

**CORE PRINCIPLES****A. CHILD AND ADOLESCENT SERVICE SYSTEM PROGRAM (CASSP)****CHILD-CENTERED:**

Services are planned to meet the individual needs of the child, rather than to fit the child into an existing service. Services consider the child's family and community contexts, are developmentally appropriate and child-specific, and also build on the strengths of the child and family to meet the mental health, social and physical needs of the child. As the child matures, services are planned to promote successful transition from adolescence to adult living.

**FAMILY-FOCUSED:**

Services recognize that the family is the primary support system for the child. The family participates as full partner in all stages of the decision-making and treatment planning process, including implementation, monitoring and evaluation. A family may include biological, adoptive and foster parents, siblings, grandparents and other relatives, and other adults who are committed to the child. The development of mental health policy at state and local levels includes family representation.

**COMMUNITY-BASED:**

Whenever possible, services are delivered in the child, adolescent or young adult's home community, drawing on formal and informal resources to promote the child's successful participation and integration in the community. Community resources include not only mental health professionals and provider agencies, but also social, religious and cultural organizations and other natural community support networks.

**MULTI-SYSTEM:**

Services are planned in collaboration with all the child-servicing systems involved in the child, adolescent or young adult's life. Representatives from all these systems and the family collaborate to define individual goals, develop a service plan, develop the necessary resources to implement the plan, provide appropriate support to the individual and family, provide continuity of care, including transition to adult living when appropriate, and evaluate progress.

**CULTURALLY COMPETENT:**

Culture determines our worldview and provides a general design for living and patterns for interpreting reality that are reflected in our behavior. Therefore, services that are culturally competent are provided by individuals who have the skills to recognize and respect the behavior, ideas, attitudes, values, beliefs, customs, language, rituals, ceremonies and practices characteristic of a particular group of people.

**LEAST RESTRICTIVE/LEAST INTRUSIVE:**

Services take place in settings that are the most appropriate and natural for the child, adolescent, or young adult and family and are the least restrictive and intrusive available to meet the needs of the individual and family.

**Attachment G**  
**CORE PRINCIPLES**  
**B. COMMUNITY SUPPORT PROGRAM (CSP)**

**CONSUMER-CENTERED/CONSUMER-EMPOWERED:**

Services are organized to meet the needs of each consumer, rather than the needs of the managed care program or the needs of service providers. Services incorporate self-help and other approaches and are provided in a manner that allows consumers to retain the greatest possible control over their own lives.

**CULTURALLY COMPETENT:**

Culture determines our worldview and provides a general design for living and patterns for interpreting reality that are reflected in our behavior. Therefore, services that are culturally competent are provided by individuals who have the skills to recognize and respect the behavior, ideas, attitudes, values, beliefs, customs, language, rituals, ceremonies and practices characteristic of a particular group of people.

**FLEXIBLE:**

The development and delivery of services and supports are as flexible as possible in order to meet the needs of a wide diversity of persons in the geographic area. Flexibility includes having a wide variety of services, of variable intensity available at a wide range of time, and delivered in a wide range of environments.

**MEET SPECIAL NEEDS:**

Services are adapted to meet the special needs of people with mental illness who are affected by one or more of such factors as old age, substance abuse, physical disability, loss of sight or hearing, mental retardation, homelessness, HIV/AIDS and involvement in the criminal justice system.

**ACCOUNTABLE:**

Service providers are accountable to the users of the services. Consumers and their families are involved in planning, implementing, monitoring and evaluating services

**STRENGTHS-BASED:**

Services build upon the assets and strengths of consumers to promote growth and movement toward independence, while helping to maintain a sense of identity, self-esteem and dignity.

**COMMUNITY-BASED/NATURAL SUPPORTS:**

Services are offered in the least coercive manner and most natural setting possible. Consumers are encouraged to use the natural supports in the community and to integrate into the living, working, learning, and leisure activities of the community.

**COORDINATED:**

Services and supports are coordinated on both the local system level and on an individual consumer basis in order to reduce fragmentation and to improve efficiency and effectiveness with service delivery. Coordination includes collaboration and linkages with consumers, families, advocates and professionals at every level of the system of care to meet the variety of consumer needs.