



WISe Overview



T.R. Settlement Agreement (T.R.)

Systems of Care (SOC)

Wraparound with Intensive Services (WISe)

T.R. Settlement Agreement

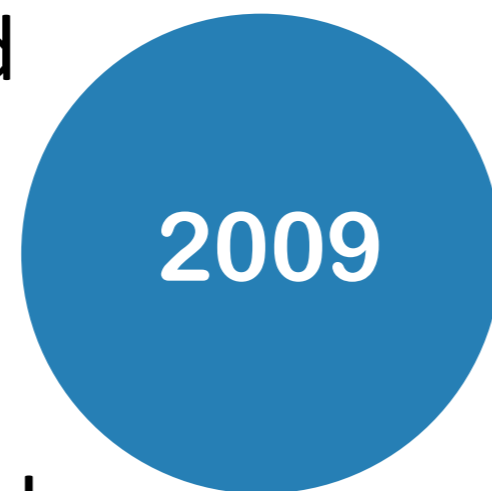


History

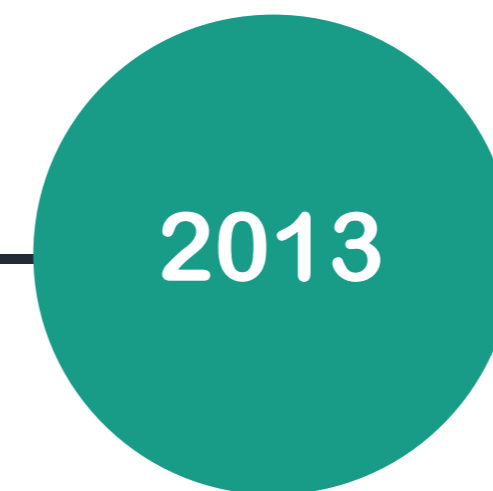


T.R. et al. v. Kevin Quigley and Dorothy Teeter - No. C09-1677 – TSZ
(Formerly T.R. v. Dreyfus & Porter)

Federal class action lawsuit filed in November 2009 against DSHS (and later the Health Care Authority) alleging inadequate availability of intensive mental health services for children and youth in home and community based settings.



The Agreement calls for a **new statewide program model** to be available within every county across Washington by June 30, 2018.



A Settlement Agreement was reached in December 2013.

For more information on the T.R. Settlement Agreement, visit:

<https://www.dshs.wa.gov/bha/division-behavioral-health-and-recovery/childrens-mental-health-lawsuit-and-agreement>



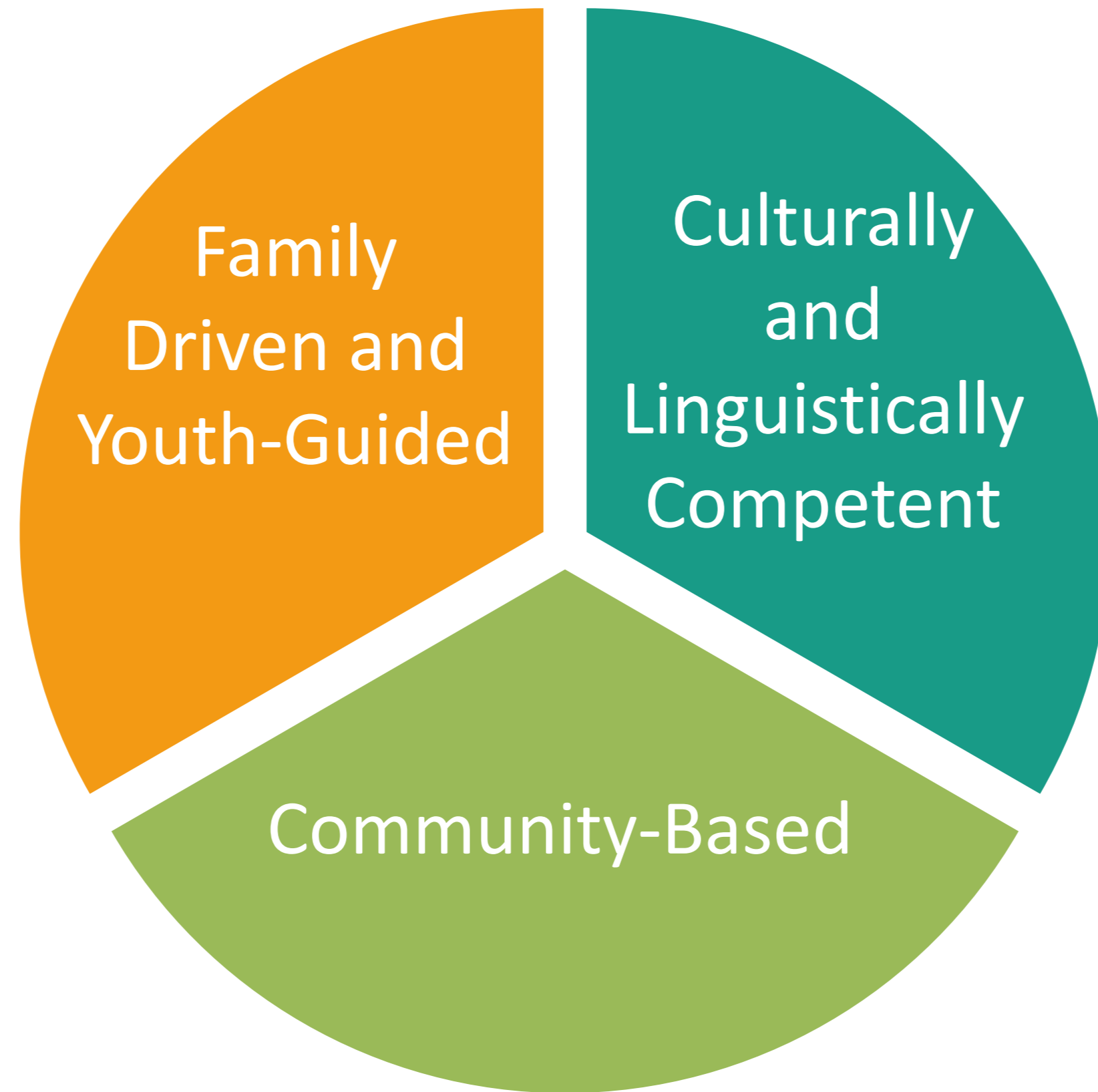
SYSTEMS OF CARE



What is Systems of Care?



Systems of Care Core Values



For more information on Systems of Care, visit:

<http://goo.gl/KJSNmm>



Washington SOC Goals



Infuse SOC values in all child-serving systems.



Expand and sustain effective leadership roles for families, youth and system partners.



Establish an appropriate array of services and resources statewide, including home and community-based services.



Develop and strengthen a workforce that will operationalize SOC values.



Build a strong data management system to inform decision-making and track outcomes.

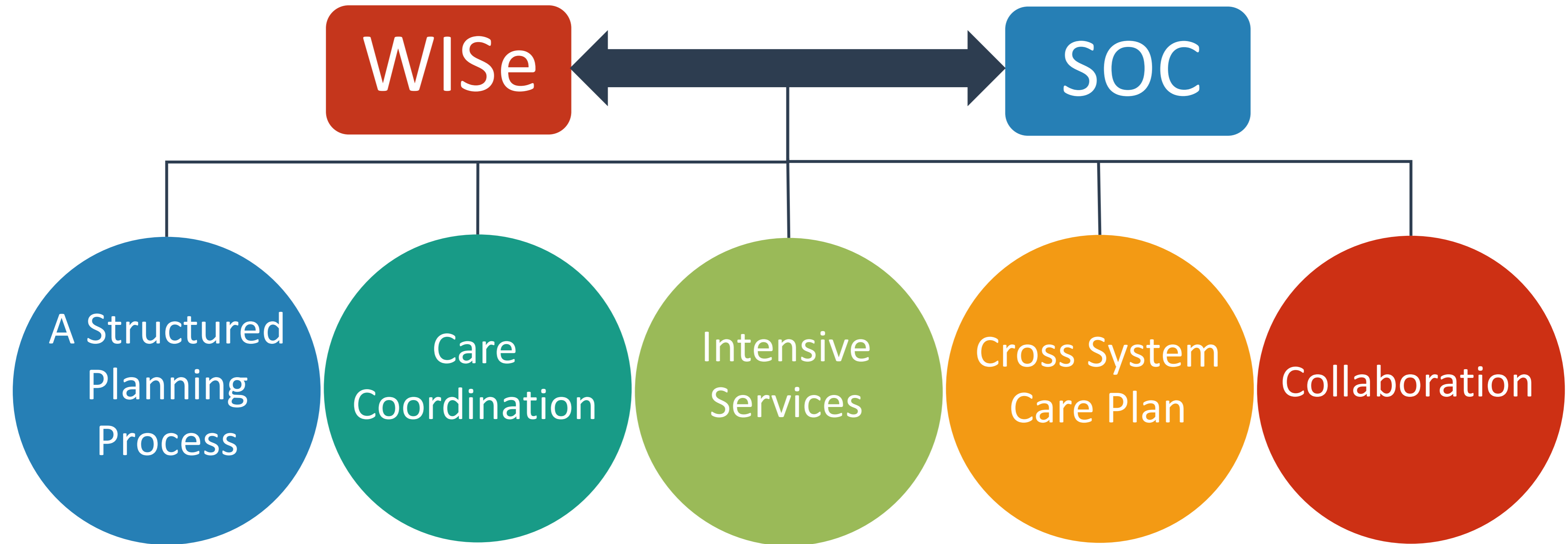


Develop sustainable financing and align funding to ensure services are seamless for children, youth and families.

SOC and WISe



WISe operationalizes Systems of Care at the practice level by providing:



WISe Program Model



Intensive Care Coordination

- Wraparound facilitation
- Care coordination
- Case management
- Coordinating transitions
- Assessment

Intensive services provided in the home and community

Includes family and youth partners

- Peer support
- Therapeutic psycho-education
- In-home functional assessment
- In-home therapy
- Social support development
- Flexible and creative services
- Building natural supports

24/7 Crisis Intervention and Stabilization Services

Capacity to respond 24/7

- Crisis assessment
- Crisis stabilization
- Crisis planning
- Referral and coordination
- Post crisis follow-up

Intensive Care Coordination



Includes:

- Facilitating assessment
- Care planning
- Coordination of services
- Monitoring of services and supports

Intense Care Coordination Provides



A single point of accountability



Guided by needs



Facilitation of a collaborative relationship



Family support



Care planning process



Team development

Traditional / Categorical Care



Child Welfare

Juvenile Justice

Primary Care

Education

Mental Health and
Developmental Disabilities

Substance
Abuse

Other Systems

PLAN

PLAN

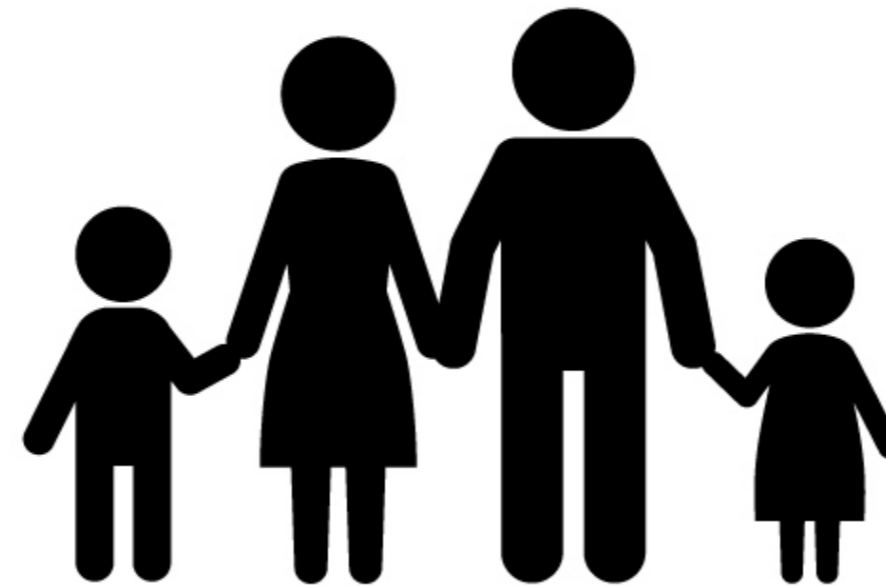
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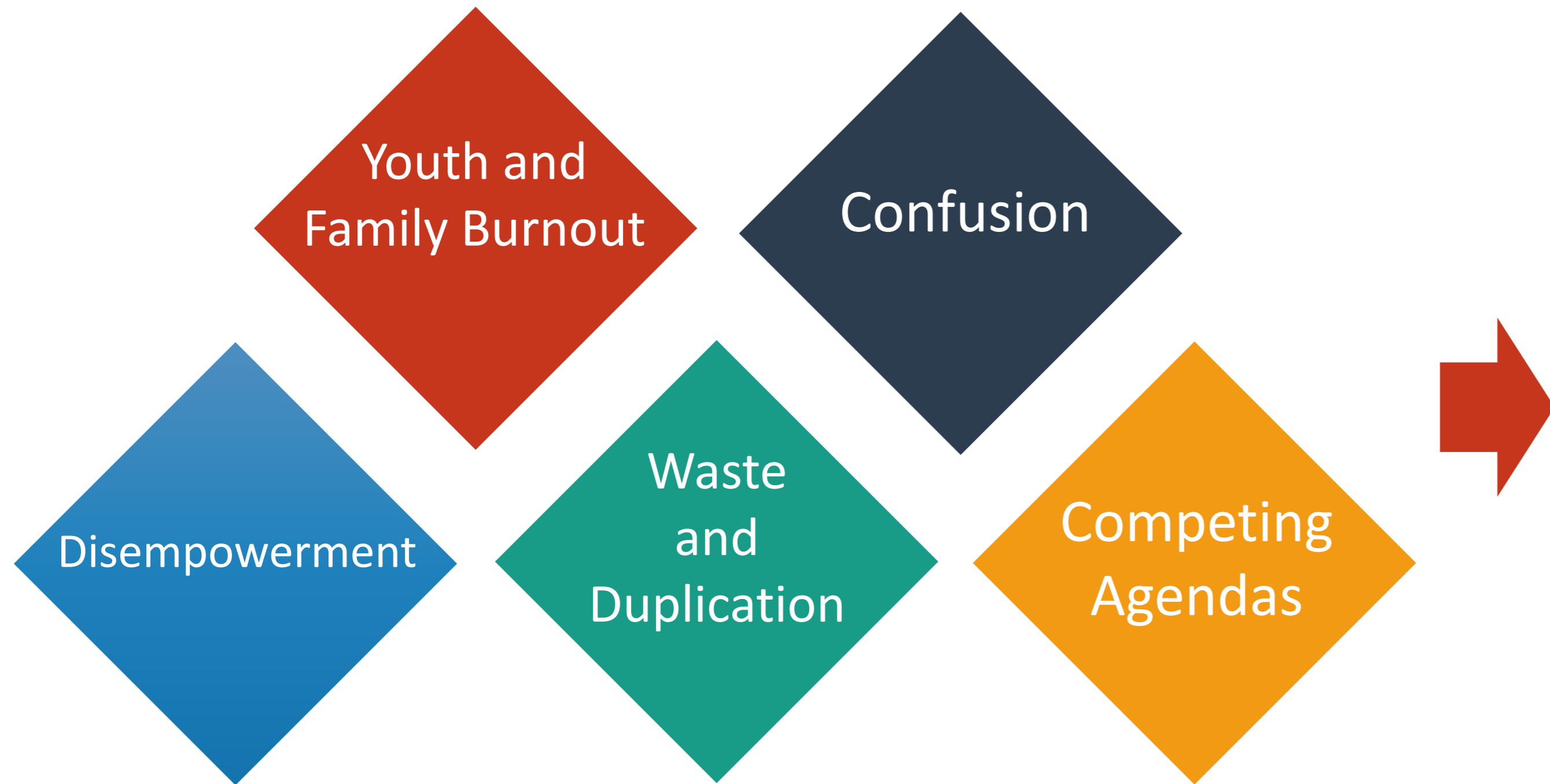
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Youth and Family

Traditional Care Can Create



Coordinated / Collaborative Care



Child Welfare



Juvenile Justice



Primary Care



Education



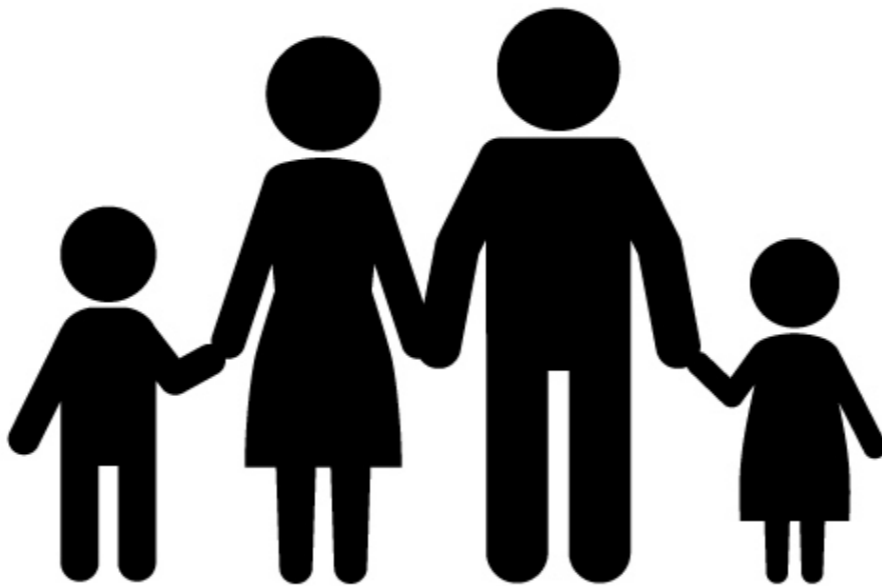
Mental Health and
Developmental Disabilities



Substance
Abuse



Other Systems



Youth and Family

Intensive Services in Home and Community



The agreed upon interventions are aimed at:

- Promoting health and wellness
- Helping youth build skills
- Improving the family's ability to help youth

WISE Certified Staff Roles



Family Partners and/or Youth Partners



Mental Health Clinicians



Care coordinators

Direct Services Include



- 1 Mental health education
- 2 In-home functional behavior assessment
- 3 Behavioral management
- 4 Therapeutic services

Services Are Designed To



- 1 Improve self-care
- 2 Improve self-management of symptoms
- 3 Improve social functioning
- 4 Reduce effects of past trauma
- 5 Reduce impact of mental health symptoms
- 6 Support social networks and the use of community resources
- 7 Support employment objectives
- 8 Support educational objectives
- 9 Support independent living objectives

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24/7 Mobile Crisis Intervention and Stabilization



Services include:

- Crisis planning and prevention
- Telephone support
- Face-to-face intervention

What's Different About WISE



What's Different About WISe



1. Primary Settings



Home and community-based locations



Convenient times for families and their natural supports

What's Different About WISe



2. Youth and Family Voice

- 1 Strength-based approach
- 2 Family and youth voice intentionally prioritized
- 3 Honors value of family-driven and youth-guided care

What's Different About WISe



3. Flexible and Creative Services

- 1 "Take-action" mentality
- 2 Needs-driven
- 3 Intensive and flexible approach

What's Different About WISe



4. Requires Certified Peer Counselors, Family Partners and/or Youth Partners with

- 1 Lived experience
- 2 Equal team member
- 3 Provide support in addressing needs of youth and family
- 4 Knowledge of CANS (certification encouraged)

WISe Model of Care



Purposeful

Goal Oriented

Collaborative Infrastructure

Creative Process

Guided By Principles

WISE Model of Care



A belief that WISE will:

- 1** Increase optimism and hope
- 2** Empower youth and families
- 3** Increase clarity of possibilities for better life
- 4** Develop realistic family vision

Next: 10 Children's Behavioral Principles

