## THURSTON-MASON CHILDREN'S WRAPAROUND TEAM (CWT) and CHILDREN'S LONG-TERM INPATIENT PROGRAM (CLIP)

#### **INFORMATION/GUIDANCE SHEET**

#### **CWT PURPOSE**

This is a multidisciplinary consultation team that convenes to assist families in connecting to services/supports that help keep their child in the home and community, whenever possible. This team works in partnership with the family to create a list of strategies and resources that may help address the needs expressed by the family. This team also functions as the first step for families pursuing a Children's Long-Term Inpatient (CLIP) intervention, when that level of care is medically necessary. If a CLIP intervention is being pursued, the family will be linked to the appropriate Managed Care Organization (MCO) or the Thurston Mason Behavioral Health Administrative Service Organization (TMBH-ASO) CLIP liaison for assistance throughout the voluntary CLIP application process. See additional information below regarding CLIP Application Process.

#### **CWT CORE VALUES**

The following are the Core Values that guide the CWT process:

- Early support to families of children/youth with complex needs;
- Strengths, needs, resources focused;
- Family-focused and not marketing individual programs;
- Balanced meeting structure (respectful to family and time to provide meaningful recommendations);
- Avoid out-of-state referrals, when possible;
- Transparency/education regarding hospitalizations and placements;
- Staying on schedule;
- Opportunity for all members to participate collective expertise;
- Belief in recovery and resilience;
- Solution-focused open, respectful, and ongoing dialogue;
- Respect and protection for client/family confidentiality.

#### ACCESS TO CWT CONSULTATION FOR YOUTH ENROLLED IN A MANAGED CARE ORGANIZATION

If the child/youth is enrolled in a Managed Care Organization's (MCO) Medicaid health plan, please contact the appropriate lead from the list below for assistance in coordinating the CWT meeting. The MCO Lead will provide the appropriate documents needed for a CWT presentation. All completed forms must first be sent to the MCO for review. Once the MCO lead determines that the forms are complete, they will forward them to TMBH-ASO for scheduling.

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#### INFORMATION/GOIDANCE SHEE

#### MCO Children's Coordinator Contacts:

#### Wellpoint

Nicole Cyriaque, CLIP Children's System Administrator 705 5<sup>th</sup> Ave. S, Ste. 300, Seattle, WA 98104

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#### **Coordinated Care**

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#### Molina

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#### **United Health Care**

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#### **CHPW**

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#### For MCO use only:

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The CWT Referral form (which includes a release of information) and the Intensive Behavioral Health Screening form are both available on the TMBASO website\_at <a href="https://www.tmbhaso.org">https://www.tmbhaso.org</a> under the "resources" section. You may also request the required forms or more information by calling 360-763-5828 or emailing <a href="mailto:cwt.referrals@tmbho.org">cwt.referrals@tmbho.org</a>.

#### ACCESS TO CWT CONSULTATION FOR YOUTH NOT ENROLLED IN AN MCO

If the youth is <u>NOT</u> enrolled in a Medicaid Managed Care Organization Health Plan, the referent/caregiver must complete and submit the following forms before a meeting can be scheduled:

- The CWT Referral form, which includes the reason for referral (general consultation vs. CLIP)
  and a Release of Information (ROI) section that must be signed by the caregiver for children
  birth 12 years of age and by the youth, if 13 years or older. It is recommended that caregivers
  also sign the ROI for youth 13 years or older, but this is not required as consent is implied by
  their presence in the meeting.
- 2. The Intensive Behavioral Health Screening Form.

Both forms are available on the TMBH-ASO website at <a href="https://www.tmbhaso.org">https://www.tmbhaso.org</a> under the "resources" section. You may also request the required forms or more information by calling 360-763-5828 or emailing <a href="mailto:cwt.referrals@tmbho.org">cwt.referrals@tmbho.org</a>.

The completed forms must be submitted to Thurston Mason Behavioral Health Administrative Service Organization (TMBH-ASO) via <u>secure email</u> at <u>cwt.referrals@tmbho.org</u> or faxed to 360-489-1435. If the referent/caregiver does not have an encrypted email system set up, email <u>cwt.referrals@tmbho.org</u> and they will initiate a secure email that you can reply to with confidential information.

Once the forms are complete, TMBH-ASO will contact the caregiver/referent to coordinate the scheduling of the CWT meeting.

### CHILDREN'S WRAPAROUND TEAM (CWT) and CHILDREN'S LONG-TERM INPATIENT PROGRAM (CLIP) INFORMATION/GUIDANCE SHEET

#### **MEETING DATES/TIMES**

Thurston: First Monday (1:30-2:30 PM and 2:30-3:30 PM) and third Thursday (10:00-11:00 AM and

11:00 - noon) of each month

Mason: First Wednesday (1:30-2:30 PM and 2:30 – 3:30 PM) of each month

Note: these are standing meetings, but we only convene with the team when there are cases to

staff. Otherwise, TMBH-ASO sends notification that the meeting has been cancelled.

#### MEETING LOCATION

All meetings are currently held via a confidential ZOOM platform. Team members and caregivers are encouraged to use their camera, when possible, to facilitate better communication.

#### **CWT MEMBERS & ATTENDEES**

The CWT team is comprised of representatives from local community and administrative organizations, state agencies, community stakeholders, and parents/youth with lived experience (see the CWT Authorization for Release and Exchange of Information for a comprehensive list).

Families may also invite other individuals to the meeting for support and/or to provide additional information.

The caregiver must attend the meeting, and the referent must also attend or have a representative attend.

Note: If for some reason, the caregiver is unable to attend a scheduled CWT meeting, please send an email message to <a href="mailto:cwt.referrals@tmbho.org">cwt.referrals@tmbho.org</a> as soon as possible, so that we can schedule another family for that time slot.

#### CHILD/YOUTH PARTICIPATION

The child/teen is welcome to attend the meeting; however, parent/caregiver participation is key to a successful meeting and parents/caregivers are responsible for the supervision of their children that attend. Therefore, please plan accordingly.

#### WHAT TO EXPECT/MEETING STRUCTURE

Scott Hanauer, or a backup facilitator, will lead the meeting, which will last for <u>one hour</u>. Following introductions, the caregiver, family support member, and referent will have an opportunity to share information about the family's strengths and needs.

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It is important to keep this information sharing time <u>brief with concise descriptions</u> of the family and youth's strengths and specific needs being targeted. This is necessary to allow time for the CWT to progress through the following steps and to be most helpful to the family. Please plan in advance who will be presenting information. Keep in mind that the CWT members have already reviewed the materials that you submitted so there is no need to spend a lot of time re-presenting that information. Focus your presentation on recent/current information such as where the youth is currently living, caregivers, current risks (safety concerns, property destruction, etc.), contributing factors to current challenging behaviors and symptoms, what services/strategies have worked, what has not worked and why. Also, provide recent history and current information about behavioral health services, diagnoses, and medications.

After the brief presentation, the facilitator will open the discussion up to the CWT to ask clarifying questions. The question-and-answer time must also remain brief with adherence to the facilitator's guidance in order to allow sufficient time for the final phase.

During the final portion of the meeting, the focus will transition to identifying potential strategies and resources that may be helpful to the family. This will be a time that the team provides ideas and information about local resources and partners with the family to create a list of strategies and resources.

If the family is pursuing Children's Long-Term Inpatient (CLIP) services, the family will also be linked to the appropriate Managed Care Organization (MCO) or Administrative Service Organization (ASO) CLIP liaison for assistance throughout the voluntary CLIP application process. See additional information below regarding CLIP Application Process.

A designated team member will take notes of all recommendations and contact information.

#### **FOLLOW UP**

Following the meeting, the family's MCO or TMBH-ASO contact will provide the family (and current provider, when appropriate) with a list of potential resources and contact information to address the needs expressed by the family. While the suggestions that are given are encouraged, it is ultimately up to the caregiver's discretion whether to access the support/service identified by the team.

#### **CLIP APPLICATION PROCESS (if applicable)**

As mentioned previously, the CWT is the first step in the voluntary application process for those pursuing CLIP. While the CWT will not make a formal recommendation about a CLIP intervention during this initial meeting, they will provide information about CLIP services, locations, the application process, and link the family to the appropriate MCO/ASO CLIP liaison (listed below) for assistance, if that has not already occurred prior to the meeting.

### CHILDREN'S WRAPAROUND TEAM (CWT) and CHILDREN'S LONG-TERM INPATIENT PROGRAM (CLIP) **INFORMATION/GUIDANCE SHEET**

The voluntary CLIP application is a two-step process:

- 1. The CWT meeting is focused on the family's immediate needs and identification of communitybased strategies and resources. This is important because the CLIP application and approval process typically takes several months and during that time, community-based resources are crucial. This also allows time for the family, CLIP liaison, and others to thoughtfully gather all necessary information to accurately determine if CLIP is the appropriate level of care.
- 2. Once the CLIP application is complete and reviewed by the MCO/ASO liaison, the completed application and all supporting documents are sent to the Thurston Mason Behavioral Health – Administrative Service Organization (TMBH-ASO). TMBH-ASO then convenes the CLIP Application Review Team meeting within 10 days to carefully consider if CLIP is the medically necessary level of care. Following that review, the MCO/ASO liaison notifies the family in writing of the local team's recommendation.
  - a. If CLIP is supported, the CLIP liaison provides a written recommendation along with the completed application packet to the CLIP Administration. The CLIP Administration will review and determine certification when there is an anticipated bed available within 30 days.
  - b. If CLIP is not supported at the local level, the family will be provided with written community-based recommendations and information regarding how to appeal the CLIP recommendation directly through the CLIP Administration.
  - c. The MCO/ASO liaison is responsible for communicating with the CLIP Administration throughout the process.

Note: The maximum timeline from the initial CWT meeting to the date the CLIP Application Review Team makes their recommendation is 90 days.

#### MCO and TMBH-ASO Children's Coordinator Contacts:

#### Wellpoint

Nicole Cyriaque, CLIP Children's System Administrator 705 5<sup>th</sup> Ave. S, Ste. 300, Seattle, WA 98104

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#### Molina

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#### **CHPW**

Christine Kapral, MA, LMHC, CMHS

Senior Children's Behavioral Health Administrator – Certified Child Mental Health Specialist

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**TMBH-ASO** (for children/youth not enrolled with an MCO)

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#### **PRIVACY**

Families have the right to receive confidential supports. You have authorized the CWT to discuss confidential information shared during the CWT meeting with other participants by completing and signing a Release of Information. All CWT members have signed an Oath of Confidentiality ensuring that information shared during the meeting is not divulged, published, or otherwise made known to anyone outside of the CWT without written consent from the family/youth.

Note: There is one important exception. If someone discloses child abuse/neglect or identifies a plan to harm themselves or others, as mandated reporters, we will report this to proper authorities.