

Vermont Agency of Education and  
Agency of Human Services  
Interagency Agreement

***Section 1:***  
***Coordinated Service Plan (CSP)***  
***Forms***

Version: April 9, 2009

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For a CSP → Complete Section 1

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For referrals to LIT or SIT → Complete Sections 1 & 2

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For referrals to CRC → Complete Sections 1, 2, & 3

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# 1. Coordinated Service Plan Overview

“A **Coordinated Services Plan** is a written addendum to each service plan developed by an individual agency for a child or adolescent with severe emotional disturbance which shall be developed when the eligible child has needs that require services from more than one agency. It shall be designed to meet the needs of the child within his or her family or in an out-of-home placement, and in the school and the community.” (Act 264, revised, 1989)

In 2005, an additional **Interagency Agreement** was developed in which “eligible children and youth are entitled to receive a coordinated services plan

developed by a service coordination team including representatives of education, the appropriate departments of the Agency of Human Services, the parents or guardians, and natural supports connected to the family. The coordinated services plan includes the Individual Education Plans (IEP) as well as human services treatment plans or individual plans of support, and is organized to assure that all components are working toward compatible goals, progress is monitored, and resources are being used effectively to achieve the desired result for the child and family. Funding for each element of the plan is identified.” (Interagency Agreement, 2005)

**PLEASE NOTE: Coordination of services provides coordination of planning but not entitlement for specific services. Approval for specific services and/or placements is the responsibility of the appropriately involved agency or agencies. Established approval processes must be followed in implementing components of this plan.**

## **Factors to Consider in Developing a Coordinated Services Plan**

- 1. Are the parents, guardians, and /or educational surrogate parents, on the team?**
  - Other family members or friends on the team? Can the child/youth participate?
  - Are there representatives from the appropriate agencies such as community mental health, local education agency, and Agency of Human Services Divisions and Programs?
- 2. What are the goals of the plan?**
  - What are the child/youth, family, and other treatment team members' goals?
  - Do the recommended supports and services help to achieve those goals? *Goals should not be a list of services*, rather what is hoped to be attained with supports and services.
  - Is the CSP team (including the family) in agreement?
- 3. What are the strengths of the child and family?**
  - How is the child successful? What are the child's interests?
  - What natural supports and resources are available to the child?
  - What are the strengths of the family?
- 4. What are the needs of the child and family?**
  - What are the areas of concern and need? (What are the clinical concerns?)
  - What other stressors are impacting the child and the family?
- 5. Are there current written assessments? What was the purpose of the assessments?**
  - Does the assessment include the family?
  - Does the assessment include strengths of the individual and the family?
  - Were the evaluators familiar with local resources?
- Have past evaluations been reviewed and recommendations implemented?
  - What level of risk exists?
  - Is the child on an IEP?
  - Has medication been considered and for what purpose?
- 6. What local services have been tried?**
  - For how long, and what were the results?
  - Did community-based services actively involve the parents?
  - If the results were not positive at that time, what do CSP team members believe were the reasons? Can these reasons be reduced/eliminated sufficiently to significantly improve the prospect for success?
  - Who has participated in supports, and in treatment or services?
  - What less restrictive interventions have been tried? If less restrictive interventions have been ruled out, explain why. (*It is important to note that our system of care supports serving the child in the least restrictive manner appropriate to the child/youth's well-being.*)
- 7. What is the local CSP team recommending?**
  - What are the CSP team recommendations? Is the team in agreement?
  - What will constitute a successful outcome? How are the recommendations related to the stated need?
- 8. How will the team be accountable?**
  - When will the team next meet to determine if the plan has been implemented?
  - Since a change for the better is expected, how will the team determine if it is happening?
  - What indicators will measure progress?

## 2. Consent for Eligibility Determination & Coordinated Services Planning

Child/Youth's Name	Lead Agency
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A Coordinated Services Plan (CSP) is a process that follows a series of steps to help children and youth realize their hopes and goals. People from the child or youth's life work as a team to develop a plan that brings together the services and supports needed. I understand that as a parent I am a member of the CSP team.

I give my consent to the lead agency to start the process of determining if my child is eligible for a CSP. Often eligibility is part of the initial CSP meeting when information is gathered and reviewed about how particular agencies or departments are involved with the child/youth.

If my child is eligible, I give consent for the CSP team to develop a coordinated services plan.

I understand that:

- I must also sign a *Consent for Release of Information* form (page 3). The *Consent for Release of Information* will let the lead agency share my child's information with the CSP team. The CSP team members are listed on page 4.
- The lead agency will let me know within 30 days of when it gets this signed form and the signed *Consent for Release of Information* whether or not my child is eligible.
- Records that the lead agency has gathered throughout the coordinated services planning process are confidential. The lead agency will not share these records with others without first getting my consent in writing unless the law says they must be shared.
- I can look at or get a copy of these records by writing a letter to the lead agency.
- I will be given a copy of this consent form after I sign it.
- If I do not give my consent the lead agency cannot determine if my child is eligible for a CSP and a CSP cannot be developed.
- My child's current benefits and services will not be affected if I do not give my consent.

If my child is found eligible, I want to speak with my Local Interagency Team's parent representative before the <i>Coordinated Services Plan</i> meeting.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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	Print Name	Signature	Date
Parent / Guardian			
Witness			
Educational Surrogate Parent ( <i>if applicable</i> )			

### 3. Consent for Release of Information

Child/Youth's Name	Lead Agency
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I consent to the sharing of information about my child to the Coordinated Services Planning Team (CSP team). The CSP team members are listed on page 4. I understand that as a parent I am a member of the CSP team.

I understand that:

- My child's information includes records of educational, psychological, social history, medical evaluations, and services given to my child.
- My child's information will be shared with the CSP team so that the team can determine if my child is eligible for a CSP and if so, develop and implement a CSP for my child.
- I can look at or get a copy of the information about my child that is shared with CSP team by writing a letter to the lead agency.
- The CSP team knows that my child's information is confidential. The team will not share information about my child with others without first getting my consent in writing unless the law says it must be shared.
- This consent form expires one year from the date that I sign it.
- I can take away my consent at any time by writing a letter to the lead agency, except for when the CSP team has already used the information.
- If I do not give my consent, the CSP team cannot determine if my child is eligible for a CSP and my child will not get a CSP.
- My child's current benefits and services will not be affected if I do not give my consent.
- I will be given a copy of this consent form after I sign it.
- General information about the usefulness of the coordinated services planning process is gathered by the State Interagency Team. Information from my child's CSP may be used in this effort, but information on my child and family will not be identified.

I want to speak with my Local Interagency Team's parent representative.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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	Print Name	Signature	Date
Parent / Guardian			
Witness			
Educational Surrogate Parent (if applicable)			



## 7. Elements of a Coordinated Services Plan

**A. What are the hopes and goals for this child or youth?**

*(Family voice and choice is an important value of the coordinated services planning process.*

*Please make sure that the child or youth and family members have an opportunity to speak first.)*

**B. What are the family and child/youth's strengths, resources, and natural supports that can help realize those hopes and goals?**

*(Natural supports include family members' networks of relationships and community resources.)*

**C. What are the needs, challenges, concerns, and priorities that must be considered?**

*(Use existing plans and assessments as well as current experience to identify these.)*

## 7. Elements of a Coordinated Services Plan (cont.)

### D. What are the current supports and services that help realize those hopes and goals?

Support / service	Responsible party	Current status & funding

### E. What is the proposed plan of supports and services? (Consider how these address the needs in 7C.)

Support / service	Responsible party	Date to begin	Current status & funding

**Date of CSP review** (no more than one year from date of current plan):

## 8. Elements of a Proactive Crisis Plan

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***Use this section only if needed and/or attach existing agreed upon behavior plans or support documents that address this need across environments.***

*Teams are strongly encouraged to develop a proactive crisis plan if the child or youth is medically fragile, at risk for, or has ever been hospitalized in a psychiatric setting, or demonstrates risky and unsafe behaviors.*

**Situation (triggers/stressors)**

**Coping strategies (Describe skills, strategies, to prevent, reduce or de-escalate crisis)**

**What is needed to feel safe in crisis?**

**Key support people to contact – include names, relationship and contact information.**

**What to do to manage the crisis?**

**What NOT to do**

**Conditions for emergency room, police, hospital**

***PLEASE NOTE:*** *There may be special or unusual circumstances that will require the responsible adults to modify the plan.*

## 9. Appeal Process

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Most Coordinated Services Planning Teams are able to write and successfully implement a child or youth's Coordinated Service Plan. At times, a **team** may need to turn to its Local Interagency Team (LIT) for technical assistance, consultation or dispute resolution. Occasionally, a **LIT** may need to turn to the State Interagency Team (SIT) for technical assistance, consultation or dispute resolution. **Parents**, as members of a Coordinated Services Planning Team, may turn to the LIT or SIT for dispute resolution.

**PLEASE NOTE:** *If a parent has a dispute regarding **service delivery** rather than **service coordination** s/he must use the appropriate dispute resolution mechanism(s) in the section C. below.)*

### A. Act 264 Appeal Process Regarding Coordination of Services

A local agency, a service provider or a parent on the team may request an appeal concerning coordination among the agencies under Act 264 and related provisions of the Interagency Agreement.

An appeal is available if the State Interagency Team is unable to resolve the dispute. The SIT shall inform the local agency, service provider(s) and parent(s) of their right to an appeal and provide the name and address for submitting the appeal.

The appeal process shall consist of a hearing pursuant to Chapter 25 of Title 33. The hearing shall be conducted by a hearing officer appointed by the Secretary of the Agency of Human Services and the Commissioner of Education. Based on evidence presented at the hearing, the hearing officer shall issue written findings and proposals for decision to the Secretary and the Commissioner. The Secretary and the Commissioner may affirm, reverse, or modify the proposals for decision. All parties shall receive a written final decision of the Secretary and the Commissioner.

### B. Appeal Process Regarding Issues of Payment and Reimbursement between Agencies

When a non-education agency fails to provide or pay for services for which they are responsible and which are also considered special education and related services, the school district (or state agency responsible for developing the child's Individualized Education Plan [IEP]) shall provide or pay for these services to the child in a timely manner. The school district (or state agency responsible as the education agency) may then claim reimbursement for the services from the non-education agency that was responsible and failed to provide or pay for these services. The procedures outlined in the Interagency Agreement of June 2005 shall be used for reimbursement claims between agencies.

### C. Other Grievance Procedures Available to Parents.

In addition to the opportunity to file an appeal regarding coordination of services under Act 264, the parent has the right to other grievance procedures depending on the nature of the service and complaint. Those grievance procedures may include but are not limited to:

- 1) Parent's complaints regarding the provision of a free appropriate public education and other rights under the Individuals with Disabilities in Education Act: contact the Agency of Education at (802) 479-1255.
- 2) Managed Care Organization grievance related to Medicaid Coverage: contact the Green Mountain Care Board 1-800-250-8427.
- 3) Grievances related to Medicaid Eligibility: contact the Green Mountain Care Board 1-800-250-8427.
- 4) Complaints or grievances regarding staff performance or quality of programs: contact the supervising provider responsible for service delivery.