



WISe: Children's Long Term Inpatient Programs (CLIP)

Audience

Washington State Children's Long Term Inpatient Programs (CLIP) Staff

What is WISe?

Washington State's Wraparound with Intensive Services (WISe)* provides comprehensive behavioral health services and supports to Medicaid eligible youth, up to 21 years of age, with complex behavioral health needs. WISe is designed to provide individualized, culturally competent services that strive to keep youth with intense mental health needs safe in their own homes and communities, while reducing unnecessary hospitalizations. WISe offers a higher level of care through these core components:

The Time and Location of services: WISe is community-based. Services are provided in locations and at times that work best for the youth and family, such as in the family home and on evenings and weekends.

Team-based Approach: Using a Wraparound approach, WISe relies on the strengths of an entire team to meet the youth and family's needs. Intensive care coordination between all partners and team members is essential in achieving positive outcomes. Each team is individualized, and includes youth, family

members, care coordinator, natural supports, a therapist, a youth partner and/or family partner, and members from other child-serving systems when they are involved in a youth's life. Other team members could include family friends, school personnel, a probation officer, a religious leader, a substance use disorder treatment provider, or a coach/ teacher. The team creates ONE Cross-System Care Plan that identifies strategies and supports, using the youth and family's voice and choice to drive their plan.

Help during a crisis: Youth and families have access to crisis services any time of the day, 365 days a year. Youth receive services by individuals who know the youth and family's needs and circumstances, as well as their current crisis plan. Whenever necessary, this includes face-to-face interventions at the location where the crisis occurs.

When and How Should I refer Youth for WISe?

Referrals to WISe for youth in CLIP should be made as part of discharge and treatment planning.

For information on the WISe provider in the youths' community go to: <https://www.hca.wa.gov/assets/free-or-low-cost/wise-referral-contact-list-by-county.pdf>

Our agreements indicate that CLIP programs will provide Child and Adolescent Needs and Strengths (CANS) screens and CANS full for youth who are:

- Referred and placed into CLIP for treatment. All CLIP youth should receive a CANS full within the first 30 days, updated CANS full every six months, and prior to discharge.
- These CANS are expected to expedite referral access and placement for WISe services as CLIP youth discharge. WISe services may be



initiated by a provider up to 60 days prior to discharge for care coordination

What information is needed for referral?

At the time of a WISe referral, CLIP staff should provide updated clinical assessments and reviews from the CLIP program and the most recent CANS screen and assessment.

Special Considerations

The CANS full tool provided within CLIP programs should be assessing the functional capabilities, needs, strengths and risk factors of the youth and family as they would manifest in the community setting. They are not intended to reflect the effects of the additional structure, 24-hour supervision by skilled staff, and intensive behavioral treatment supports and safety provisions available in the artificial CLIP environment.

Washington's Wraparound with Intensive Services (WISe)

Overview of the T.R. et al. v. Strange and Birch

In November 2009, a Medicaid lawsuit was filed (formerly called T.R. v. Dreyfus) against the Department of Social and Health Services and the Health Care Authority about intensive mental health services for children and youth. The lawsuit is based on federal EPSDT (Early and Periodic Screening, Diagnosis and Treatment) laws that require states to provide mental health services and treatment to children who need them, even if the services have not been provided in the past. After several years of negotiations, both sides agreed on a plan that they believe will put them in compliance with the laws, and most importantly, work for youth and families in Washington State. The federal court approved this Settlement Agreement on December 19, 2013. The goal of the Settlement Agreement is to develop a system that provides intensive mental health services in home and community settings that work - for Medicaid eligible youth up to 21 years of age.