

Coordinated Service Plans – The Down and Dirty Steps to Plan Development

What: Required State Forms (DOE and AHS agreement)

Why: It is Student/Family Centered, Act 264, and Title 16 Statute Requirement

REQUIRED

1. Act 264 Definition of Severe Emotional Disturbance

- IEP students with the primary disability of ED
- Other students who:
 - Exhibit a behavioral, emotional or social impairment that disrupts his or her academic or developmental progress or family or interpersonal relationships.
 - Impaired functioning for a short duration and high severity or for at least one year.
 - Any youth under age 18 or emotionally disturbed IEP students without a diploma or under age 22.
 - Youth who exhibit seriously impaired contact with reality and severely impaired social, academic and self-care functioning whose thinking is frequently confused, whose behavior may be grossly inappropriate and bizarre and whose emotional reactions are frequently inappropriate to the situation.
 - Youth who are classified as management or conduct disorder because they manifest long-term behavior problems including developmentally inappropriate inattention, hyperactivity, impulsiveness, aggressiveness, anti-social acts, refusal to accept limits, suicidal behaviors and substance abuse.
 - Youth who suffer serious discomfort from anxiety, depression, irrational fears and concerns whose symptoms may be exhibited as serious eating and sleeping disturbances, extreme sadness of suicidal proportion, maladaptive dependence on parents, persistent refusal to attend school or avoidance of non-familial social contacts.

BEST PRACTICE BUT NOT REQUIRED

All students who meet eligibility requirements under VT Special Education Regulations, who also are eligible to receive disability related service and case coordination by at least one AHS department. This includes qualified youth who are on a waiting list for services. It does not include youth who receive a service, but no case coordination. If a parent receives funds to purchase services for their child from an AHS agency but does not also receive case coordination the youth would not qualify for a coordinated service plan.

When: We need to begin the work now. We will inform parents who have eligible children about this opportunity. If a parent requests a plan and signs the consent form you will begin developing the plan when your site based or treatment team meets. A plan can be developed over a series of regularly scheduled meetings. Urgent situations will require a reasonable and responsive time line to develop the plan.

How:

1. Inform the appropriate parents of their right and explain the process.
2. Create a Coordinated Service Plan (CSP) if the parent completes the request form. (For State Placed Students on an IEP both the state placement agency parent and educational surrogate parent must sign the request form. Biological parents will also be encouraged to participate in the meeting if the child is state placed.)

3. It can be as simple as completing the documents in a site based or treatment team meeting with the parent/s, an appropriate school staff person and a member of the AHS agency who is or may provide case coordination.

4. The education placement for a student on an IEP can not be changed without an IEP revision. An IEP meeting or a legal IEP amendment process must be initiated once agreement has been reached regarding the type of educational program the student will attend. (This relates to changes from public school to day treatment setting or changes to a residential setting.) The IEP should be coordinated with elements of the Coordinated Service Plan. The IEP must contain reentry goals if the student will attend a day treatment or residential program.

5. School case managers and AHS case coordinators will complete a CSP prior to requesting a Multiple Provider Team (MPT) or Local Interagency Team (LIT) meeting. A MPT or LIT meeting can be requested if a site based or treatment team is seeking consultation (new ideas for workable solutions) or has encountered a policy or funding barrier. These meetings can only be scheduled by contacting the Gate Keeper for each agency that will need to be involved in the meeting.

6. The Gate Keeper for each agency involved in the development of a CSP for a residential placement must sign the cover letter endorsing the residential request before materials can be forwarded to the Case Review Committee for consideration.

Gate Keeper's Role:

When to involve the Gate Keeper

The Gate Keeper must be included in the communication loop when a site based team or treatment team feels they are going to need a MPT or LIT team meeting. Additionally, the Gate Keeper must be included in the communication loop if a team is considering a residential placement. Each agency has a designated Gate Keeper. Gate Keepers will keep fellow Gate Keepers from other agencies apprised of team discussions that have reached the Gate Keeper level.

What the Gate Keeper gets for paperwork:

1. Copy of CSP request forms signed by the appropriate parents
2. Copy of CSP documents when the situation exists that a youth must wait to access a needed service
3. Copy of existing CSP documents prior to meetings when possible if the Gate Keeper will be attending
4. Copy of CSPs and cover letters that are sent to the Case Review Committee (CRC) or the State Interagency Team (SIT) prior the these meetings where they will be discussed.



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