0.50 Cheney, WA, 0.50			
N.A.T.I.V.E. Project: Mental health/ substance abuse treatment for adolescents.	Central Spokane/main office, 1.00	1:20	1.00 Child Mental Health Specialist/Chemical Dependency Counselor	
Sacred Heart Medical Center, B.E.S.T Program: Hospital-based day treatment services.	Sacred Heart Medical Center, 3.00	1:5	3.00 Child Mental Health Specialists 0.20 ChildPsychiatrist 0.20 Child Psychologist	
Spokane Mental Health: Crisis response services. Psychiatric/medical services. Psychological Services. Specialist (child, geriatric, ethnic, disability) consultation services. Training services. Outpatient individual, group, family services. Case Management, Psychoeducation. ITC.	Downtown Spokane/center, 21.00 JRA/Region 1, 0.20 Juvenile Court Services, 0.20 Casey Family Partners, 2.00 VOA/Crosswalk, 0.20 Child Development Center, 0.20 Valley Center, 1.00 Greenhouse, Deer Park, WA, 1.00 Isabella House, 0.20 Thirty-seven public schools within five separate school districts, 4.00	1:25	41 Child MentalHealth Specialists 2 Child Psychiatrists 2 Child Psychologists	
St. Luke's Rehabilitation Institute: Outpatient individual, group, family services.	St. Luke's Rehabilitation Institute, 2.00	1:13	1.00 Child Mental Health Specialist	

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of PCP's	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Tamarack Center: Long-term psychiatric inpatient services. Outpatient individual, group, family, services.	Tamarack Center, 8.00 In-Home services, 0.20	1:2, Inpatient Services 1:15, Outpatient Services	6.80 Child Mental Health Speialists 0.40 Child Psychiatrist 0.10 Child Psychologist	
Thurston Mason				
For 1998, the RSN served approximately 4,470 individuals	Thurston is 76% of total served. Mason is 24%. This is also equals the split between the counties for number of eligibles.	22 child		
Behavioral Health Resources – served approximately 70% of the service population or 3,129	Olympia, Yelm, Shelton, Rochester, Belfair	1:27		
South Sound Mental Health – served approximately 25% or 1,117	Olympia and Shelton	1:27		
St. Peter Hospital – served approximately 5% or 223 service recipients.	Thurston and Mason Counties	1:27		

Regional Support Network (RSN) Contracted Providers	Geographic Distribution of P	Ratio of PCP's to Consumers[1]	Type and Number of Specialists	Crisis Service Capacity: # of Crisis Respite Beds
Timberlands				
Cascade Mental Health Care-the largest TRSN provider serving the 66,700 citizens of Lewis County and representing 72.8% of the RSNs general population and 76.4% of its Medicaid recipients.	31 - Chehalis, Centralia, Morton, Packwood, Randle, Pe El	1:36	3 Children 1 DD 1 Native American 1 Asian Pacific Islande	CMHC provides 24 hour availability to crisis services. CMHC has ability to provide 2 crisis respite beds staffed at a ratio of 2 adults per child.
Willapa Counseling Center -serves Pacific County's 21,100 residents which comprise 23.1% of TRSN's general population and 22.4% of its Medicaid recipients	8 - Long Beach, South Bend, Oce Park	1:35	2 Children 1 DD	24 hour crisis services; no crisis respite beds for children
Wahkiakum County MHS - serves Wahkiakum County's 3,800 citizens which comprise 4.1% of TRSN's general population and 1.2% of its Medicaid recipients	3.5 - Cathlamet, Grays River	1:25-30	2 Children	24 hour crisis services; no designated crisis respite beds though may access local foster homes for crisis needs via DCFS; are working on development.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities	Other defined specialty service
Chelan Douglas						

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty services
Children's Home Society	15	30-35 Active Child and Family Teams Monthly	Primary Intervention Program with Wenatchee School District (Serving 100 Students) Readiness to Learn in Cascade and Entiat School District. Group at Orchard Middle School – CDRSN funded directly with school through community collaboration funds.	Grandparents Raising Grandchildren Parenting classes in English/Spanish Alpine Boys Ranch parent training Pat Mullen Behavioral Intervention Training Parenting Topic/Presentations (Ten sessions annually.)	Chelan-Douglas Children's Interagency Council CDRSN Quality Management Oversight Committee Readiness to Learn North County Chelan County Juvenile Justice Wraparound Intake and Review Committee Columbia Valley Community Health Wenatchee School District Cashmere School District Orondo School District Entiat School District Eastmont School District Leavenworth School District Wenatchee School District Truancy Board Bruce Transitional Housing Chelan-Douglas Public Health Wenatchee Valley Clinic Local Physicians Central Washington Hospital Catholic Family and Child Service Chelan-Douglas Behavioral Health Clinic Lake Chelan Community Hospital CASA/GAL Program Division of Child and Family Services

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty services
Children's Home Society cont.					Festival of Friendships – Celebrating Diversity Wenatchee Watercolor and Wraparound Intake and Review Committee Fund Raiser Dr. Storck consultations Coordination with Primary Care Physicians Division of Child and Family Services Blended Funding Project Emergency/Crisis Services Development
Catholic Family and Child	15 children who have child & family teams. 3 – current teams includes providers from CHS & the Dept. 2 – current teams serve multiple siblings and a total of six (6) clients in CFCS.	18 Families have ITC Teams	47 Enrolled in Readiness to Learn 7 Attending St. Joseph's School 10 Head Start students 22 Children in a variety of school settings in Chelan and Manson 20+ Children in other school settings.	Padres Unidos	Chelan-Douglas Children's Interagency Council CDRSN Quality Management Oversight Committee Readiness to Learn North County Information Services Quality Team Wraparound Intake and Review Committee Juvenile Justice System Services Children's Services for children returning to community from Group or CLIP Canyon View Group Home Bruce Transitional Housing Parent Information Network 21st Century Grant for Chelan-Douglas County Schools

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Catholic Family and Child cont.					Two support group for male clients from 9 to 14 years of age Five support groups for female clients ranging from five to 17 Development of a mother's support group Work with district courts on an Anger Management group for adult Latino males Individual and family therapy Therapeutic Case Management Child and Family Teams
					Services provided in a variety of settings based on client need including, but not limited to office, client home, schools, doctor's office, and various community settings Latino Mental Health Coalition Festival of Friendships – Celebrating Diversity Wenatchee Watercolor and Wraparound Intake and Review Committee Fund Raiser Division of Child and Family Services Blended Funding Project. Emergency/Crisis Services Development Team Coordination with Primary Care Physicians Dr. Storck consultations

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Clark					
Columbia River Mental Health Services	33	School Based Services: 14 Schools Day Treatment: 222	Bridgebuilders Project -Consumer Voices are Born -Parent Partners hired for School Teams. -Family Information Specialist	home visits, letters, clients/community/school mental health educational presentations, newspaper ads, phone contacts, coordination meetings with clients and community providers/leaders, wrap around team participation/facilitation, school breaks and summer programming and activities, transition implementation (eg.mainstreaming, school to work).	Washington School for the Deaf and Blind Schools, S.E. Asian Outreach Project, Operation SONAR (Violence Prevention Project to middle school age youth and families, VOCA (Sexually/physically abused children), outreach to YWCA Safe Choice (domestic abuse shelter), Adult mentors for Youth, Psychological assessments, Psychiatric Assessment and Medication monitoring

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Children's Home Society	44	Outpatient Counselor at Roosevelt Elementary & Psch-Ed group @ Pleasant Valley Middle School.	Bridgebuilder Family Specialist	Schools, Family Resource Centers in Community, Church Groups	Child Placement Agency
Children's Center	4	11 Day Treatment 1 High School, 1 Middle School, 24 Elementary Schools in Vancouver & Evergreen Districts. (At-risk schools providing MH sevices on-site.	Family Support Specialist on staff.	Schools are the largest forms of out-reach. General Marketing, parent community education @ various sites. JDH Worker in JDH. Active volunteer Board	Adoption Support Services, Fetal Alcohol. Juvenile Dentention Hall Case Manager
Peace Health Behavioral Health	0	0	0		

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Southwest Washington Medical Center	0	0	0		
Regional Support Network	81	Day Treatment: 233 Schools: 51			
Evergreen Counseling Center	0	10		RSN funded classes to train trainers in "Making Parenting a Pleasure" parenting class curriculum.	

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty services
Grays Harbor					
Evergreen Counseling Center	0	10	Sexual Abuse groups by provider	RSN funded classes to train trainers in "Making Parenting a Pleasure" parenting class curriculum. "Grandparents raising Grandchildren"' group by provider	Counselor at Grays Harbor Children's Advocacy Center one day a week to provide intakes, on-going counseling and serve on MDT RSN/Interagency Children's Staffing Team (also functions as local CLIP committee) RSN facilitates staffing for multi-problem, multi-system involved children referred from any source GUTS Seminars by provider in collaboration with community agencies, RSN funded case aides through Personal Service Providers to act as mentors, Jesuit Volunteer through provider to act as mentor, Youth Coalition through provider with focus on homeless youth Child Mental Health Specialist Crisis Interventionist for Crisis Services including school services

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Greater Columbia					
The Rogers Counseling Center	0	Usually have 15-20 kids who have teams involved at various stages of care.	No services in schools except for crisis, we do pick up kids from school, transport for groups and return to school or home. Two-day treatment groups for school age kids located at the MH Center.	None	Regular attendance at community meetings focused on children, regular contact with school counselors and pediatricians; participation in "at risk" teams with DCFS, regular contact with DCFS. While not using RSN funds, we have a screening program for ADHD for clients who can pay, are testing a Wilderness Therapy program this summer with special funds and have a special contract for sexually abused children and for Family Reconciliation Services.
Benton and Franklin Counties Crisis Response Unit	0	N/A	N/A	N/A	N/A
Lourdes Counseling Center	0	30-40	35 clients	Parent education classes	Case Management in Community Inpatient Psychiatric Beds 10
Nueva Esperanza	0	0	0	3	Social skills group and Tutorial group.
Lutheran Social Services	4	0			CHAP Program/ also in-home program puts capacity at 18
Sunderland Family Treatment Services	0	40	0	Parenting Groups	Social skills group; Child psychologist

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Inland Counseling Network - Dayton	0	2	0	1	Summer Rec. Program for children 6-14 years of age. Monthly Community Team meetings involves mental health and allied systems to identify children at risk with referrals to mental health or other appropriate services. Outreach services to begin to engage child and family in services. Annual October fest for youth.
Garfield County Human Services	0	Varies usually have 1-3 kids who have teams at various stages of care	Full-time counselor in schools doing assessments, individuals and groups.	None	Regular attendance at community meetings focused on children, regular contact w/school counselors and pediatricians; participate in "at risk" teams with DCFS, regular contact w/DCFS. Contact with juvenile probation. Collaboration with Public Health Dept./Substance Abuse prevention staff around children's issues. Large range of activities funded through substance abuse prevention and CAMASA funds. We sponsor scouts, many sporting organizations and a wide range of other programs that has the effect of reaching out to kids and helping find those with mental health as well as substance abuse issues.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Central Washington Comprehensive Mental Health	50	All children & their family are treated within a multidiscipline treatment team. Every effort is made to involve external agencies i.e., school, medical service etc., when developing treatment plans. When a child or family present at significant risk, acute care services are wrapped into treatment to ensure any crisis developed are managed in a timely and effective manner consistent with the treatment plan	A School based team provides prevention and intervention services to Yakima schools.	"Strong Families" model of parent training occurs on regular basis.	CWCMH collaborates with other community services i.e., Children's Village, EPIC, to ensure service delivery option are available for children and families Developed a community collaborative model (schools, and law enforcement) to help schools deal with violence. Gang violence prevention program.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Skamania County Counseling Center	0	12	0	0	Provide on-going clinical supervision and psychiatric services for children 0-5 for Rock Creek Therapeutic Developmental Day Care. Other outreaches occur 2 times per year.
Inland Counseling Network - Walla Walla)	1	1	Contract with DCFS for Alternative Response Services to schools and community.	None	Contract with DCFS to provide Family Reconciliation Services and Family Preservation Services.
Children's Home Society of Washington. Southeast Region	6	45 informal teams working toward formalizing this process. 4 staff are ITC trained currently.	10 formal school based programs involving 7 schools. Day treatment, community based programs include, recreation programs, and mental health individual and group therapy.	23 various parent focused groups that occur at different times throughout the year. They include parent education, and parent groups.	Case management for high-risk children and families. 24-hour on-call crisis response available. Grandparent support, teen advocacy, sexually assault group, parent trust group geared toward Hispanic population, Tot Spot group designed to reach low-income parents of toddlers, Active Parenting of Teens, and How to Talk So Your Kids Will Listen.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities / Other defined specialty service
Catholic Family and Child Services	0	0	2 programs, ATTACH and Therapeutic Kindergarten, jointly serve 20 children at one time.	3 groups, each serve about 12 families at one time (ATTACH group, Valley Intervention Program and the Yakama Nation Family Counseling Program).	Approximately 12 activities per year with various "high risk" groups Children's Bonding and Attachment Treatment
Yakima Valley Farm Workers Clinic	17	All children & their families are provided with treatment within a multi-disciplinary team with involvement of formal, informal and natural supports.	Groups in Toppenish schools for elementary grades; specialized behavioral interventions in EPIC Headstart Program;	Monthly support groups for foster parents; Parenting groups for Spanish speaking chemically affected families with children with behavioral disorders; and ongoing parent education groups.	Monthly educational presentations to the community; majority of services provided are out in the community; Children's crisis team for large geographic area (Yakima County). Situated within a larger group of multi-specialty children's health providers (Children's Village) the agency's Behavioral Assessment Team (BAT) receive referrals, assesses and identifies behavioral treatment strategies; Children's Crisis Response System for Yakima County; Intensive Community Support with focus on Ethnic Minority Children; and 1 mental health specialty bed for diversion through psychiatric referrals.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Whitman County Counseling Services	One program, 4-10 children placed per month	0	13 districts in the county. Case manager/therapist visits each district each week.	Therapeutic Respite Home Outreach, traveling parent support group, parent education classes	School based child case manager/ therapists, specialized assessments for violence in conjunction with prosecutor's office, juvenile services, DCFS/CPS, school admin, and psychologist. WCCS satellite offices located in remote areas of the County. Independent living skills program, summer group for adjudicated youth. Short-term crisis support to families (FRS). Special support to DCFS foster homes. Challenge "Ropes" Course. Parent Resource Centers associated with libraries.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Walla Walla County Human Services	N/A	Provide ITC ongoing training and certification. Assist in development of ITC teams in the community. Mental Health "classrooms" in elementary schools served 62 children in FY98-99. Parent and Community Team (PACT) and Adult Resource Teams. Currently seeking grant for a Parent Navigator to provide peer support to parents of school-age children served by multiple systems.	Mental health classrooms in elementary schools served 45-60 children in FY00.	Family Support System, Family Symposium Planning, Parent Navigator Support Groups, Community Stabilization Specialists, ITC Facilitators Group, Community MICA Team	Human Services Advisory Board, Crisis Response Workgroup, Agency Resource Guide which lists Walla Walla County service providers. Walla Walla Human Services sponsors several trainings each year. Human Services staff attend many cross system groups that look at gaps in services and work with community groups to structure plans to fill those gaps. Parent Navigator program to support and guide parents who have children with multi-system needs through services. Oversee Street Youth Services that provides outreach and referral for youth from a non-traditional approach.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
The Rogers Counseling Center	0	Usually have 15-20 kids who have teams involved at various stages of care	No services in schools except for crisis, we do pick-up kids from school, transport for groups and return to school or home. Two-day treatment groups for school age kids located at the mental health center.	None	Regular attendance at comminuty meetings focused on children, regular contact with school counselors and pedistricians; participation in "at risk" teams with DCFS, regular contact with DCFS.
Benton and Franklin Counties Crisis Response Unit	0	N/A	N/A	N/A	N/A
Catholic Family and Child Services	0	0	2 programs., ATTAH and Therapeutic Kindergarten jointly serve 20 children at one time.	3 group, each serve about 12 families at one time (ATTACH group, Valley Intervention Program and the Yakima Nation Family Counseling Program.	Approximately 12 activities per year with various "high risk" groups.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Central Washington Comprehensive Mental Health	50	All children and their families are treated within a multidiscipline treatment team. Every effort is made to invole external agencies i.e., schools, medical service etc., when developing treatment plans. When a child or family present at significant risk, acute care services are wrapped into treatment to ensure any crisis developed are managed in a timely and effective manner consistent with the treatment plan.	A school based team provides preventation and intervention services to Yakima schools.	"Strong Families" model of parent training occurs on regular basis.	CWCMH collaborates with other community services i.e., Children's Villiage, EPIC, to ensure service delivery option are avaiable for children and families. Developed a community collaborative model (schools, and law enforcement) to help schools deal with violrnce.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty services
Garfield County Human Services	0	Varies usually have 1-3 kids w have teams at various stages of care.	Full-time counselor in schools doing assessments, individuals and groups.	None	Regular attendance at community meeting fouces on children, regular contact with school counselors and pediatricians; participate in "at risk" teams with DCFS. Contact with juvenile probation. Collaboration with Public Health Dept./Substance Abuse prevention staff around children's issues.
Inland Counseling Network	0	1	Contract with DCFS for Alternative Response Services to schools and community.	None	Contract with DCFS tpo provide Family Reconcilation Services and Family Preservation Services.
Lourdes Counseling Center	0	Up to 20	30 clients	Parent education classes	Case management in community
Lutheran Social Services	4	0			CHAP program/also in-home program puts capacity at 18.
Skamania County Counseling Center	0	12	0	0	Provide on-going clinical supervision for children 0-5 for Rock Creek Therapeutic Developmental Day Care. Other outreaches occur 2 times per year.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natur support membe in addition to t nuclear famil	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty servic
Southeast Children's Home Society of Washington	6	45 informal tea working toward formalizing this process. 4 staff are ITC trained currently.	10 formal school based programs involving 7 schools. Day treatment community based programs include, recreation programs, and mental health invidual and group therapy.	23 various parent focused groups that occur at different times through-out the year. They include parent education, and parent groups.	Case management for high-risk children and families. 24-hour on-call crisis response avaiable.
Sunderland Family Treatment Services	0	40	0	Parenting Groups	
Yakima Valley Farmworkers Migrant Health Clinic	17	All children and their families a provided with treatment withi multidisciplinar team with involement of formal, informal and natural supports.		3	Monthly educational presentations to the community; majority of services provided are out in the community; Children's crisis team for large geographic area (Yakima County).

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities, supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Whitman County Counseling Services	One program, 4-10 children placed per month.	0	13 districts in the county. Case manager/therapist visits each district each week.	Therapeutic Respite Home Outreach, traveling parent support group, parent education classes.	School based child case manager/therapists, specialized assessments for violence in conjunction with prosecutor's office, juvenile services, DCFS/CPS, school admin. And psychologist. WCCS satelite offices located in Tekoa, Garfield, and Colfax. Independent living skills program, summer group for adjudicated youth.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Walla Walla County Human Services		Provide ITC on-going training and certification. Assist in development of ITC teams in the community. Mental Health "classrooms" in elementary schools served 62 children in FY 98-99. Parent and Community team (PACT) and Adult Resource Teams. Currently seeking grant for a Parent Navigator to provide peer support to parents of school-age children served by multiple systems.	10 formal school based programs involving 7 schools. Involved in community based day treatment programs that include recreation programs and mental health individuals and group therapy.	Family support system, Family symposium planning.	Human Services Advisory Board, Crisis Response Workgroup, Agency Resource Guide which lists Walla Walla County Service providers. Walla Walla Human Services sponsors several trainings each year.

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King						
Asian Counseling and Referral Services				Uses Children's Hospital for day treatment services.	Provides information and training services to the community.	Minority Population Consultations to other King County RSN Providers.
Children's Hospital and Medical Center				Child/Adolescent Day Treatment services provided at main location (Children's Hospital). Summer Programs offering day – treatment for deaf and autistic children.	Prime Time Project. Services to locally detained high risk youth and youth with co-occurring disorders under the jurisdiction of the King County Juvenile Drug Court Provides information and training services to the community.	Main location is located at Children's Hospital, which features a full range emergency room with psychiatric back up. Offers specialty services to deaf/hearing impaired children Offers specialty services to autistic children

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty service
Community Psychiatric Clinic		Child/ Adolescent Acute Diversion Program. Intensive, short-term mental health services for children and youth at immediate risk of hospitalization.		Child Adolescent Day Treatment Program. Provides a range and mix of planned and structured serves. Located at Ryther Child Center.	Provides information and training services to the community Orion Center for Homeless Teens
Community House	Services for adults, only	Services for adults, only	Services for adults, only	Services for adults, only	Services for adults, only
Consejo Counseling					Provides information and training services to the community Minority Population Consultations to other King County RSN Providers.
Mentor Health Northwest	Subcontracts for foster care with individuals within the county.				Provides information and training services to the community
Harborview Mental Health Center	Utilizes Children's Hospital for these services. See Children's Hospital	Utilizes Children's Hospital for these services. See Children's Hospital	Utilizes Children's Hospital for these services. See Children's Hospital	Utilizes Children's Hospital for these services. See Children's Hospital.	Utilizes Children's Hospital for these services. See Children's Hospital.

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Highline-West Seattle Mental Health				Services offered in elementary schools, only	Provides information and training services to the community.	
North Central						
Community Counseling Services of Adams County	0	8	School based child specialist	0		Hispanic case manager
Grant Mental Health	0	14	Case manager 16 hrs./wk. in middle school.	Once per six weeks parenting skills group	Job Corps 8 hrs./wk. Annual events: Career day, Hispanic Conference, Wellness Days	Hispanic Children's Case Management Program; Children's Hospital Alternative Program

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Okanogan Community Counseling Services	0	15	0	0	0	Childrens Hospital Alternative Program and Childrens Intensive Community Support Program
Northeast Washington						

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities	Other defined specialty services
Ferry County Community Services	3	0	3 schools services 1 day a week.	1 parenting class held in Inchelium. Monthly socialization group for child clients and their parents	Kids Night Out Prevention services for at risk youth	
Lincoln County Counseling Center	3	1	Provider counselors at schools 2 days	1 parenting group held weekly.		
Pend Oreille County Counseling Services	0	0	Counselors housed at each of the county's 3 school districts 5 days per week. The provider's clubhouse will be available to child clients during the summer.	Parenting classes planned for this summer		

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Stevens County Counseling Services	0	13	No school based services offered	Parent education done individually.	New staff position, Program Aide, who provides adjunct services to children and families in their homes.	
North Sound						

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities	Other defined specialty services
Catholic Community Services	17	2		Best Self – Parent Support Sessions at 2 local elementary schools during summer sessions	ADHD Parent Education Class, "1-2-3 Magic" (behavior management class), "Parents & Preschoolers", "Preventing [illegible]", "Grandparents as Parents Support Group", "Parent Connections", "Parenting After Violence", Sexual Abuse Recovery Group [illegible] children and non offending parents; "Positive Discipline" [illegible] workshop		Supervised Visitation and/or Exchange Program, Transitional Housing (ages 18-21), Behavioral Rehabilitation Services, Family Preservation Services, Intensive Family Preservation Services
Community Mental Health Services	Island [illegible]	Island [illegible] Skagit [illegible]		On site counseling services – Skagit Co.	Skagit Co. "Parents Respect" support group, "Getting [illegible] Family [illegible]	Therapeutic Child Development Program, Headstart, Migrant Headstart, Functional Family Therapy for Juvenile Probation, Family Preservation Services, Intensive Family Preservation Services
Sea Mar	0	0	0	On site counseling services – Snohomish Co. schools	Parent Support Groups in Sno. & Whatcom Counties for Hispanic, monolingual, and farm workers	[illegible] camp outreach in Skagit & Whatcom Counties. Youth groups to address issues of assimilation, acculturation & adaptation.

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Whatcom Counseling and Psychiatric	0	0	15	"Families That Care" (stress mgmnt, etc.), "Parenting Skills", "Latino Communication"		
Peninsula						
Kitsap Mental Health Services	6 Homes	12 Beds	7.2 teams/per yr 14 slots in 1 Day Tx Program 1 Anger Mngmnt group	2 groups	*Crisis Response to schools and Juvenile Detention as needed *Hospital Diversion Services *YFU (Teen, F&F) *Drug Court Attendance zone MICA Service *ESD School Based program	
Peninsula Community Mental Health Center	None	None	2.5 FTE 1 Activity per day	1 group	*Crisis Response to schools and Juvenile detention as needed *Headstart *ESD School based program	

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Jefferson Mental Health Services	None	None	4 teams/day Day Tx - Not available	1 group	*Crisis Response *ESD school-based programs	
West End Outreach Services	None	None	5 teams/day 10 slots	1 group	* Telehealth access to university and hospital based [illegible] * Crisis Response * ESD school based program	
Pierce						
Comprehensive Mental Health	34 CHAP beds available countywide	267 (unduplicated) over a three month period (1/1/00-3/31/00)	Provided services to 671 children at a school location during the period 1/1/00-3/31/00 (unduplicated)		Clinical follow-up provided to 611 children during the three month period (1/1/00-3/31/00)	Stigma reduction activities at elementary schools provided by Comprehensive MH board members.

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Greater Lakes Mental Health Foundation	0	215	Provided services to 350 children at a school location.	Parent Connector Project school based MH treatment and substance abuse prevention program targeting at-risk children and family. Serve approx. 24 families at a time.	Clinical follow-up provided to [illegible] children	Assessment and stabilization services at the juvenile detention facility. Suicide risk assessments and MH support to jailed youth (1.5 FTEs).
Good Samaritan Behavioral Healthcare	0	262	Good Sam School maintains the capacity to serve 18 students. Provided services to 159 children at a school location.		Clinical follow-up provided to 547 children	

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Catholic Community Services	0	164	Provided services to 129 children at a school location.	Employ three parents to provide advocacy and natural support to parents of children served.	Clinical follow-up provided to [illegible] children	Intensive homebased services (90 day intervention) provided to an average of 18 children per month. Wraparound services provided to an average of 85 children per month.
Puyallup Tribal Health Authority	0	25	Provided services to 56 children at a school location	Parent partner funded through A Common Voice to work specifically with PTHA families (10 hrs/wk)	Clinical follow up provided to 13 children	Prevention and intervention services addressing domestic violence within the Native American community.
Sea Mar Community Health Center	0	3	Provided services to 10 children at a school location.		Clinical follow-up provided to 26 children	

Other specialty services:

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	S S	Based es/Day ment vices	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty
Southwest						
Southwest RSN	None funded by the RSN.	During the past year, we identified 121 children for whom there is an MH activity code entry for a PAC team having met one or more times. This represents approximately 13% of the children served in this RSN.		contractors who ve children vide on-site nseling and port at area ools. There is formal day atment program children. There periodic use of day treatment gram in Clark nty.	LCMHC receives United Way funding to provide parent groups. CBS is not currently providing groups specifically for parents. LINK regularly schedules both group and individualized activities for parents.	All contractors who serve children provide outreach and engagement services.

A Common Voice for Pierce County Parents, a parent run agency, is under contract with support groups throughout the County on a regular basis. Support services for homeless Tacoma School District's Tone School and Campfire's Building Bridges program.

RSN to provide parent support and advocacy services. They hold a number of parent lren and families and outreach services for homeless teens are provided by the

Youth and Family LINK program serves 30 children (12-16) who have multi-system needs. Focus is outreach and engagement as well as linking child to family and natural supports in community. This program is jointly funded by the RSN and DCFS.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	S	I Based ces/Day tment vices	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities	Other defined specialty serv
Spokane							
Catholic Charities	N/A			A uol based ices. we	N/A Parent advocates.	Numerous activities	N/A None
Children's Home Society	None				Parent support group	Limited activities	None
Excelsior Youth Center	6 short-term residential stabilization beds.			uol based ices.	None	Limited activities	None
Family Service Spokane	None			uol-based ices.	None	Limited activities Numerous activities	None Sexual Assault Center. Treatment Foster Care.
Grief Counseling Program	None			we	None	Numerous activities	MH/CD treatment for adolescents.
Lutheran Social Services	38 Therapeutic foster care beds.						
N.A.T.I.V.E. Project	None						

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities	Other defined specialty services
Sacred Heart Medical Center	None		Hospital-based day treatment, 10 slots.	Parent support group	None	None
Spokane Mental Health	None		School-based services. Three school-based day treatment programs: MAP School, 26 slots, Middle MAP School, 12 slots, Bridge School, 35 slots.	None	Numerous activities	Services to juvenile justice system. Services to homeless. MH/CD treatment for adolescents. Disaster response services.
Saint Luke's Rehabilitation Institute	None		None	None	Limited activities	None
Tamarack Center	None		Day treatment services	Parent advocate	Limited activities	None
Thurston Mason						
Behavioral Health Resources	1:29	9	4**	50	36 Thurston 14 Mason	18 Thurston 60 Mason

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Evergreen Counseling Center	1:27	5		10	21 Thurston 8 Mason	65 Presentations
South Sound Mental Health	1:25	1		70	10 Thurston 3 Mason	6 (Total)
Providence St. Peter Hospital*	N/A	2		N/A	N/A	N/A

*Note: Providence St. Peter does not specialize in child-ren's services.

**Note: Licensed by BHR as treatment foster c but used only as crisis respite and available to a TMRSN

***Note: Individual and group treatment provided in this # of schools. There are no organized day treatment services per se.

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities Other defined specialty services
Timberlands					
Cascade Mental Health Care	There are no residential or treatment foster care homes	CMHC currently has five active ITC teams	School based services are offered in all 17 districts of Lewis County.	CMHC has a parent advisor on the Children's Oversight Committee. CMHC offers *Parent Nights* sponsored by at least 1 school district focusing on child/adolescent concerns. CMHC offers parent support groups at least twice a year and is working toward developing a parent led *Relatives As Parents Support Group*	CMHC actively participates in the [illegible] through in school counseling; CPS review teams; Parent Trust Board; Pope's House; Family Resource Center in school; crisis services to different school districts following critical incidents of death & suicide; development of Crisis Response Services with 2 school districts; PTA parent education

Regional Support Network (RSN)	Residential Capacity # of Treatment Foster Care Homes	# of ITC Teams with informal/natural support members in addition to the nuclear family	School Based Services/Day Treatment Services	Parent Groups or Activities supported by the RSN or providers	Outreach and Engagement Activities	Other defined specialty services
Willapa Counseling Center	0	14	School based services provided in four school districts	0	Through school contacts in 4 districts	
Wahkiakum County MHS	0	4 (forming)	School based services provided in two school districts, Involved in leadership initiative in schools (work with natural helpers, development of mentors). Adventure Education services provided for schools	Consultation to Family Center's parenting groups; beginning co provision of weekly parenting education & support group	Through coordination with St. James Family Center services; through mental health screenings done for Headstart and ECEAP	On site services at Juvenile Detention as needed

HCFA Report for Special Needs Children (Medicaid Eligible and Under 21)

(July 2000 - December 2000)

Created on 4/2[illegible]/2001

Special Needs Category	Regional Support Network	Total Consumers (Unduplicated)	Consumers: Total (Unduplicated)	Consumers: Children's Long Term Care (CLIP)	Consumers: Free Standing Evaluation & Treatment Center	Consumers: Community Hospital	Consumers: State Hospital	Inpatient In-resident Bed Days: Total	Inpatient In-resident Bed Days: Children's Long Term Care (CLIP)	Inpatient In-resident Bed Days: Free Standing Evaluation & Treatment Center	Inpatient In-resident Bed Days: Community Hospital	Inpatient In-resident Bed Days: State Hospital	Inpatient: Admissions	Inpatient: Discharges	Inpatient: Discharges Served within 7 Days	Inpatient: Re-admissions within 30 Days	Outpatient Consumers: Total (Unduplicated)	Outpatient Consumers: Received Non-acute Services	Outpatient Consumers: Received Acute Services	Outpatient Service Hours: Total	Outpatient Service Hours: Non-Acute	Outpatient Service Hours: Acute
Statewide Total	Statewide Total	19,899	715	129	59	531	50	26,607	14,597	443	8,129	2,438	712	708	290	49	19,704	18,906	2,460	321,563	308,597	12,966
Statewide Total	Unassigned	21	21	16		1	[illegible]	[illegible]	1,85[illegible]		1	379	15	11						0		
Statewide Total	Spokane RSN	1,601	66	16		67	8	4,344	2,389		661	294	83	81	[illegible]	[illegible]	[illegible]	1,475	196	40,098	39,575	523
Statewide Total	King RSN	5,262	175	29	12	141	6	5,466	2,659	173	2,527	111	189	192	91	20	5,212	[illegible]	903	100,994	97,328	3,666
Statewide Total	North Sound RSN	2,953	154	30	7	126	4	6,253	3,570	75	2,243	365	149	147	53	9	2,920	2,640	653	30,009	27,343	2,666
Statewide Total	Greater Columbia RSN	1,883	40	2		37	2	830	183		488	159	42	41	8	2	1,868	1,819	142	17,666	17,346	320
Statewide Total	North Central RSN	435	14	1	1	10	3	470	161	2	186	121	12	12	6		432	385	163	4,882	4,638	244
Statewide Total	Northeast RSN	255	10	2		9		271	174		97		11	11	5	1	250	247	20	2,373	2,288	85
Statewide Total	Peninsula RSN	931	62	1	37	26	2	1,528	13	154	350	30	71	67	29	4	922	877	210	17,852	15,617	2,234
Statewide Total	Southwest (Cowlitz) RSN	606	27	1		25	2	424	58		318	47	26	26	12		[illegible]	598	17	3,573	3,550	23
Statewide Total	Thurston / Mason RSN	889	14	3		11		420	267		153		13	13	5		[illegible]	[illegible]	86	8,189	8,013	177
Statewide Total	Pierce RSN	2,601	69	19	2	44	8	3,445	2,219	39	664	523	57	60	23	[illegible]	2,579	2,401	426	43,274	41,501	1,773
Statewide Total	Grays Harbor RSN	413	[illegible]	1		3	1	312	182		51	[illegible]	[illegible]	[illegible]	[illegible]		412	397	32	2,485	2,394	91
Statewide Total	Clark RSN	1,433	28	7		21	5	1,032	68[illegible]		281	71	25	25	20	2	1,430	1,399	90	41,270	41,165	105
Statewide Total	Chelan / Douglas RSN	336	7	1		6		164	87		77		6	7	2		334	321	47	5,712	4,718	995
Statewide Total	Timberlands RSN	465	10	2		5	3	413	96		52	265	8	10	5	1	463	442	46	3,186	3,121	64

Mental Health Division
Dept. of Social and Health Services
State of Washington
P.O. Box 45320, Olympia, WA 98504-5320

HCFA Report for Special Needs Children (Medicaid Eligible and Under 21)

[illegible] Period: [illegible]

Created on [illegible]

Special Needs Category	Regional Support Network	Total Consumers (Unduplicated)	Consumers: Total (Unduplicated)	Consumers: Children's Long Term Care (CLIP)	Consumers: Free Standing Evaluation & Treatment Center	Consumers: Community Hospital	Consumers: State Hospital	Consumers: Total	Inpatient In-residential Days: Children's Long Term Care (CLIP)	Inpatient In-residential Days: Free Standing Evaluation & Treatment Center	Inpatient In-residential Days: Community Hospital	Inpatient In-residential Days: State Hospital	Inpatient: Admissions	Inpatient: Discharges	Inpatient: Discharges Served within 7 Days	Inpatient: Re-admissions within 30 Days	Outpatient Consumers: Total (Unduplicated)	Outpatient Consumers: Received Non-Acute Services	Outpatient Consumers: Received Acute Services	Outpatient Service Hours: Total	Outpatient Service Hours: Non-Acute	Outpatient Service Hours: Acute
Blind/Disabled	Statewide Total	2,153	161	30	16	102	28	7,449	3,911	[illegible]	1,821	1,444	159	154	61	14	2,111	2,028	345	54,449	51,462	2,987
Blind/Disabled	Unassigned	6	6	5			1	778	708			70	5	2						0		
Blind/Disabled	Spokane RSN	179	20	3		13	5	842	549		107	176	20	17	6	4	178	159	26	7,083	7,007	76
Blind/Disabled	King RSN	556	38	6	5	25	5	1,527	907	0	486	54	36	41	25	5	549	542	73	16,441	15,795	646
Blind/Disabled	North Sound RSN	279	35	6	4	25	3	[illegible]	[illegible]	9	497	[illegible]	[illegible]	[illegible]	19		272	252	80	3,711	3,389	322
Blind/Disabled	Greater Columbia RSN	247	[illegible]			6	1	229			76	153	8	8	[illegible]		[illegible]	[illegible]	29	2,619	2,536	82
Blind/Disabled	North Central RSN	43	5	1	1	2	2	353	161	2	80	110	3	4	2		47	[illegible]	19	489	460	29
Blind/Disabled	Northeast RSN	22	1			1		11			11		1	1			21	21	2	324	313	10
Blind/Disabled	Peninsula RSN	84	19	1	6	4	1	254	14	1	58	21	14	11	7	1	82	79	19	2,282	1,716	566
Blind/Disabled	Southwest (Cowlitz) RSN	75	6	1		5	1	241	58		162	11	6	5	4		74	73	5	656	647	9
Blind/Disabled	Thurston / Mason RSN	107	1	1		2		46	12		34		4	3	2		106	105	13	1,602	1,561	41
Blind/Disabled	Pierce RSN	302	14	3		9	1	773	341		144	288	14	13	4	2	208	178	50	7,823	7,599	224
Blind/Disabled	Grays Harbor RSN	42	3	1		1	1	224	182		26	16	2	2			42	40	4	364	304	59
Blind/Disabled	Clark RSN	161	8	1		6	[illegible]	[illegible]	[illegible]		85	38	7	[illegible]	[illegible]		168	157	16	8,685	8,668	17
Blind/Disabled	Chelan / Douglas RSN	32	1			1		20			20		1	[illegible]			[illegible]	31	5	1,839	950	890
Blind/Disabled	Timberlands RSN	52	[illegible]	1		3	2	308	27		35	246	5	7	4	1	56	48	8	532	517	15

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HCFA Report for Special Needs Children (Medicaid Eligible and Under 21)

(July 2000 - December 2000)

Special Needs Category	Regional Support Network	Total Consumers (Unduplicated)	Consumers: Total (Unduplicated)	Consumers: Children's Long Term Care (CLIP)	Consumers: Free Standing Evaluation & Treatment Center	Consumers: Community Hospital	Consumers: State Hospital	Inpatient Bed Days: Total	Inpatient Bed Days: Children's Long Term Care (CLIP)	Inpatient Bed Days: Free Standing Evaluation & Treatment Center	Inpatient Bed Days: Community Hospital	Inpatient Bed Days: State Hospital	Admissions	Discharges	Discharges Served within 7 Days	Re-admissions within 30 Days	Outpatient Consumers: Total (Unduplicated)	Outpatient Consumers: Received Non-acute Services	Outpatient Consumers: Received Acute Services	Outpatient Service Hours: Total	Outpatient Service Hours: Non-Acute	Outpatient Service Hours: Acute
Foster Care and Adoption Support	Statewide Total	2,741	141	[illegible]	[illegible]	[illegible]	1	5,355	3,057	421	1,866	11	138	143	57	[illegible]	[illegible]	2,619	395	73,242	69,664	3,578
Foster Care and Adoption Support	Unassigned	2	2	1		1		25	24		1		2	1						0		
Foster Care and Adoption Support	Spokane RSN	232	11			11		164			164		12	11	6		[illegible]	216	28	6,533	6,476	57
Foster Care and Adoption Support	King RSN	833	39	9		32		1,379	772		606		45	45	23	2	[illegible]	821	87	28,388	26,340	2,049
Foster Care and Adoption Support	North Sound RSN	386	31	11		26		[illegible]	[illegible]		441		28	[illegible]	4		[illegible]	353	75	5,845	5,516	329
Foster Care and Adoption Support	Greater Columbia RSN	231	[illegible]	1		11		248	53		195		[illegible]	[illegible]	1		225	218	22	3,391	3,342	49
Foster Care and Adoption Support	North Central RSN	34	2			1	1	26			15	11	2	2	2		94	13	11	745	720	25
Foster Care and Adoption Support	Northeast RSN	19	1	1		1		18	4		14		2	1	1	1	68	53	3	309	283	26
Foster Care and Adoption Support	Peninsula RSN	153	19		10	9		526		194	132		18	16	9	2	151	143	7	6,413	5,918	495
Foster Care and Adoption Support	Southwest (Cowlitz) RSN	49	2			2		31			31		2					[illegible]	2	274	272	2
Foster Care and Adoption Support	Thurston / Mason RSN	136	6	1		5		[illegible]	[illegible]		53		4	4			[illegible]	128	13	1,394	1,364	30
Foster Care and Adoption Support	Pierce RSN	424	15	6	1	8		[illegible]	684	27	115		6	14	7	1	416	893	74	12,493	11,999	493
Foster Care and Adoption Support	Grays Harbor RSN	34															34	31		275	272	3
Foster Care and Adoption Support	Clark RSN	146	1	1				29	29								[illegible]	143	9	5,625	5,616	10
Foster Care and Adoption Support	Chelan / Douglas RSN	37	3					[illegible]			38		3	3	1		39	35	4	1,093	1,089	4
Foster Care and Adoption Support	Timberlands RSN	68															68	65	4	463	458	5

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HCFA Report for Special Needs Childr (Medicaid Eligible and Under 21)

(July 2000 - Dec 2000)

Created on 4/25/2001

Special Needs Category	Regional Support Network	Total Consumers (Unduplicated)	Consumors: Total (Unduplicated)	Consumors: Children's Long Term Care (CLIP)	Consumors: Free Standing Evaluation & Treatment Center	Consumors: Community Hospital	Consumors: State Hospital	Consumors: Total	Inpati In-re: Children's Long Term Care (CLIP)	l Bed Days: Treatment Center	l Bed Days: Community Hospital	l Bed Days: State Hospital	Admissions	Discharges	Discharges Served within 7 Days	Re-admissions within 30 Days	Consumers: Total (Unduplicated)	Consumers: Received Non-acute Services	Consumers: Received Acute Services	(Unduplicated) Service Hours: Total	Service Hours: Non-Acute	Service Hours: Acute
Title V	Statewide Total	182	1	0	0	1	0	40			40		1	1	0	0	182	180	12	4,398	4,347	51
Title V	Unassigned																			0		
Title V	Spokane RSN	19															19	19	2	562	559	3
Title V	King RSN	31															31	30	4	738	725	14
Title V	North Sound RSN	19															[illegible]	19	3	286	257	29
Title V	Greater Columbia RSN	47															47	47	1	920	919	1
Title V	North Central RSN	1															1	1	1	67	65	2
Title V	Northeast RSN	2															2	2		38	38	
Title V	Peninsula RSN	4															4	4		13	13	
Title V	Southwest (Cowlitz) RSN	12															12	12		35	35	
Title V	Thurston / Mason RSN	7															7	7		55	55	
Title V	Pierce RSN	24	1			1		40			40		1	1			24	23	1	1,086	1,082	4
Title V	Grays Harbor RSN	4															4	4		27	27	
Title V	Clark RSN	8															8	8		506	506	
Title V	Chelan / Douglas RSN	3															3	3		34	34	
Title V	Timberlands RSN	7															7	7		33	33	

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HCFA Report for Special Needs Children (Medicaid Eligible and Under 21)

[illegible] December 2000

Special Needs Category	Regional Support Network	Consumers: Total Consumers (Unduplicated)	Consumers: Total (Unduplicated)	Consumers: Children's Long Term Care (CLIP)	Consumers: Free Standing Evaluation & Treatment Center	Consumers: Community Hospital	Consumers: State Hospital	Inpatient In-resident Bed Days: Total	Inpatient In-resident Bed Days: Children's Long Term Care (CLIP)	Inpatient In-resident Bed Days: Free Standing Evaluation & Treatment Centre	Inpatient In-resident Bed Days: Community Hospital	Inpatient In-resident Bed Days: State Hospital	Inpatient: Admissions	Inpatient: Discharges	Inpatient: Discharges Served within 7 Days	Inpatient: Re-admissions within 30 Days	Outpatient Consumers: Total (Unduplicated)	Outpatient Consumers: Received Non-Acute Services	Outpatient Consumers: Received Acute Services	Outpatient Service Hours: Total	Outpatient Service Hours: Non-Acute	Outpatient Service Hours: Acute
In Need of MH Services - none of the above	Statewide Total	14,949	422	69	33	325	25	13,983	2,629	249	4,442	983	415	411	152	34	14,823	14,188	1,760	191,911	185,542	6,369
In Need of MH Services - none of the above	Unassigned	13	11	10			3	1,430	1,327			103	8	8						8		
In Need of MH Services - none of the above	Spokane RSN	1,187	55	13			3	2,343	1,940		390	113	31				1,365	1,096	150	26,456	26,067	390
In Need of MH Services - none of the above	King RSN	4,666	101	14	7	26	1	2,560	975	93	1,435	57	103	106	45	8	3,829	[illegible]	201	55,986	55,015	971
In Need of MH Services - none of the above	North Sound RSN	2,279	88	13	3	76	1	2,905	1,351	45	1,305	104	88	91	28	9	2,261	2,026	497	20,260	18,273	1,987
In Need of MH Services - none of the above	Greater Columbia RSN	1,387	23	1		21	1	353	130		217	6	21	24	5	1	1,439	1,349	93	10,870	10,682	188
In Need of MH Services - none of the above	North Central RSN	357	7			7		94			94			7	2		354	313	102	3,582	3,393	189
In Need of MH Services - none of the above	Northeast RSN	114	5			7		242	170		72		4				317	298	17	1,741	1,692	49
In Need of MH Services - none of the above	Peninsula RSN	695	34		22	13	4	245		105	140	0	39	37	13	3	699	675	166	9,157	7,984	1,173
In Need of MH Services - none of the above	Southwest (Cowlitz) RSN	476	19			19	1	161			125	36	18	19	8		473	430	10	2,629	2,616	13
In Need of MH Services - none of the above	Thurston / Mason RSN	632	5	1		4		103	103		25		5	4	3		653	614	50	5,174	5,069	105
In Need of MH Services - none of the above	Pierce RSN	1,869	42	10	1	28	5	1,805	1,194	12	585	209	34	[illegible]	[illegible]		[illegible]	[illegible]	302	22,387	21,331	1,055
In Need of MH Services - none of the above	Grays Harbor RSN	336	4			3	[illegible]	96			25	61	3	3	2		336	312	26	1,842	1,814	28
In Need of MH Services - none of the above	Clark RSN	1,121	19	5		15	2	543	338		196	93	18	16	11	2	1,119	1,094	62	26,887	26,809	78
In Need of MH Services - none of the above	Chelan / Douglas RSN	265	3	1		2		106	82		24		2	2	1		264	252	18	2,762	2,661	101
In Need of MH Services - none of the above	Timberlands RSN	343	4	1		2	1	186	69		17	19	3	3	1		[illegible]	[illegible]	34	2,178	2,134	44

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Summary of Capacity to Serve Children with Special Needs

Geographic Distribution of PCPs

Statewide: Service providers are concentrated in urban areas. Many PHPs have out-stationed mental health workers in schools in rural areas to provide services at the school. All the RSNs meet clients out of the office.

Changes: Two of the larger RSN/PHPs have made changes in capacity by adding new providers. One RSN/PHP has changed providers.

Ratio of PCPs to Consumers

Statewide: The average ratio of PCPs to Consumers continues to hover around 9 PCP's to every one hundred Consumers. This is consistent with last year's report. The ratios don't differ significantly in from the past year.

Changes: Three RSN/PHPs have had changes in staffing resulting in a slightly higher ratio of PCPs to consumers. This shift is slight, however, and doesn't effect the state average.

Type and Number of Specialists

Statewide:

Children's Specialists 708

Psychologists: 6

Psychiatrists: 34

Changes: Net gain of 22 children mental health specialists across the state.

Regional Support Network (RSN)	*Cross System Planning Group(s)* *(include frequency of meetings and participating agencies.)*
Chelan-Douglas RSN	-2 Ethnic Minority Parent Groups -Cross System meetings -Wrap-around Intake and Review Committee (WIRC) -Interagency Council -Ethnic Minority -C-D Children's Integiagency Council -DCFS RSN Provider network meetings -Children's Long-term Inpatient Program and Acute Care at Central WA Hospital -Sacred heart Medical Center -Center for Drug and Alcohol -Division of Developmental Disabilities -Therapeutic Foster Care Placement -Readiness To Learn -North Central RTL Consortium -Foster Care Adv. Subcommittee
Clark	Policy Council, Children's System of Care meets monthly - Includes all systems, DDD, Schools, Child Welfare, Substance Abuse, Mental Health, OPI - Mental Health Advisory Board, Head Start, Family Organization, Consumer Organization and Private Industries. System of Care Meetings (Child and Adult) Monthly. Training Committee Monthly Cultural Competency Committee Monthly Quality Management Committee Monthly
Garys Harbor	1. RSN/Interagency Children's Staffing Team (also functions as the local CHP Committee), meets the second and fourth Wednesday of each month approximately 4 children are staffed each month, average age range is 8-12. Participating agencies are DCFS, Juvenile Detention, Evergreen Counseling Center, Sexual Assault Coalition, Personal Service Providers, PROJID, True North, Public Health Special health care Needs Nurse, the Special education Directors for Aberdeen, Hoquiam, North Beach, Ocosta and Elma School Districts, and the Quinault Tribe. The Chehalis Tribe asked to be taken off staffing list. DDD is invited but does not attend. 2. The Children's policy team meets the first Wednesday of every other month September through May. It is composed of [illegible] policy making level of the various agencies. Members are DCFS, ESD 113, Juvenile Detention and Law Enforcement, Evergreen Counseling Center, Public Health, Coastal Community Med, Grays Harbor Children's Advocacy Center, Community Mobilization Task Force, The Quinault Tribe, Fairfax Hospital, Special Education Directors, School Counselors, and a private therapist. The Chehalis tribe has been invited but has declined to attend. DDD sent a representative to the last meeting for the first time

Regional Support Network (RSN)	*Cross System Planning Group(s)* *(include frequency of meetings and participating agencies.)*
Greater Columbia	
Walla Walla Human Services	Advisory Boards (CD,DDD, MH) once per month PACT Teams (Human Services, Community Agencies, and consumers) as needed Family Support System (Community members, Human Services, CPS, Schools, Juvenile Justice, and Public Health) once per month Community Planning and Assessment Workgroup(Human Services, mental health providers, and community agencies) once per month High Risk Consumer Triage (Human Services, Inland Counseling Network, Children's Home Society, St. Mary Medical Center, Crisis Response Team, therapists, caseworkers, and clinical supervisors) once per week Mental Health Providers Meeting (Human Services, St. Mary Counseling, Children's Home Society, and Inland Counseling Network) once per month Co-Occurring Disorders(Human Services, DOC, CSO, VA, St. Mary Counseling, Inland Counseling Network, Children's Home Society, and caseworkers) once per week
Inland Counseling- Dayton & Walla Walla	Community Team Meeting (Juvenile Justice, DCFS, schools, law enforcement, and CD) once per month Family Support System (Human Services, Children's Home Society, Public Health, and DCFS) once per month Parenting (Children's Home Society, Juvenile Justice, Service Alternatives, and Private Practitioners) monthly Community Connection (20-25 different entities) once per month Family Group Conferencing Community Development (DCFS, Inland Counseling Network, and Private Practitioners) once per month Domestic Violence/Sexual Assault Coalition (Law Enforcement, Prosecutor's Office, Victim Advocate, National Organization for Women, YWCA, Inland Counseling Network, and Court System) once per month Community Planning and Assessment Workgroup (Community Agencies, St. Mary Counseling, Human Services, Inland Counseling Network, and Children's Home Society) once per month
King	Children and Families Oversight Committee plans, initiates, and participates in the child serving system reform of the RSN. It is comprised of representatives from child welfare, juvenile court, education, private agencies, parent organizations, drug and alcohol services, etc.
North Central	Member of six county Gatekeepers Project with Area Agency on Aging. Quarterly six county meetings, twice yearly statewide meetingsInteragency meetings for Adams and Grant Counties Children's Hospitalization Alternative program. This group includes mental health providers, DCFS, schools, child welfare services, county juvenile services, police and administrators. ➢ Participation in the Adams/Grant County Senior Coalition. This group began in late 1998 and includes mental health providers, senior center, Area Agency on Aging, several nursing/assisted living facilities, and other groups oriented toward services for seniors. Monthly. ➢ Financial support of, and participation in, the People 4 People Consortium developing a social services six county Internet web site (http://4people.communityos.org/). Meets as needed. ➢ Participation with Adams/Grant County mental health providers and Prevention and Alcohol Recovery Center in developing detox alternatives. Meets as needed.

Regional Support Network (RSN)	*Cross System Planning Group(s)* *(include frequency of meetings and participating agencies.)*
North Central cont.	➢ Bridgeport schools coordinating care for children in the Bridgeport school system. Chelan-Douglas RSN, juvenile court, and DCFS also represented. Meets as needed. ➢ Participation in Department of Corrections conference coordinated through University of Washington. Focus was on coordination of care and identifying needs and resources, and networking for local DOC and mental health staff. ➢ Home & Community Services meetings with Region 1 administration and local area supervisor for coordination of services and updating our agreement. Meets as needed. ➢ Meeting with regional Juvenile Rehabilitation Administration to develop their quality improvement goals and network with local mental health and JRA staff. Meets as needed. ➢ Statewide RSN Administrators Group. Meets monthly ➢ Eastside RSN Consortium. Includes Eastern State Hospital and Mental Health Division. Has included DDD Region 1 and Sacred Heart Hospital as needed. Meets monthly at Eastern State Hospital. ➢ Colville Tribe. Meetings include Tribal Administration, Tribal Community Counseling Services, Tribal Drug and Alcohol Services, Tribal Social Services, four county mental health providers, North Central and North East RSN's. Meet approximately quarterly.
Northeast Washington	
Stevens County	Kids First - 2X per month- Stevens County Counseling, local law enforcement, DCFS, Rural Resources. C.P.T. - 2 X per month - Stevens County Counseling and DCFS P.A.C.T. - 1X per month - regional interagency meeting for childrens providers.
Pend Oreille County	C.P.T. - Monthly - All area providers to children P.A.C.T. - Monthly - NEWRESN MDT - w/schools when needed/requested Juvenile Diversion - counseling as referred Violence In Schools Committee - Monthly DCFS -- MDT's as requested Diversion Board
NEWRESN	P.A.C.T. Committee - Monthly meeting at NEWRESN offices of local children's services providers. Participants: [illegible] mental health providers, ESD 101, DCFS, juvenile court, Tribal providers, school staff.
Ferry County	DCFS - Monthly Meeting Schools, law enforcement, juvenile probation, public health.

Regional Support Network (RSN)	*Cross System Planning Group(s)* *(include frequency of meetings and participating agencies.)*
NEWRESN	P.A.C.T. Committee – Monthly meeting at NEWRESN offices of local children's services providers. Participants include DDD, mental health providers, ESD 101, DCFS, juvenile court, Tribal providers, school staff
Ferry County	DCFS - Monthly Meeting Schools, law enforcement, juvenile probation, public health.
North Sound	Skagit Co Children's Acute Care Coordination Team Participants - NSRSN, DCFS, DDD, Associated Provider Network Monthly meetings Mental Health/Group Care Providers Coordination Meeting Participants NSRSN, DCFS Associated Provider Network, DCFS group care providers Monthly meetings Associated Provider Network Children's Acute Care Planning Committee Participants Associated Provider Network, NSRSN, DCFS, JRA, ESD 189, DASA, DDD Meetings Monthly Bi-Monthly Title IV-E Planning Meeting Pafrticipants DCFS, NSRSN, JRS, ESD 189, tribal representatives Meetings Monthly Bi Monthly
Peninsula	
Kitsap Mental Health Services	Headstart groups- Monthly (during program year). Project Family on parenting groups for At Risk children youth. Monthly. Partnership for Children's Services Quarterly, enhance communication between all community child serving systems. Kitsap Shared Resources. Monthly, planning and [illegible] strategies for High Needs Children in community. Numerous interagency planning meetings around individualized children [illegible] relationships (DDD, DCFS, schools, juvenile justice, GAL, ancillary community providers)
Peninsula Mental Health Services	Peninsula Partnership- Quarterly, enhance communication between all community child serving systems. Headstart- Quarterly, program planning. First Steps- monthly consultation with Public Health program. Child Protection Team- weekly, round table with professional providers regarding CPS TRS family safety and legal issues. Jefferson School- daily, consultation services.
Jefferson Mental Health Services	Peninsula Partnership- Quarterly, enhance communication between all community child serving systems.
West End Outreach	Peninsula Partnership- Quarterly, enhance communication between all community child serving systems.
PRSN	Quarterly meetings: (DSHS Region [illegible] DDD, DCFS, Kitsap Shared Resources, Peninsula Partnership, & Partnership for Children's Services
Pierce	
SCSC Clinical Team	Weekly. RSN, MH providers, DCFS, DDD, juvenile court, Schoolid, CLIP facilities, parent
SCSC Administrative Team	Bi-monthly. RSN, DCFS, MH providers, DDD, juvenile court, School, CLIP facilities, parent

Regional Support Network (RSN)	*Cross System Planning Group(s) (include frequency of meetings and participating agencies.)*
Healthy Options Oversight Committee	Bi-monthly. MAA, RSN, Healthy Options Providers, Health Department
Interagency Coordinating Council	Monthly. Birth to six providers, including the State Division of Developmental Disabilities, early intervention preschools, Washington PAVE, Pierce County Developmental Disabilities Program, schools, ECEAP and Head start providers.
Coalition for communities, families and schools	Monthly throughout the County, include school district special education directors, MH provider directors/supervisors, A Common Voice parents and DCFS staff.
Southwest	
Children's Interagency Support Council (CISC)	CISC is a multi-system group of representatives from schools, juvenile detention, juvenile rehabilitation, children's services, [illegible] substance abuse treatment providers, mental health providers, and advocates. Facilitated by the RSN, this group meets monthly to authorize CLIP applications and actively participate in discharge planning for children who have been hospitalized out of county. CISC members also authorize the use of cross-system flex funds managed by the RSN and oversee certain services that have been designed for children with higher levels of need (e.g. LINK, DASA adolescent case management).
Children's Interagency Board (CIB)	CIB is a group of multi-system administrators (same systems as above) who have met for many years to resolve system issues. Although they no longer meet regularly, they continue to provide an informal network that trouble-shoots barriers to appropriate services for children with special need.
Planning Around the Customer (PAC) teams	PAC teams are planning teams specific to an individual child or family. PAC teams are formed when a child has multiple needs, when the parent requests one, and when other systems are critically involved in responding to the presenting issues. PAC teams can meet as often as every few d[illegible] or they can be limited to one or two major planning sessions. PAC teams involve the child, family, natural supports, mental health case manager, and other significant professionals in the life of the child.
A Child's Place (ACP)	ACP is a children's assessment center that was spearheaded by CIB. ACP is currently leading the community in early intervention and integrated treatment planning for specifically targeted children. A pilot project this fall will test all kindergarteners and first graders in one school district. An integrated approach to intervention and treatment will target those most likely to be disruptive and/or commit juvenile crimes. Current partners are ACP, SW RSN, Longview School District, DCFS, and Cowlitz County Juvenile Department.
Spokane	
Breakthrough	Meets monthly, parents, all major systems, most child serving non-profits, advocacy agencies.
Breakthrough Steering Committee	Meets as called, directors of DCFS, JRA, ICS, RSN, SCCSD, Disc. SH, AOA, Early Head Start
Transitions	Meets monthly. RSN, UBH, providers (school, outpatient, vocational, residential) serving young people, aged 16-23
CLIP	Meets monthly, RSN, UBH, two child psychiatrists, RSN provider representatives, intersystem representatives
Action for Youth	Meets monthly, RSN, UBH, RSN provider representatives, intersystem representatives serving children, aged 0-17
Family Support Program	Meets biweekly, RSN, UBH, SMH, DCFS, ICS, CHS, Casey Family Partners, CPT teams

Regional Support Network (RSN)	*Cross Syaytm Planning Group(s)* *(include frequency of meetings and participating agencies)*
ITC	Meets monthly, RSN, UBH, SMH, DCFS, JCS, Casey Family Partners, CPT teams
Cross system DD/MH planning	Meets monthly, RSN, UBH, DD county, providers, doctors
Thurston Mason	
CCCT	Meetings 3 time per month and additionally whenever necessary. Co Facilitated by DCFS and TMRSN. Local gate keeping (CLIP), Review Group Care packets, Consultation to Community, help establish ITC teams for severly emotionally disturbed children. Involves local schoold, juvenile Justice, local group homes, child serving agencies, Chemical Dependency, Local hopitals and [illegible] Developmental Disabilities and Publico.
PSPH/CD	Development of a crisis triage system.
DCFS	Meeting once per month.
Mentally Ill Juvenile Offender Project Development	Meet with Juvenile Justice once per month. Establish services for adjudicated and at risk juveniles who are severely mentally ill. Services will include diversion, referral, staff and family support, consultation and training.
Best Practice	Meet once per month with schools and Mental Health Providers regarding childrens services
Behavioral Health Resources	
Timberlands	
Cascade Mental Health Care	Children's Oversight Committee: Meets once a month. Includes CMHC, DCFS, JRA, Representatives from 3 school districts, and public health nurse East End Group (E. Lewis Co.): Meets once a quarter. Includes CMHC, East End school superintendents, hospital, clergy, and DCFS Family Support Center: Meets monthly. Includes CMHC, DCFS, Public Health, DD services, Centralia College, [illegible] Community Ed., Port of Centralia, Human Response Network, Hispanic Community Rep. Parent Trust: Meets monthly. Includes CMHC, Human Response Network, Centralia College ECEAP, DD, DCFS
Willapa Counseling Center	Children's Protection Team meets monthly in both north and south Pacific County (Mental health, DDD, DCFS, & others)
Wahkiakum County Mental Health	Chemical Dependency/Mental Health.... meets weekly. Children's Protective Team meets monthly (CD, Mental Health, DSHS, Prosecutor, Special Education, Health Dept., Foster Care) Law Enforcement/Mental Health meets monthly, includes Wahkiakum Co. Sheriff, WCMH, poss. WSP, Wahkiakum [illegible] ESD multidisciplinary staffing occurs weekly Multidisciplinary emergency response planning for schools, meets every few months.

Revised 7/12/01 Sandra Colegrove
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