

March 9, 2007

LAMOILLE INTERAGENCY NETWORKING TEAM



Procedures for Collaborative Interagency
Teams That Provide Support for
Lamoille Valley Children, Youth and
Families.

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*State-authorized form: <http://healthvermont.gov/mh/docs/cafu/forms/kidsCSPRITRRRTRFORM.doc>

DESIRED OUTCOMES FOR CHILDREN, FAMILIES AND INDIVIDUALS¹

- Families, Youth & Individuals Are Engaged In Their Community’s Decisions and Activities
- Pregnant Women and Young Children Thrive
- Children Are Ready For School
- Children Succeed In School
- Children Live In Stable, Supported Families
- Youth Choose Healthy Behaviors
- Youth Successfully Transition to Adulthood
- Adults Lead Healthy and Productive Lives
- Elders and People with Disabilities Live With Dignity and Independence in Settings They Prefer
- Communities Provide Safety and Support for Families and Individuals

¹ Vermont State Team for Children, Families and Individuals

DEFINITIONS & PROTOCOLS

LAMOILLE INTERAGENCY NETWORKING TEAM (LINT):

On the first Tuesday of each month the LAMOILLE INTERAGENCY NETWORKING TEAM (LINT) meets from 8 - 10:00 a.m at the Department for Children and Families – Family Services (DCF-FS) small conference room in Morrisville. LINT members are representatives of the Lamoille Valley Schools, social service providers, and other members of our child and family support networks. Ideas, activities and general concerns across a wide spectrum of issues regarding children and families at risk are discussed during the meeting. Through the interagency collaboration facilitated during these meetings and related work sessions - strategies and protocols to address those issues are developed and adopted.

LINT meetings are open to anyone who would like to participate. Contact LINT coordinator Greg Stefanski @ 635-2805 x 201 for more information or Linda Caswell @ 888-4576 to be added to the LINT mailing list.

GATEKEEPER:

Each partner agency/school designates a “gatekeeper” who understands and knows how to access the interagency team system. Gatekeepers determine whether or not a case is appropriate to request a Multiple Provider Team, Child Protection Team or Local Interagency Team and are authorized to request them. Gatekeepers are expected to participate in or to designate someone as their representative during interagency team meetings. Gatekeepers may also serve as the point person for requests for participation by their agency/school’s representatives on Multiple Provider Teams, Child Protection Teams, and Local Interagency Teams.

SITE-BASED TEAM:

Staff from within an agency/school/location working together to support a child/youth and/or family.

INTERAGENCY TREATMENT TEAM:

The Interagency Treatment Team may consist of the child/youth’s parent(s) or guardian(s) and service providers from at least two different agencies/schools who offer specific services for the child/youth &/or family. The Interagency Treatment Team meets regularly to draw upon the child’s/youth’s & family’s strengths to develop, plan, coordinate, manage and evaluate the treatment plan. In addition to the parents, members of the treatment team may all be housed in the same location/agency such as a school or may include members from various agencies and/or schools. The Interagency Treatment Team may be an expansion of and/or include members of a Site-based Team. The Interagency Treatment Team will identify one of its members to facilitate and organize meetings and to invite participants. The Interagency Treatment Team may invite others on an as needed and/or consultative basis.

It is best practice to complete a Coordinated Services Plan (CSP) as early in the process as possible.

MULTIPLE PROVIDER TEAM (MPT):

A Multiple Provider Team may be requested when the Site-Based Team or Interagency Treatment Team has exhausted their options or resources and remains unable to implement an existing plan or to meet the identified needs of the family, youth or child. The MPT provides the Site-based Team or Interagency Treatment Team and families the opportunity to review their case, brainstorm possible strategies, and plan new or different services and/or approaches. The Multiple Provider Team is a short-term consulting activity and an opportunity to make connections with service providers. Service coordination reverts back to the Site-based Team or Interagency Treatment Team. A MPT may consist of parents/guardians and a variety of school and community agency representatives who may or may not already be involved with the child/youth and family.

How a Multiple Provider Team is organized:

- The provider wishing to call a MPT discusses the concept with the parent(s)/guardian(s) and obtains written permission to hold the meeting.²The parent/guardian is encouraged and invited to participate. Note – a parent/guardian may request a MPT – it is recommended that a provider assist the parent/guardian with contacting other providers and setting up the MPT. The parent/guardian may select the provider to assist him/her.
- School and agency personnel must go through their identified gatekeepers to call the MPT. If you don't know who the gatekeeper is in your school or agency – contact your supervisor.
- Setting up the logistics and inviting participants is the responsibility of the initiating individual or school/agency.
- The person or school/agency wishing to call a MPT identifies those individuals and agencies that he/she believes are already involved with the child/family as well as those who may have ideas to assist with their needs. Community and school partners agree to immediate reasonable response and unconditional agreement to participate when called
- The time and place is determined – whenever possible the MPT is scheduled during existing time slots (Lamoille North Supervisory Union – 3rd Tuesday 1:45 – 3:15, Orleans Southwest Supervisory Union & Lamoille South Supervisory Union – 1st Tuesday 9:30 – 11). Please note: for the Lamoille North Supervisory Union time slot – contact the Coordinator of Student Support Services @ 888-3142, for Orleans Southwest Supervisory Union – contact the Coordinator of Student Support Services @ 472-6063 & Lamoille South Supervisory Union – contact @ 888-4541
- An EMERGENCY MPT can be called at any time

What to Expect at a Multiple Provider Meeting:

- The Multiple Provider Team (MPT) discusses successes and challenges.
- The Multiple Provider Team (MPT) is an opportunity to brainstorm and plan new or different services and coordinate services to meet the needs of the child, student, and the family.
- Community and school partners bring a willingness to contribute resources, not limited to specific program/agency mandates
- Please note that at times there may be a large variety of community service providers, family members and family partners that may attend the Multiple Provider Team meeting. Having a large number of community service providers attending allows the Multiple Provider Team to better assist families with creating a plan that best meets their needs.
- During the MPT meeting someone is designated to record the resulting plan³. The completed form is copied and distributed to parent(s)/guardian(s) and any parties who have committed to providing services.
- Needs and process for data collection are yet to be determined.
- By the end of the MPT, a draft of the Coordinated Services Plan (CSP) should be completed.

What Happens After a Multiple Provider Team Meeting?

- Members of the Treatment Team and/or Multiple Provider Team agree to implement specific actions/services utilizing the ideas generated during the MPT.
- As a result of the Multiple Provider Team – new members may be added to the Treatment Team.
- In cases where there is an identified Case Manager, he/she will take responsibility for ensuring that all aspects of the new plan are in place. In other cases this responsibility is shared among members of the Interagency Treatment Team. The Interagency Treatment Team shares responsibility for follow through.
- The MPT will designate a person to serve as the contact person.
- When it seems necessary, additional Multiple Provider Team (MPT) meetings may be scheduled in an attempt to achieve better outcomes for the same child/youth and family.
- If the Pre-LIT process has been completed and issues have not been resolved at the MPT level, a referral can be made to LIT (Refer to LIT Referral Checklist- Addendum C).

² - need standardized form for permission

³ - use common form

In accordance with ACT 264 and the DOE/AHS Interagency Agreement, a referral can be made to the Local Interagency Team (LIT) when the Multiple Provider Team is unable to address the needs of a child/youth or when the family of a child/youth makes a request. The LIT is composed of the community mental health center Children's Director, local school districts (Special Education Administrator/s designated by the region), DCF Family Services District Director, family members, AHS Field Director, and representatives from the Lamoille Family Center, Building Bright Futures, Developmental Services, Substance Abuse, Vocational Rehabilitation, adult mental health programs, and the Department of Labor. It is recommended that regional representatives of the Vermont Adoption Consortium participate as active members of LITs when reviewing Coordinated Services Plans for children who are in a pre or post adoptive process. Others may participate by invitation.

Referrals for a LIT meeting should be made to the LIT Referral Team, which consists of the LCMH Children's Director, the DCF Family Services District Director, one or more of the local school district representatives and the AHS Field Director. Contact should be made directly with the LCMH Children's Director. Referrals will be reviewed the first Tuesday of each month from 9:00- 10:00 a.m., unless other arrangements are made, and 3 of the 4 LIT Referral Team members must be present.

The LIT Referral Checklist (Addendum C), the Coordinated Services Plan (Addendum D) and any other pertinent documentation will be reviewed. The referral will either be returned to the MPT with recommendations or a LIT meeting will be scheduled for the full LIT group. If the decision is made to have a LIT meeting, the Coordinated Services Plan will be made available to all LIT members prior to the meeting.

Referrals and any corresponding documentation will be collected and stored at the local AHS office.

STATE INTERAGENCY TEAM/ CASE REVIEW COMMITTEE (SIT):

If resolution of the issues does not happen after one (or more) LIT meetings the LIT Coordinator can refer to the State Interagency Team (SIT), which encompasses the Case Review Committee (CRC), for final approval of the service plan proposed.

TBD: AHS Reorganization is intended to create locally flexible systems to address the needs of families and help prevent imminent but avoidable crisis. This flexibility may ultimately impact or divert referrals from the SIT to a new structure or process at the local level.

CHILD PROTECTION TEAM (CPT):

The Child Protection Team is a local, multi-disciplinary team that serves families whose children are at risk of abuse and/or neglect. 33 V.S.A. 4918 authorizes the CPT to help DCF-FS district offices to identify and treat child abuse and neglect cases by:

- Diagnosing or identifying cases;
- Developing comprehensive treatment plans; and
- Coordinating the services set out in the treatment plans – for all cases referred to the teams.

Team members represent a variety of community agencies and services that are officially empanelled to serve by the District Director of DCF-FS and held to the strictest level of confidentiality regarding all information disclosed at the meeting. The CPT may discuss a family without the family's participation or knowledge if the child's safety is in question.

How a Child Protection Team is organized:

- An individual working with a child/student and/or family who has a concern about the safety of the child/student contacts his/her agency or school's gatekeeper. He/she should describe the primary safety concerns and reasons for requesting a CPT.
- The Gatekeeper will contact the DCF-FS Supervisor to review the concerns and to gain permission to hold a CPT.
- The Gatekeeper or the individual originating the request for the CPT will be responsible for inviting participants to the CPT and setting up the meeting logistics.

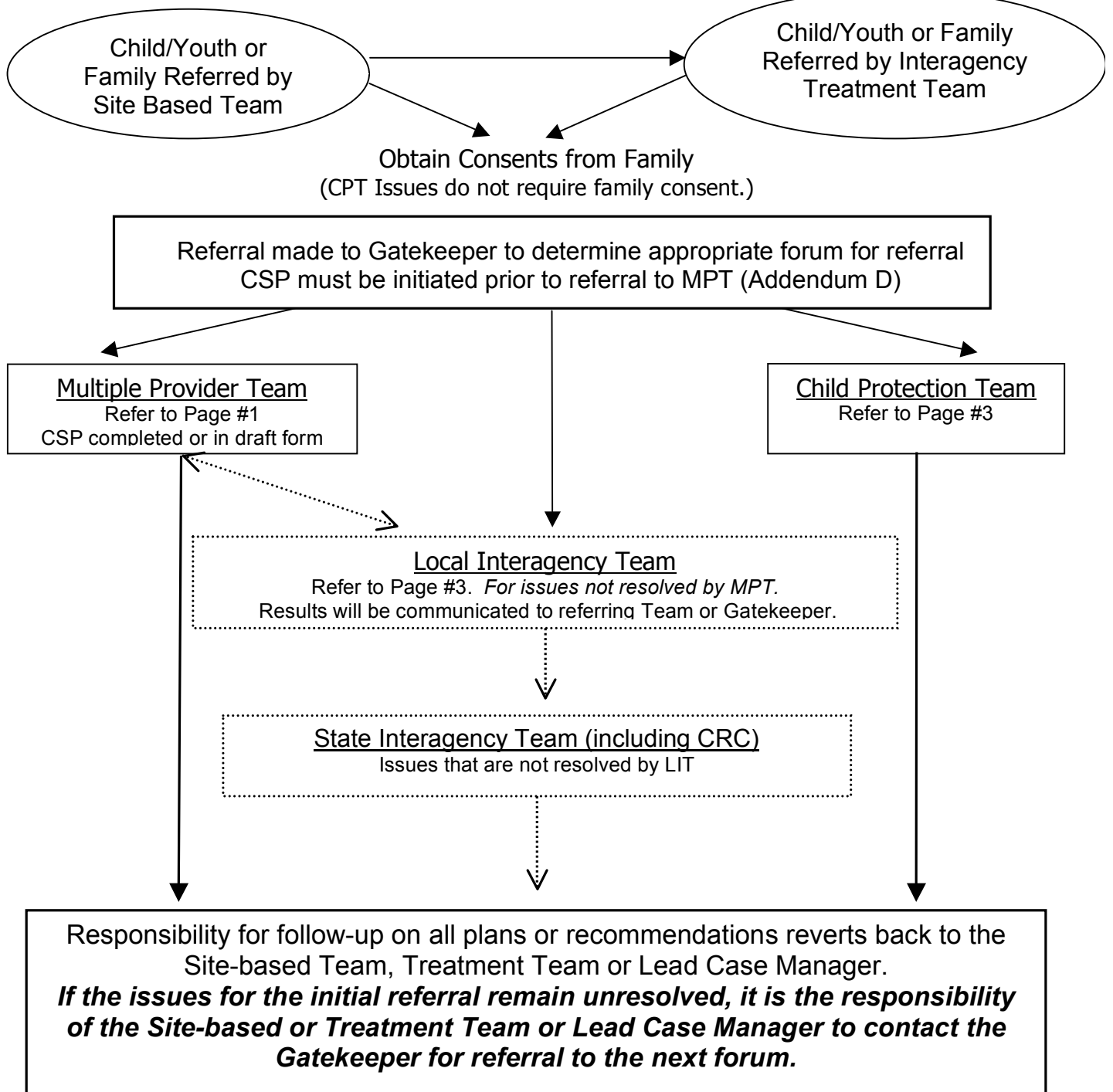
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- The DCF-FS District Director or designee for specific cases may temporarily empanel Service providers if they are not already empanelled members of standing CPTs.
- The CPT discusses specific safety concerns, successes and challenges
- CPT members brainstorm and determine solutions to address the concerns and needs
- The CPT develops a plan to address safety and other needs and may include recommendations to change service delivery if deemed necessary

What Happens After a Child Protection Team Meeting:

- Members of the CPT agree to implement specific actions/services utilizing the ideas generated during the CPT meeting.
- As a result of the CPT – new or different actions may be recommended to the Interagency Treatment Team and/or Site Based Team working with the child/student.
- In cases where there is an identified Case Manager, he/she will take responsibility for ensuring that all aspects of the new plan are in place. In other cases this responsibility is shared among members of the Interagency Treatment Team. The Interagency Treatment Team shares responsibility for follow through.
- The CPT will designate a person to serve as the contact person.
- When it seems necessary, additional meetings may be scheduled in an attempt to achieve better outcomes for the same child/youth and family.

Lamoille Interagency MPT/CPT/LIT
Referral Protocol



Key:

———— Standard forums for referrals

..... Special forums for severe cases
 (These forums are available *only* when all other options have been exhausted, or a parent/guardian requests a forum.)

Lamoille Interagency MPT/CPT/LIT
Referral Protocol – At a glance

- * **Youth referred to Gatekeeper:** An existing Site Based Team or Treatment Team can refer youth to the Gatekeeper for next level of interagency intervention (MPT, CPT, LIT). The referring team must have exhausted all options and resources available to them for the referral to be accepted by the gatekeeper.

 - * **Obtain consent to share and release information (CPT issues do not require family consent)** To/from any medical providers, counselors, home visiting agencies and agencies of human services.

 - * **Initial Referral:** Referrals to MPT/CPT must be made through the organization’s gatekeeper. The gatekeeper will determine which forum for intervention is appropriate on a case-by-case basis. The individual who makes the referral is responsible for setting up the meeting and inviting attendees.

 - * **Multiple Provider Team (MPT) or Child Protection Team (CPT):** After the arrangements have been made, the MPT or CPT is held. A plan is devised and the student is referred back to the Site Based or Treatment Team or Lead Case Manager for follow-up.

 - * **Site Based or Treatment Team:** The referring team oversees implementation of the plan developed at the MPT/CPT. If the issues for which the youth was referred persist or do not show improvement, the Site Based or Treatment Team may refer the youth to the Gatekeeper for additional MPT/CPT/LIT support.
- The following forums are only available when all other options have been exhausted, or a parent/guardian requests a forum.***
- * **Local Interagency Team (LIT):** Referrals to LIT can be made by a parent/guardian, Gatekeeper or Multiple Provider Team through the Children’s Program Director at Lamoille County Mental Health. Referrals are generally made when MPT plans have failed or exhausted the services available at the MPT level of intervention.

 - * **State Interagency Team (SIT):** LIT Coordinator can refer case to SIT if one or more LIT meetings do not resolve the issues for referral.

Community Partners who may serve on Interagency Teams:

Adult Basic Education			*Lamoille County Mental Health Services	
Lamoille County	888-5531		Children, Youth & Family Services	888-4914
Caledonia County	472-5974		Developmental Services	888-5026
			Adult Services	888-5026
Agency of Human Services			*Lamoille Family Center	888-5229
*Alcohol & Drug Abuse Programs	888-2581			
Corrections			*Lamoille North Supervisory Union	888-3142
Lamoille County	888-2520		Belvidere Central School	644-5836
Caledonia County	748-6602		Cambridge Elementary	644-8821
Economic Services	888-4291		Eden Central School	635-6630
*Family Services	888-4576		GMTCC (Tech Center)	888-4447
*Field Director	888-1330		Hyde Park Elementary	888-2237
Health	888-7447		Johnson Elementary	635-2211
*Vocational Rehabilitation	888-5976		Lamoille Union High School	888-4261
			Lamoille Union Middle School	851-1300
Behavioral Medicine	888-8320		Waterville Elementary	644-2224
*Building Bright Futures	888-1400		*Lamoille South Supervisory Union	888-4541
			Elmore Elementary	888-2966
Child Care Providers			Morristown Elementary	888-3101
			Morristown Graded Building	888-4985
Children with Special Health Needs	660-4427		Peoples Academy Middle Level	888-1402
			Peoples Academy High School	888-4600
Community Action			Stowe Elementary	253-4154
Lamoille County	888-7993		Stowe Middle School	253-6913
Caledonia County	748-5855		Stowe High School	253-7229
Department of Labor	476-2603		Laraway Youth & Family Services	635-2805
Domestic Violence Agencies			Law Enforcement	
Clarina Howard Nichols Center	888-5256		Hardwick Police	472-5475
AWARE	472-6463		Lamoille County Sheriff	888-3502
			Morristown Police	888-4211
Even Start	888-6810		Stowe Police	253-7126
Extended Family Members			*Orleans Southwest Supervisory Union	472-6531
<i>Grandparents, Foster Parents, Guardians, Etc.</i>			Craftsbury Schools	586-2541
Family Court	888-2530		Hardwick Elementary	472-5411
<i>Coordinated through Court Diversion (LCCDRJP, Inc.)</i>			Hazen Union Middle School	472-6511
			Hazen Union High School	472-6511
Head Start/Early Head Start			Lakeview Elementary	533-7066
Lamoille County	888-2935		Wolcott Elementary	472-6551
Caledonia County	472-5496		Woodbury Elementary	472-5715
Health Care Providers			Private Mental Health Providers	
Lamoille County Court Diversion & Restorative Justice Programs, Inc.	888-5871		Vermont Adoption Consortium/Lund Family Center	864-7467 Ext. 2011
Lamoille County Home Health & Hospice	888-4651		Vermont Federation of Families for Children's Mental Health Services	434-6757

* denotes LIT member
(LIT Referral Team identifies who needs to attend LIT meeting)

Lamoille Valley Local Interagency Team Referral Checklist

In order for a referral to be made to the LIT the referring provider must have completed the following Pre-LIT Process and Checklist and identified one of the reasons for the referral listed below:

Pre-LIT Process and Checklist:

- Interagency Treatment Team meeting conducted**
- Multiple Provider Team meeting conducted**
 - Gatekeeper chooses who will attend**
 - Parent/Guardian must attend**
- Coordinated Service Plan must be completed and attached to referral**
 - Required signatures on CSP**
(Special Ed Director must sign for all Residential referrals)
- Identified Gatekeeper agrees that Pre-LIT steps have been met and initiates referral to LIT**

The LIT will accept a referral for any one of the following reasons as long as the Pre-LIT process has been completed. If the LIT determines one or more of the Pre-LIT steps have not been met the referral will be returned with an explanation of steps remaining.

Reason for Referral: (Check all that apply)

- Disagreement between agencies regarding payment for services**
- Need for residential placement**
- Needed services not available in local area**
- Family request – Will be redirected if Pre-LIT Process not followed (LIT Coordinator will notify Gatekeeper of direct referral from family)**

