Dane County Comprehensive Community Services (CCS)

CCS Plan

DANE COUNTY

January 15, 2025

County of Dane Department of Human Services Comprehensive Community Services Plan

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County of Dane Department of Human Services Comprehensive Community Services Plan

A. CCS PLAN

CLIENT EXPERIENCE

The Dane County Comprehensive Community Services (CCS) Plan is focused on the client and working with the individual to support a life in recovery recognizing that this is unique to each individual. Some of the key features of the CCS Program from the participant perspective include:

- a. <u>Any Door Access</u>: Potential applicants may knock on any "door" whether it be that of an existing service provider, the Aging and Disability Resource Center (ADRC), the Behavioral Health Resource Center (BHRC), or other avenue and have a warm connection to the CCS Program.
- b. <u>Intake</u>: The Intake Worker meets with the client, and if appropriate, the client's family, guardian, or other persons they select to explain the CCS program and the application process. The Intake Process also includes:
 - i. <u>Determining Any Immediate Needs</u>: The Intake Worker determines with the client any needs that must be addressed immediately and makes arrangements for those needs to be met until such time as CCS services can begin.
 - ii. <u>Assistance with Obtaining Physician's Prescription</u>: The CCS Intake Worker will assist the client with obtaining the requisite Physician's Prescription, if help is needed or requested.
 - iii. <u>Selecting a Service Facilitation Agency</u>: Children and adults who are interested in receiving CCS services will select a Service Facilitation agency with which they would like to work. The Intake Worker provides information about options and guides them through the process.
 - iv. <u>Completing an Application and Admission Agreement</u>: Eligible persons who are interested in applying for CCS complete a brief application and an Admission Agreement that provides basic information on the program.
 - v. <u>Determining Eligibility</u>: The Intake Worker uses written information, a personal interview, the results of the State functional screen, and the physician prescription for services to determine eligibility. Children may be found to be eligible for programs besides CCS. If so, the Intake Worker explains the different programs and options. Persons who are ineligible for CCS services may be referred to other programs or services.
 - vi. <u>Reviewing Client Rights and Grievance Procedures</u>: Clients receive a Client Rights brochure and the rights and grievance procedures are explained to them.
- c. <u>Recovery Team</u>: Each CCS participant identifies a Recovery Team that provides ongoing assistance to identify strengths, needs, goals, desired outcomes, priorities, preferences, values, and steps to achieving goals. The Recovery Team minimally consists of the CCS participant; the Service Facilitator; a Mental Health Professional; a Substance Abuse Professional if the client has

or may have a substance use issue; and for minors or persons who have a guardian, the parent or legal or guardian. The Recovery Team also includes other persons who the CCS participant wants to be part of the team.

- d. <u>Assessment</u>: Each CCS participant, through the assessment process, talks about how they view recovery and their experiences, strengths, lifestyle, challenges, resources including cultural and environmental supports, needs, priorities, and preferences in each of the areas covered in the assessment. The assessment is updated as new information becomes available.
- e. <u>Recovery Plan</u>: Each CCS participant is engaged in the development of a Recovery Plan to achieve their recovery goals, hopes, and dreams.
- f. <u>Choice</u>: CCS participants are provided options for treatment, services, and self-help programs to help them realize their goals.
- g. <u>Change</u>: The Recovery Plan changes over time as needed to reflect the CCS participant's desired outcomes, priorities, preferences, and values.
- h. <u>Quality</u>: CCS participants have many opportunities to provide input needed to assure a quality CCS program. There are numerous opportunities for input starting with the Recovery Team through membership on the CCS Coordination Committee. CCS participants will also be asked for their input through annual client satisfaction surveys.

ORGANIZATIONAL STRUCTURE

Organizational Plan – DHS 36.07(1)

As the holder of the CCS certificate, Dane County's Department of Human Services (DCDHS) is responsible for the CCS program and for fidelity to DHS 36 regulations and rules. The Comprehensive Community Services (CCS) program is incorporated into the Department of Human Services' Behavioral Health Division under the purview of the CCS Community Services Manager. This unit works closely with the Community Services Manager in the Justice Support and Clinical Services area, which is a provider of service facilitation for youth.

Potential applicants may knock on any "door" whether it be that of an existing service provider, the Aging and Disability Resource Center, the Behavioral Health Resource Center, or other avenue and have a warm connection that provides information regarding the CCS program and helps direct the potential applicant to CCS intake workers for completion of the application, functional screen, and determination of need. CCS intake workers are equipped with laptops to enable the intake process to occur wherever the client feels the most comfortable.

The DCDHS CCS offices are located at:

Northport Office 1202 Northport Drive Madison WI 53704

Services are provided through a network of service providers where the County, in compliance with DHS 36, establishes the standards and qualifications for agencies and individual service providers who become part of the network. The County holds the contracts for and monitors the provision of services. The County's CCS Provider Network Coordinator assists with the recruitment, screening, background checks, and ongoing monitoring of credentials of service providers.

The web-based CCS Module of the DCDHS Information System creates a centralized service record for each CCS participant. It is expected that provider agencies use the on-line system.

Support services including accounting and information management are provided by units in the Fiscal and Management Services area under the direction of the Division Administrator of Fiscal and Management Services. Accountants are responsible for setting up contracts in the County's MUNIS (accounting system), making payments to vendors, and assisting with the year-end reconciliation. Information Management, under the direction of the Systems Coordinator is responsible for assisting employees and outside vendors with technology-related problems associated with the use of and/or reporting into the CCS Module which houses the centralized consumer service and administrative records.

Planning and Evaluation staff, under the direction of the Deputy Director, assist with meeting the evaluation requirements, such as the administration of the annual MHSIP consumer surveys.

The organizational chart may be found on page 6.

The County structure requires that the Department work in conjunction with the Department of Administration and Corporation Counsel.

The Dane County Controller's Office in the Department of Administration provides centralized accounting, financial management, and internal control services.

Information Management in the Department of Administration is responsible for building and maintaining the County's network and information technology-related infrastructure, developing and purchasing computer programs to increase the openness and efficiency of county government, and assisting employees with technology-related problems when they arise. This Division is working with the Department of Human Services to make further enhancements to the existing CCS Module to accommodate the specific needs of the CCS program and streamline the workflow for service providers.

The Purchasing Division in the Department of Administration provides a central purchasing function for all Dane County Departments. This function includes issuing most bids and requests for proposals, as well as, maintaining a list of vendors interested in doing business with the County.

Dane County Corporation Counsel assists with the development and review of contracts with outside vendors. They also handle the mental health, alcohol, and drug dependence commitments.

Timeline

The projected timeline for activities to support the continued implementation of the CCS Program in Dane County is as follows:

Activity	Anticipated Timeline
Hire Intake staff necessary to maintain compliance with DHS 36 regarding ongoing enrollment and	This is an ongoing function.
annual screening of existing participants.	
Execute contracts with service providers.	This is an ongoing function.
Make needed enhancements to CCS Module of the DCDHS Information System.	This will be ongoing throughout 2024-2026.
Provide CCS orientation training.	This is an ongoing function.
DQA On-Site Visit.	June 2025
Provide training on CCS Module.	This is an ongoing function.

CCS Organizational Chart DHS 36.07(1)



Staff Responsibilities - DHS 36.07(1)(a)

CCS Administrator

The CCS Administrator is seated within the DCDHS's Behavioral Health division. The Administrator has overall responsibility for the CCS program, including compliance with Chapter DHS 36 and other applicable state and federal regulations, and responsibility for developing and implementing policies and procedures. This individual is also responsible for the review and monitoring of contracts for services and the quality of services provided to consumers. The CCS Administrator and CCS Service Director are responsible for the orientation program for staff and volunteers so that a consistent message is delivered.

CCS Service Director -- DCDHS

The DCDHS CCS Service Director is responsible for the quality of services provided to consumers and day-to-day consultation to CCS staff. This position provides supervision to the CCS Quality Assurance Specialists and CCS Client Rights Specialists and will be backed up by the CCS Administrator.

Service Directors – Agency Based

CCS Service Directors are also employed with the agencies that contract with DCDHS to provide service facilitation services. They are responsible for the overall quality of the services provided to CCS participants and for day-to-day consultation to CCS staff within their respective agencies. Agency-based Service Directors meet with the DCDHS Service Directors on a monthly basis to review clinical issues, discuss programmatic needs, and ensure a consistent message throughout agencies.

Mental Health Professionals

Mental Health Professionals are included as members of all recovery teams. They participate in the assessment, service planning and authorization of services, and in discharge planning. In accordance with DHS 36.15, Mental Health Professionals are responsible for reviewing and attesting to the applicants' needs for psychosocial services and medical and supportive activities to address the desired recovery goals.

Substance Abuse Professionals

For persons who have or may have a substance use disorder, a Substance Abuse Professional participates in the assessment process, serves as a member of the recovery team, and participates in the service planning and discharge planning. They also are responsible, in conjunction with the Mental Health Professional, for authorizing services for persons with substance use disorders.

Service Facilitators

Service Facilitators ensure that the recovery plan and the service delivery flowing from it is integrated, coordinated, and monitored and is designed to support each CCS participant in a manner that helps them to make informed decisions, initiate recovery, build on their strengths, and gain or regain control over their lives. They work with CCS participants to optimize their autonomy and independence, to the greatest extent possible, by having them lead, control, and exercise choice over their life goals, and the services and supports that assist their recovery and resilience. The focus of the Service Facilitators is to ensure that each participant is being empowered and supported so they can achieve the highest possible level of independence and functioning. They serve as members of the recovery team and encourage the team to consider community resources that have appeal to the client before relying on professional services. The Service Facilitators explain and teach CCS participants about their rights and make sure they understand the options of using formal and informal grievance resolution processes. They provide direct assistance and support to CCS participants. They check in with participants on scheduled and emergent bases to make sure that service plans are being followed and continue to be useful in meeting their life goals.

The function of the Service Facilitator is to assist CCS participants in using their skills so they are truly directing their own service plans.

The CCS Staff Listing may be found in Section C. The electronic, on-site CCS Staff Listing will be continuously updated as additional staff are added and/or removed.

Quality Improvement Plan – DHS 36.07(1)(b)

The primary focus of the Quality Improvement Plan is to gauge the degree to which the CCS program is effective in helping clients progress toward recovery and achieve positive outcomes; a second focus is to assess satisfaction. Further, the Quality Improvement Plan is designed to aid in evaluating and improving program design and compliance, and to identify any issues that may be standing in the way of access, efficiency or efficacy. Measurable outcomes are identified for both program and client components, with data collected via the state-approved functional screen and the Program Participation System. Client satisfaction surveys are administered by DCDHS Planning and Evaluation Division and a written report is prepared annually summarizing client satisfaction results, as well as, program and system design outcomes. These reports are presented to the CCS Coordination Committee, which is responsible for updating the Quality Improvement Plan accordingly.

Of paramount importance in developing the plan was building in safeguards for confidentiality; procedures are explicit in assuring clients of their safety in expressing their opinions and evaluations of their services.

Dane County staff, with input and advice from the CCS Coordination Committee, design and update the Quality Improvement Plan. They will continue to receive outcome results and have ongoing input that is specified in policy and procedures.

Policies and procedures to implement a quality improvement plan may be found in Section D.

Coordination Committee – DHS 36.07(1)(c)

The Coordination Committee includes representatives from a cross-section of Dane County, particularly those who are recipients of services, advocates and service providers. The committee is comprised with an eye to different strengths and experiences, racial and ethnic diversity, and people who have different work and social circumstances; at least one-third of the members are consumers. This committee was formed specifically for the CCS program and did not exist as another committee. The committee has been meeting since October 16, 2013, concurrent with the initial writing of the Dane County CCS Application. Between August 2015 and October 2016, the committee held monthly meetings. In October 2016, the Committee voted to schedule meetings every-other-month and continues to meet at this frequency.

<u>Criteria for Recruiting and Contracting with Providers of Psychosocial Rehabilitation Services – DHS</u> <u>36.07(1)(d)</u>

Dane County has an open provider network of services designed to meet the needs of CCS participants. CCS administrative staff continuously monitor the extent to which the CCS program maintains an adequate array and capacity of services to meet the needs of CCS clients.

The criteria for recruiting and contracting with providers of psychosocial rehabilitation services includes:

- a. Determination that a need exists for the service;
- b. Announcement of the need for services through the mental health and substance abuse systems with outreach conducted as needed;

- c. Application by service providers to become a part of the network including assurances of compliance with the relevant rules and regulations under DHS 36 and other applicable federal and state requirements, as well as, the ability to comply with the County reporting requirements to establish centralized administrative and service records;
- d. Ability to comply with the County's purchasing requirements;
- e. Screening of potential service providers for recovery focus; use of evidence-based practices; compliance with the applicable regulations of DHS 36 Subchapter IV Personnel. including review and affirmation of compliance with: non-discrimination in employment practices, possession of appropriate credentials and licenses/certifications, successful completion of background checks, adequate supervision and clinical collaboration, orientation and training;
- f. Approval of the service provider by the CCS Administrator;
- g. Approval of the proposed contract by the County's administrative structure i.e., risk management, Corporation Counsel, etc.

Policies and Procedures for Updating and Revising the CCS Plan – DHS 36.07(1)(e)

The CCS Plan is updated and revised as needed to ensure that it accurately identifies the services being provided, any significant changes within the systems of care, including those beyond CCS, and any changes or additions to policies and procedures. The CCS Coordinating Committee reviews all amendments and revisions to the Plan. The feedback of this group is documented and maintained with the updated Plan.

The full policies and procedures may be found in the *CCS Policies and Procedures Manual* located on-site at the Dane County Department of Human Services and on the Dane County Department of Human Services website at: <u>https://www.danecountyhumanservices.org/Behavioral-Health/Comprehensive-Community-Services/Policies-and-Procedures</u>.

COORDINATION COMMITTEE – DHS 36.07(2)

2025 Plan Update:

<u>CCS Coordination Committee Recommendation</u>: At their September 18 and November 20, 2024 meetings, the CCS Coordination Committee reviewed the changes to the CCS Plan recommended by the CCS Administrator. Changes consisted of minor wording changes, updates to dates where needed, changes to providers listed in the various categories of the Service Array, an update to the contract payment section, and updated CCS Application and CCS Admission Agreement & Informed Consent. All proposed changes were approved by the CCS Coordination Committee at the January 15, 2025 meeting.

Response to CCS Coordination Committee: No response needed.

2023 Plan Update

<u>CCS Coordination Committee Recommendation</u>: At their January 18, 2023 meeting, the CCS Coordination Committee reviewed the changes to the CCS Plan recommended by the CCS Administrator. Changes consisted of updates to the organizational chart and structure, updates to dates where needed, changes to providers listed in the various categories of the Service Array, updates to policies, removal of Children Come First as a county program due to upcoming sunset in the first half of 2023, and revision of language from client to participant. All proposed changes were approved by the CCS Coordination Committee.

Response to CCS Coordination Committee: No response needed.

2021 Plan Update

<u>CCS Coordination Committee Recommendation</u>: At their January 20, 2021 meeting, the CCS Coordination Committee reviewed the changes to the CCS Plan recommended by the CCS Administrator and the CCS Analyst. Changes consisted of update of organizational chart, changes to providers listed in the various categories of the Service Array, updated policies, removal of contracted Provider Network Coordinator, update to gender-neutral language, and addition of Behavioral Health Resource Center as potential referral source/access point to CCS. All proposed changes were approved by the CCS Coordination Committee.

Response to CCS Coordination Committee: No response needed.

2019 Plan Update

<u>CCS Coordination Committee Recommendation</u>: At their March 20, 2019 meeting, the CCS Coordination Committee reviewed the changes to the CCS Plan recommended by the CCS Administrator and the CCS Analyst. Changes consisted of job title changes, grammar corrections, update of staff listing, update of organizational chart, and changes to providers listed in the various categories of the Service Array. All proposed changes were approved by the CCS Coordination Committee.

Response to CCS Coordination Committee: No response needed.

2017 Plan Update

<u>CCS Coordination Committee Recommendation</u>: At their March 15, 2017 meeting, the CCS Coordination Committee recommended the elimination staff names in the organizational chart and in the narrative of staff responsibilities.

<u>Response to CCS Coordination Committee</u>: The recommendation of the CCS Coordination Committee has been incorporated into the CCS Plan.

2016 Plan Update

<u>CCS Coordination Committee Recommendations</u>: At their May 15, 2016 meeting, the CCS Coordination Committee recommended that the staff listing in the CCS Plan not be placed online.

<u>Response to CCS Coordination Committee</u>: At this point it appears to be necessary to continue to include the staff listing in the CCS Plan as noted in DHS 36.07(1)(a).

2015 Plan

Summary

Over the course of a number of meetings, members of the CCS Coordination Committee gave feedback to the Dane County Mental Health Program Specialist who is heading up the CCS Application project. Members received packets of information to be reviewed at least two weeks prior to each meeting and came prepared with suggestions and recommendations. Some suggestions were wording or grammar edits and were quickly agreed to and incorporated. Other recommendations were substantive and often

generated discussion. Even where there may have been differences of opinion in detail, there was consensus that the recommendations are included in the listing for County staff to consider and respond to.

A general theme was to make the CCS Plan and its policies clear and usable, both to providers who will be part of the Dane County CCS program and to potential users of CCS services. A second major theme was to convey through the plan and policies the vision of CCS--i.e. that services are recovery-oriented, consumer-driven, and clinically and culturally competent and sensitive.

Significant changes were made to the CCS Plan in July of 2014, subsequent to DHS training and initial feedback from DQA. These changes were reviewed by the CCS Coordination Committee at their August meeting. This summary includes both recommendations made on the initial plan, and additional recommendations/observations made on the revised plan.

Response to CCS Coordination Committee

We have read your thoughtful recommendations to our drafts of the CCS Plan and the operating and personnel policies and procedures. Your well-conceived comments are very useful as we fine-tune our CCS application for submission to the State. As you will note when you receive the revised copies, most of your recommendations have been adopted. In the few instances where we did not take a recommendation, we will explain our reasoning below.

As you know, we had considered starting with a smaller, more focused consumer satisfaction survey whereby persons served could experiment with the process and take some time to observe how the CCS program would receive and use feedback. You gave us valuable ideas and information about ways to devise questions and a process to build trust and validity. Although we have since learned that the State will require the use of the ROSI from the outset, and so we will do that, we will still use your thoughts about process in places where we can.

We took under serious consideration the recommendation that we use a title other than "peer specialist" for the CCS position listed under DHS 36.10 (2)(e) 20. We agree with the committee that the title may be confusing in that it is too similar to certified peer specialists, and certified peer specialists are not required by the regulations. But we decided to keep the same title that is in the code for consistency so as to be clear when the program surveyors audit for certification. Updated information from the State has defined the expectation that peer support be provided by a certified peer specialist.

Recommendations regarding the staffing of an intake unit will be taken into consideration, however we may be limited initially by the ability to obtain immediate hiring authority. Over time, the intent is to grow the intake unit along with the CCS program and to incorporate peers whenever possible.

Aside from these points, all of your recommendations have been adopted and incorporated into the application.

We appreciate your thoughtful comments regarding outreach to special populations and new providers. We have incorporated these ideas in an Request for Proposal for a Provider Network Administrator and will expect that entity to present a detailed plan regarding outreach to providers.

You have our extreme gratitude and admiration for the work and energy you have put into this review. Our application will be better and stronger for your efforts. We are grateful that you will be continuing with us as we become certified and begin the exciting work of implementing a CCS program in Dane County.

The Coordinating Committee Report may be found in Section E.

CURRENT COUNTY SYSTEM OF SERVICES – DHS 36.07(3)

Currently Available Services - DHS 36.07(3)

Publicly-funded services currently available to adult Dane County residents for their mental health and/or substance use disorder needs include:

- Outreach
- Information and Referral
- Peer Support
- Crisis Intervention including crisis intervention and stabilization services along with the Care Centers.
- Detoxification
- Case Management
- Outpatient including counseling/therapeutic resources, day treatment, and medication management.
- Benefits assisting clients with accessing benefits, such as social security and other benefits.
- Employment including work related services and supported employment.
- Community Support Programs
- Residential a range of services are offered including adult family homes, community-based residential facilities, group homes, and Recovery House.
- Inpatient

These services are purchased from outside entities through contracts with the County and are administered by the DCDHS Behavioral Health Community Services Managers.

Publicly-funded services currently available to Dane County youth for their mental health and/or substance use disorder needs include:

- Outreach
- Information and Referral
- Prevention and early intervention
- Crisis Intervention including crisis intervention and stabilization services
- Case Management
- Outpatient including counseling/therapeutic resources, in-home family counseling, day treatment, and medication management.
- Employment including work related services and supported employment.
- Residential a range of services are offered including foster homes, community-based residential facilities, and group homes.
- Inpatient
- Children's Long Term Support Waiver—a Medicaid program that offers a range of services including respite, day services, and specialized therapeutic supplies.

The CCS Program relies on many of the same services available within the larger Dane County behavioral health continuum of care. In addition, new providers continue to join the CCS Provider Network, thus increasing the range of options available to CCS participants. Dane County hopes to further develop additional needed supports, expand the CCS provider network and increase the number of persons served through the CCS program.

The CCS model represents a significant change in the approach in Dane County to contracting for services. Some of those differences are outlined in Table 1.

Table 1: Select Differences Between General DCDHS Contracts for Mental Health and AODA Services and CCS Program Contracts

Feature	General DCDHS Contracts	CCS Program
Application to be a Service Provider	Done in response to a request for proposal (RFP). RFPs are released every 5 years or whenever there is a need for or a significant change in a service. The majority of RFPs are released in April and due in May of each year. Typically one contract to a single provider is awarded per RFP.	All willing and qualified providers may apply at any time to the County's Provider Network Coordinator.
Contract Term	Typically 1 year.	CCS contracts are for a two year term limit provided that CCS funding continues as currently proposed at the State level and that the service provider continues to be credentialed by the County. Contracts may be amended as needed.
Contract Payment	 Most general contracts are paid based on the following two payment methods: 1. 1/12th of contract amount paid each month, requiring budgets and expense reports to be submitted as required. Contracts may also include provisions for generating and/or sharing Medicaid or other revenue. 2. Unit times unit rate, requiring expense reporting as required. 	CCS contracts are paid on the basis of unit times unit rate (unit x unit rate) based on the credentials of the performing service provider, i.e., Masters, Bachelors, etc. Service providers bill (and are paid) based on their approved rates in their CCS contract with the County. Expense reporting is required for contracts exceeding \$100,000. There will be an annual reconciliation process in compliance with State procedures. Rates must be supported by the agency audit and other documentation. Providers are required to submit claims through the County's on- line web-based application.
Orientation and Training	Providers are expected to independently provide staff training and orientation.	County provides some, but not all, of the orientation and training required under DHS 36.12 (1). Providers are required to provide documentation to the County's Provider Network Coordinator that each staff member receives the required number of hours of initial and ongoing training each year.

Table 1: Select Differences Between General DCDHS Contracts for Mental Health and AODA Services

 and CCS Program Contracts

Feature	General DCDHS Contracts	CCS Program
Service Authorizations	Process varies from contract to contract.	Services are selected based on the needs, goals, and preferences of the client and identified in the recovery plan. Services must be authorized by the Mental Health Professional, and for clients who have or are suspected of having a substance use disorder, by the Substance Abuse Professional.

Process to Include CCS in Discharge Planning - DHS 36.07(3)(a)

When a CCS participant is being discharged from a non-CCS program or facility, CCS service facilitation staff play an active role in planning and facilitating services and supports needed to ensure a smooth transition. The CCS staff consult with discharge planning staff and attend discharge related meetings when possible to ensure that appropriate follow up care is provided. The CCS recovery plan will be updated as needed if new or different psychosocial rehabilitation services are needed. CCS will serve as an advocate for other participant needs not covered by the CCS service array. CCS's role includes ensuring the discharge planning staff in non-CCS programs and facilities will continue to be informed about the CCS program, apprised of the process for referring to CCS, encouraged to educate clients about CCS, and include CCS in discharge planning as a service option available to clients in the community.

Role When Emergency Placements/Protective Services Are Involved – DHS 36.07(3)(b)

CCS will make every effort to prevent the need for protective services by coordinating services and facilitating additional supports as needed. When an emergency protective placement is being sought or when protective services or an elder abuse investigation is under way, CCS will be notified before action is taken whenever possible. The Adult Protective Services staff will coordinate legal responsibilities. The CCS worker's role is to support the person and explain what is happening, and to use a non-directive approach to educate the person about options they may want to or be able to pursue. CCS will also play its role as service facilitator and advocate.

Role in Providing Services in Conjunction with Other Care Coordination – DHS 36.07(3)(c)

CCS maintains the responsibility for continuity of services and assurance that service is provided according to CCS standards, even when other care coordination services are involved. Based upon the domains addressed in the assessment, the CCS and the care coordination entity staffs agree to deliver specific services or treatment defined in the recovery plan that is written or updated to assure coordination. The person served and their recovery team are involved in decisions. Teams work together to fully integrate services.

Role When a Consumer is Under Ch 51, Stats., Commitment – DHS 36.07(3)(d)

When CCS is providing services to a client under a ch. 51, Stats. commitment, CCS's role is to continue to focus on the treatment and service needs of the client, providing the client as much autonomy and ability

to direct his/her treatment and services as possible. CCS will comply with the requirements under both Chapter 51 and Chapter 36. The conditions of the commitment may be incorporated into the recovery plan, if the client so desires. The client will be informed that the CCS Service Facilitator will comply with any reporting required by the Ch.51 monitoring entity regarding adherence to the commitment order.

Establishing Contracts and Agreements with Community Agencies – DHS 36.07(3)(e)

The CCS Program has an open network meaning that qualified agencies/service providers may be added at any time. Contracts, and when permissible, Agreements with providers will be established to ensure there is a rich variety of treatment options available to CCS clients. Providers must be recovery-focused; able and willing to comply with the vision, values, rules and regulations of CCS; meet the qualifications under DHS 36 Subchapter IV-Personnel; be willing to comply with the County's purchasing requirements; meet additional standards established by the CCS Program, such as use of or reporting into the centralized information system (CCS Module); and be approved through the appropriate County processes.

Establishing Contracts When A Needed Service is Not Available – DHS 36.07(3)(f)

The Provider Network Coordinator will monitor the provider network to ensure that all CCS services are available and accessible. In situations where a needed service is not available or does not exist, the Provider Network Coordinator will be responsible for recruiting new providers to meet that need and expediting certification as a CCS provider. Contracts will be established in the same manner as those with other community agencies.

Crisis Services – DHS 36.07(3)(g)

CCS staff provide crisis planning services but not crisis intervention services. CCS works closely with the DHS 34 crisis intervention services operated by the Emergency Services Unit (ESU) of Journey Mental Health Center (JMHC). CCS participants are given clear and understandable information about how to contact crisis services at any time. CCS screens participants for risk of harm and makes referrals to ESU as appropriate for assessment and planning. CCS staff coordinate with ESU when crisis services are needed and offer to assist with crisis planning.

CCS PROCESSES AND SERVICES – DHS 36.07(4)(a)

Psychosocial Rehabilitation Service Array – DHS 36.07(4)(a)

Dane County provides a full array of psychosocial rehabilitation services across the life span. The services offered in the various array categories are based on the anticipated service needs of and viable treatment interventions for CCS participants, including minors and the elderly. The service array along with the currently-contracted service providers with which DCDHS already contracts for the provision of CCS services are described in the following narrative, in the on-line Forward Health *Provider Handbook for Comprehensive Community Services* under covered services found at: https://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Display.aspx, and in the CCS Psychosocial Rehabilitation (PSR) Service Array table found in Section B.

1. *Screening and assessment services* include: completion of initial and annual functional screens, determination of need for psychosocial rehabilitation services, and completion of the initial comprehensive assessment, assessment summary and ongoing assessments as needed.

Current service providers for the initial screening and determination of need include: DCDHS CCS Intake Workers in the Behavioral Health Division.

Current service providers for the completion of the assessment, assessment summary, and ongoing assessments include: Anesis Center for Marriage and Family Therapy; Caring Connection, Catalyst for Change, Common Threads Family Resource Center; Community Counseling Center; Community Living Alliance (adults only); Day One Mental Health Services; Ellie Mental Health; Forward Learning Youth and Young Adults; Grand Journey; Greyley Wellness; HealthyMinds; Hope Inspired; Insight Counseling & Wellness; Journey Mental Health Center; Keeping Families Together; Lutheran Social Services; Radiant Minds Behavioral Health Services; RCC Wellness and Support Services; RISE Wisconsin; SOAR Case Management Services (adults only); Steaming Ahead with Health Interventions; Step Time; Tellurian (adults only); The Hmong Institute; The Psychology Clinic; Triquestrian; True Believers; Wisconsin Family Mental Balance and DCDHS (CCS/CLTS only).

2. *Recovery planning* includes the initial and ongoing development and review of a written plan of the psychosocial rehabilitation services that will be provided or arranged for the member that is based on the individualized assessment of the individual.

Current service providers include: Anesis Center for Marriage and Family Therapy; Caring Connection, Catalyst for Change, Common Threads Family Resource Center; Community Counseling Center; Community Living Alliance (adults only); Day One Mental Health Services; Ellie Mental Health; Forward Learning Youth and Young Adults; Grand Journey; Greyley Wellness; HealthyMinds; Hope Inspired; Insight Counseling & Wellness; Journey Mental Health Center; Keeping Families Together; Lutheran Social Services; Manifest Wellness; Neu K; Open Door Center for Change; Orchestra X; Orion Family Services; Radiant Minds Behavioral Health Services; RCC Wellness and Support Services; RISE Wisconsin; SOAR Case Management Services (adults only); Steaming Ahead with Health Interventions; Step Time; Tellurian (adults only); The Hmong Institute; The Psychology Clinic; Triquestrian; True Believers; Wisconsin Family Mental Balance and DCDHS (CCS/CLTS only).

3. Service facilitation includes activities that ensure the member, (and where appropriate for minors, the member's family), receive assessment, service planning, service delivery, and supportive activities in an appropriate and timely manner. It also includes ensuring the service plan and service delivery for each member is coordinated, monitored, and designed to support the individual in a manner that helps the individual achieve the highest possible level of independent functioning. Includes assisting the member in self-advocacy and helping the member obtain other necessary services such as medical, dental, legal, financial, and housing services.

Current service providers include: Anesis Center for Marriage and Family Therapy; Caring Connection, Catalyst for Change, Common Threads Family Resource Center; Community Counseling Center; Community Living Alliance (adults only); Day One Mental Health Services; Ellie Mental Health; Forward Learning Youth and Young Adults; Grand Journey; Greyley Wellness; HealthyMinds; Hope Inspired; Insight Counseling & Wellness; Journey Mental Health Center; Keeping Families Together; Lutheran Social Services; Manifest Wellness; Neu K; Open Door Center for Change; Orchestra X; Orion Family Services; Radiant Minds Behavioral Health Services; RCC Wellness and Support Services; RISE Wisconsin; SOAR Case Management Services (adults only); Steaming Ahead with Health Interventions; Step Time; Tellurian (adults only); The Hmong Institute; The Psychology Clinic; Triquestrian; True Believers; Wisconsin Family Mental Balance and DCDHS (CCS/CLTS only).

4. *Diagnostic evaluations* include specialized evaluations needed by the member, including, but not limited to: neuropsychological, geropsychiatric, specialized trauma, eating disorder, adolescent behavioral and adolescent alcohol/drug assessment intervention program evaluations in order to determine the appropriate treatment and behavioral interventions and the level of community support needed by the member.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services; Badger Care; Caring Connection; Catalyst for Change; CAYA Clinic; Children's Service Society of Wisconsin; Children's Therapy Network; Common Threads Family Resource Center; Community Care Programs; Community Counseling Center; Connections Counseling; Day One Mental Health Services; Deeper Insights; Ease-of-Mind Mental Health Solutions; Edelweiss Behavioral Health; Elite Cognition; Family Service Madison; Four Winds Counseling; Golden Mend Wellness and Counseling; HealthyMinds; Hope Inspired; Imagine Your Capacity; Insight Counseling & Wellness; Journey Mental Health Center; Kabba Recovery Services; Maleck Therapy; Mercyland Psychiatry; Neu K; Open Door Center for Change; RISE Wisconsin; SOAR Case Management Services; Tellurian; The Psychology Clinic; The Rainbow Project; Trailways; Triquestrian; True Believers; Willow Counseling and Therapeutic Art Center; Wisconsin Family Mental Balance.

5. Medication management activities include: medication evaluation to diagnosis and specify target symptoms; prescribing medication to alleviate the identified symptoms; medication monitoring for changes in the member's symptoms and tolerability of side effects; individual client education to increase the member's understanding of the benefits of the medication and symptoms being treated and supporting the member in taking his or her medication. This also includes reviewing data, including other medications used to make medication decisions.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services; ASPIRES247; Badger Care; Better Bee; Caring Connection; Catalyst for Change; Community Living Alliance; Day One Mental Health Services; Ease-of-Mind Mental Health Solutions; Edelweiss Behavioral Health; Elite Cognition; Golden Mend Wellness and Counseling; HealthyMinds; Hope Inspired; Horizon High School of Madison; Journey Mental Health Center; Kabba Recovery Services; Mercyland Psychiatry; Neu K; Orchestra X; Our Generations; Pecku Anchored AFH; SOAR Case Management Services; Stay Focused Counseling; Step Time; Still Standing Enterprise; Tellurian; The Hmong Institute; The Psychology Clinic; Triquestrian; True Believers; Williams Career Placement; Winding Path Psychotherapy; Wisconsin Family Mental Balance.

6. *Physical health monitoring* services include activities related to the monitoring and management of a member's physical health. This may include assisting and training the member and the member's family to identify symptoms of physical health conditions, monitoring physical health medications and treatments, and developing health monitoring and management skills.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services; ASPIRES247; Badger Care; Better Bee; Body Mechanix; Capital Minds; Caring Connection; Catalyst for Change; Community Counseling Center; Community Living Alliance; Cornucopia; Day One Mental Health Services; Ease-of-Mind Mental Health Solutions; Elite Cognition; Golden Mend Wellness and Counseling; Greyley Wellness; HealthyMinds; Hope Inspired; Horizon High School of Madison; Housing Initiatives; Journey Mental Health Center; Keeping Families Together; Mercyland Psychiatry; Neu K; New Growth Mental Health Counseling; Orchestra X; Our Generations; Pecku Anchored AFH; SOAR Case Management Services; Still Standing Enterprise; Tellurian; The Hmong Institute; The Psychology Clinic; Triquestrian; True Believers; Venus Inspires; Williams Career Placement; Wisconsin Family Mental Balance.

7. *Peer supports* services include a wide range of supports to assist the member and the member's family with mental health and/or substance abuse issues in the recovery process. These services promote

wellness, self-direction, and recovery by enhancing the skills and abilities of members to meet their chosen goals.

Current service providers include: Adventures in Wellness and Recovery; Anesis Center for Marriage and Family Therapy; ARC Community Services; Catalyst for Change; CAYA Clinic; Chrysalis; Connections Counseling; Cornucopia; EmployAbility: Employment and Housing Solutions; Forward Learning Youth and Young Adults; Golden Mend Wellness and Counseling; Grand Journey; HealthyMinds; Hope Inspired; Horizon High School of Madison; Housing Initiatives; Insight Counseling & Wellness; Journey Mental Health Center; Lutheran Social Services; Orchestra X; Our Generations; Safe Communities; SOAR Case Management Services; Tellurian; The Hmong Institute; Triquestrian; Wisconsin Family Mental Balance; Wisconsin Family Ties.

8. Individual skill development and enhancement services include training in communication, interpersonal skills, problem solving, decision-making, self-regulation, conflict resolution, and other specific needs identified in the member's service plan. Services also include training in daily living skills related to personal care, household tasks, financial management, transportation, shopping, parenting, accessing and connecting to community resources and services (including health care services), and other specific daily living needs identified in the member's service plan.

Services provided to minors also focus on improving integration into and interaction with the minor's family, school, community, and other social networks. Services include assisting the minor's family in gaining skills to assist the minor with individual skill development and enhancement.

Current service providers include: Adventures in Wellness and Recovery; Anesis Center for Marriage and Family Therapy; Anu Family Services; ARC Community Services; ASPIRES247; Badger Care; Badger Youth Services; Better Bee; Body Mechanix; Building Great Kids Therapy; Capital Minds; Caring Connection; Cascading Waters; Catalyst for Change; CAYA Clinic; Children's Therapy Network; Christian Servants Home Care; Chrysalis; Collective Voices; Common Threads Family Resource Center; Community Counseling Center; Community Living Alliance; Cornucopia; Creative Forces Therapy; Day One Mental Health Services; Driftless Counseling, LLC dba Trailhead Therapy and Mentoring; Dyer Multisensory Approach; Ease-of-Mind Mental Health Solutions; Elite Cognition; Ellie Mental Health; EmployAbility: Employment and Housing Solutions; Employment Resources, Inc.; Essence Realized; Family Service Madison; Forward Counseling and Consultation; Forward Learning Youth and Young Adults; Foundations Counseling Center; Four Winds Counseling; Golden Mend Wellness and Counseling; Goodwill Industries of South Central Wisconsin; Grand Journey; Greenroot Yoga; Greyley Wellness; Hancock Center for Creative Arts Therapies; HealthyMinds; Hope Inspired; Horizon High School of Madison; Housing Initiatives; IGNTD; Imagine Your Capacity; Insight Counseling & Wellness; Jason C Smith MA LMFT; Journey Mental Health Center; Kabba Recovery Services; Keeping Families Together; Lutheran Social Services; Manifest Wellness; Neu K; New Growth Mental Health Counseling; New Level Behavioral Health; Open Door Center for Change; Orchestra X; Orion Family Services; Our Generations; Pecku Anchored AFH; Radiant Minds Behavioral Health Services; Rainbow Marifrog; Rape Crisis Center; RISE Wisconsin; SOAR Case Management Services; Stay Focused Counseling; Steaming Ahead With Health Interventions; Step Time; Still Standing Enterprise; Tellurian; The Hmong Institute; The Psychology Clinic; The Rainbow Project; Trailways; Triquestrian; True Believers; Venus Inspires; Williams Career Placement; Willow Counseling and Therapeutic Art Center; Winding Path Psychotherapy; Wisconsin Family Mental Balance; Wisconsin Family Ties.

9. *Employment-related skill training* services address the member's illness or symptom-related problems in finding, securing, and keeping a job. Services may include, but are not limited to: employment and education assessments; assistance in accessing or participating in educational and employment-related services; education about appropriate job-related behaviors; assistance with job preparation activities such as personal hygiene, clothing, and transportation; on-site employment evaluation and

feedback sessions to identify and manage work-related symptoms; assistance with work-related crises; and individual therapeutic support.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services; ASPIRES247; Badger Youth Services; Better Bee; Catalyst for Change; Christian Servants Home Care; Chrysalis; Common Threads Family Resource Center; Community Counseling Center; Community Living Alliance; Cornucopia; Day One Mental Health Services; Elite Cognition; Ellie Mental Health; EmployAbility: Employment and Housing Solutions; Employment Resources, Inc.; Essence Realized; Family Service Madison; Forward Counseling and Consultation; Goodwill Industries of South Central Wisconsin; Grand Journey; HealthyMinds; Hope Inspired; Horizon High School of Madison; Housing Initiatives; Journey Mental Health Center; Keeping Families Together; Neu K; New Growth Mental Health Counseling; Orchestra X; Our Generations; Pecku Anchored AFH; Radiant Minds Behavioral Health Services; Rape Crisis Center; Stay Focused Counseling; Step Time; Still Standing Enterprise; Tellurian; The Hmong Institute; The Psychology Clinic; Triquestrian; True Believers; Williams Career Placement; Willow Counseling and Therapeutic Art Center; Wisconsin Family Mental Balance.

- 10. Individual and/or Family Psychoeducation services include:
 - Providing education and information resources about the member's mental health and/or substance abuse issues.
 - Skills training.
 - Problem solving.
 - Ongoing guidance about managing and coping with mental health and/or substance abuse issues.
 - Social and emotional support for dealing with mental health and/or substance abuse issues.

Current service providers include: Adventures in Wellness and Recovery; Anesis Center for Marriage and Family Therapy; Anu Family Services; ARC Community Services; ASPIRES247; Badger Care; Badger Youth Services; Better Bee; Body Mechanix; Capital Minds; Caring Connection; Cascading Waters; Catalyst for Change; CAYA Clinic; Children's Service Society of Wisconsin; Children's Therapy Network; Christian Servants Home Care; Collective Roots Psychotherapy; Collective Voices; Common Threads Family Resource Center; Community Care Programs; Community Counseling Center; Community Living Alliance; Cornucopia; Creative Forces Therapy; Day One Mental Health Services; Deeper Insights; Diamond Mental Health; Driftless Counseling, LLC dba Trailhead Therapy and Mentoring; Ease-of-Mind Mental Health Solutions; Elite Cognition; Ellie Mental Health; EmployAbility: Employment and Housing Solutions; Essence Realized; Family Service Madison; Forward Counseling and Consultation; Forward Learning Youth and Young Adults; Foundations Counseling Center; Four Winds CounselingGolden Mend Wellness and Counseling; Goodwill Industries of South Central Wisconsin; Grand Journey; Greenroot Yoga; Grevley Wellness; Hancock Center for Creative Arts Therapies; HealthyMinds; Hope Inspired; Horizon High School of Madison; Imagine Your Capacity; Insight Counseling & Wellness; Jason C Smith MA LMFT; Journey Mental Health Center; Kabba Recovery Services; Keeping Families Together; Lutheran Social Services; Maleck Therapy; Manifest Wellness; Mercyland Psychiatry; Michelle Ayres; Moontree; Neu K; New Growth Mental Health Counseling; New Level Behavioral Health; Open Door Center for Change; Orchestra X; Orion Family Services; Our Generations; Pecku Anchored AFH; Rainbow Marifrog; Rape Crisis Center; RISE Wisconsin; SOAR Case Management Services; Stay Focused Counseling; Step Time; Still Standing Enterprise; Tellurian; The Hmong Institute; The Psychology Clinic; The Rainbow Project; Think & Grow; Trailways; Triquestrian; True Believers; Venus Inspires; Willow Counseling and Therapeutic Art Center; Winding Path Psychotherapy; Wisconsin Family Mental Balance; Wisconsin Family Ties.

11. *Wellness management and recovery* services, which are generally provided as mental health services, include empowering members to manage their mental health and/or substance abuse issues, helping

them develop their own goals, and teaching them the knowledge and skills necessary to help them make informed treatment decisions. These services include: psychoeducation; behavioral tailoring; relapse prevention; development of a recovery action plan; recovery and/or resilience training; treatment strategies; social support building; and coping skills.

Recovery support services include: assisting the member in increasing engagement in treatment, developing appropriate coping strategies, and providing aftercare and assertive continuing care. Continuing care includes relapse prevention support and periodic follow-ups and is designed to provide less intensive services as the member progresses in recovery.

Current service providers include: Adventures in Wellness and Recovery; Anesis Center for Marriage and Family Therapy; ARC Community Services; ASPIRES247; Badger Care; Badger Youth Services; Better Bee; Catalyst for Change; CAYA Clinic; Community Counseling Center; Community Living Alliance: Cornucopia: Day One Mental Health Services: Driftless Counseling. LLC dba Trailhead Therapy and Mentoring; Ease-of-Mind Mental Health Solutions; Elite Cognition; Ellie Mental Health; Essence Realized; Family Service Madison; Forward Counseling and Consultation; Golden Mend Wellness and Counseling; Greenroot Yoga; Greyley Wellness; HealthyMinds; Hope Inspired; Horizon High School of Madison; Imagine Your Capacity; Insight Counseling & Wellness; Journey Mental Health Center; Kabba Recovery Services; Lutheran Social Services; Maleck Therapy; Manifest Wellness; Mercyland Psychiatry; Moontree; Neu K; New Growth Mental Health Counseling; Orchestra X; Our Generations; Radiant Minds Behavioral Health Services; Rape Crisis Center; Safe Communities; SOAR Case Management Services; Stay Focused Counseling; Step Time; Still Standing Enterprise; Tellurian; The Hmong Institute; The Rainbow Project; Trailways; Triquestrian; Venus Inspires; Williams Career Placement; Willow Counseling and Therapeutic Art Center; Winding Path Psychotherapy; Wisconsin Family Mental Balance.

12. *Psychotherapy* includes the diagnosis and treatment of mental, emotional, or behavioral disorders, conditions, or addictions through the application of methods derived from established psychological or systemic principles for the purpose of assisting people in modifying their behaviors, cognitions, emotions, and other personal characteristics, which may include the purpose of understanding unconscious processes or intrapersonal, interpersonal, or psychosocial dynamics.

Current service providers include: Anesis Center for Marriage and Family Therapy; Anu Family Services; ARC Community Services; ASPIRES247; Capital Minds; Caring Connection; Cascading Waters; Catalyst for Change; CAYA Clinic; Children's Service Society of Wisconsin; Children's Therapy Network; Collective Roots Psychotherapy; Common Threads Family Resource Center; Community Care Programs; Community Counseling Center; Community Living Alliance; Connections Counseling; Creative Forces Therapy; Day One Mental Health Services; Deeper Insights; Diamond Mental Health; Driftless Counseling, LLC dba Trailhead Therapy and Mentoring; Ease-of-Mind Mental Health Solutions; Edelweiss Behavioral Health; Elite Cognition; Ellie Mental Health; EmployAbility: Employment and Housing Solutions; Family Service Madison; Forward Counseling and Consultation; Forward Learning Youth and Young Adults; Foundations Counseling Center; Four Winds Counseling; Ginko Counseling Services; Golden Mend Wellness and Counseling: Greyley Wellness; Hancock Center for Creative Arts Therapies; HealthyMinds; Hope Inspired; Imagine Your Capacity; Insight Counseling & Wellness; Jason C Smith MA LMFT; Journey Mental Health Center; Kabba Recovery Services; Keeping Families Together; Lutheran Social Services; Maleck Therapy; Manifest Wellness; Mercyland Psychiatry; Michelle Ayres; Moontree; Neu K; New Growth Mental Health Counseling; New Level Behavioral Health; Open Door Center for Change: Orchestra X: Orion Family Services: Our Generations: Rainbow Marifrog: Rape Crisis Center; RISE Wisconsin; Samaritan Counseling Center; SOAR Case Management Services; Stay Focused Counseling; Step Time; Tellurian; The Hmong Institute; The Psychology Clinic; The Rainbow Project; Think & Grow; Trailways; Triquestrian; Willow Counseling and Therapeutic Art Center; Winding Path Psychotherapy; Wisconsin Family Mental Balance.

13. Substance abuse treatment services include counseling of persons affected by problems related to the abuse of alcohol or drugs including individual, group, and family counseling. Substance abuse treatment services can be provided in day treatment (DHS 75.52, Wis. Admin. Code), outpatient (DHS 75.49, 75.50, or 75.51), and residential (DHS 75.54 or 75.53) settings. The other categories in the service array also include psychosocial rehabilitation substance abuse services that support participants in their recovery.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services; Badger Care; Catalyst for Change; CAYA Clinic; Connections Counseling; Day One Mental Health Services; Ellie Mental Health; Forward Counseling and Consultation; Four Winds Counseling; Golden Mend Wellness and Counseling; HealthyMinds; Hope Inspired; Journey Mental Health Center; Kabba Recovery Services; Keeping Families Together; Maleck Therapy; Manifest Wellness; Moontree; New Growth Mental Health Counseling; New Level Behavioral Health; Orchestra X; Our Generations; Rape Crisis Center; Stay Focused Counseling; Step Time; Tellurian; The Psychology Clinic; Triquestrian; Winding Path Psychotherapy; Wisconsin Family Mental Balance.

Anticipated Service Needs of Potential Consumers – DHS 36.07(4)(a)1.

The anticipated service needs of potential CCS members, including minors and the elderly, based upon the assessment domains identified in s. DHS 36.16(4) are delineated in Table 2.

Treatment Interventions to Address Needs – DHS 36.07(4)(a)2.

The anticipated treatment interventions to address the needs of potential CCS members, including minors and the elderly, based up based upon the assessment domains identified in s. DHS 36.16(4) are delineated in Table 2.

Methods to Identify and Contract with Service Providers – DHS 36.07(4)(b)

Dane County has an open provider network of services designed to meet the needs of CCS enrollees. CCS administrative staff continuously monitor the extent to which the CCS program maintains an adequate array and capacity of services to meet the needs of CCS members.

The criteria for recruiting and contracting with providers of psychosocial rehabilitation services include:

- a. Determination that a need exists for the service;
- b. Announcement of the need for services through the mental health system;
- c. Application by service providers to become a part of the network including assurances of compliance with the relevant rules and regulations under DHS 36 and other applicable federal and state requirements, as well as, the ability to comply with the County reporting requirements to establish centralized administrative and service records;
- d. Ability to comply with the County's purchasing requirements;

- e. Screening of potential service providers for recovery focus; use of evidence-based practices; knowledge and expertise in the relevant service categories; compliance with the applicable regulations of DHS 36 Subchapter IV Personnel. including review and affirmation of compliance with non-discrimination in employment practices, possession of appropriate credentials and licenses/certifications, completion of background checks, adequate supervision and clinical collaboration, orientation and training;
- f. Approval of the service provider by the CCS Administrator;
- g. Approval of the proposed contract by the County's administrative structure i.e., risk management, Corporation Counsel, etc.

Table 2: Anticipated Service Needs and Treatment Interventions – DHS 36.07(4)(a)1.& 2.

Evidence-based practices will be used to the extent possible.

Assessment Domain	Ar	nticipated Service Nee	eds	Treatment Interventions		
Domain	General	Minors	Elderly	General	Minors	Elderly
Life Satisfaction	Assistance to identify and achieve or make progress toward life goals.	Assistance to identify and achieve or make progress toward life goals.	Assistance to identify and achieve or make progress toward life goals.	Person-centered planning and service facilitation.	Person-centered planning and service facilitation.	Person-centered planning and service facilitation.
Basic Needs	Assistance with meeting basic needs for food, clothing, utility payments, etc. Note: Housing and transportation are addressed in separate sections.	Assistance to the family with meeting basic needs for food, clothing, utility payments, etc. Note: Housing and transportation are addressed in separate sections.	Assistance with meeting basic needs for food, clothing, utility payments, etc. Note: Housing and transportation are addressed in separate sections.	Screening and assessment, person centered planning, and service facilitation to help the participant obtain necessary services.	Screening and assessment, person centered planning, and service facilitation to help the minor, and/or the minor's family to obtain necessary services.	Screening and assessment, person centered planning, and service facilitation to help the participant obtain necessary services.
Social Network and Family Involvement	Assistance with becoming involved in the community, having positive relationships with family members, having friends and intimate relationships.	Assistance with becoming involved in the community, having positive relationships with family members, having friends and intimate relationships.	Assistance with becoming involved in the community, having positive relationships with family members, having friends and intimate relationships.	Peer supports and individual skill development.	Peer supports, psychotherapy, family psychoeducation, and individual skill development and enhancement. This may include referral and linkages to other DCDHS funded services, such as youth centers, the Neighborhood Intervention Program (NIP), etc.	Peer supports and individual skill development. This may include referral and linkages with senior centers.

Assessment	Ar	Anticipated Service Needs			Treatment Interventions		
Domain	General	Minors	Elderly	General	Minors	Elderly	
Community Living Skills	Assistance with obtaining the skills and supports necessary to live safely and independently in the community.	Assistance with obtaining the skills necessary to live safely in their home and community.	Assistance with obtaining the skills and supports necessary to live safely in their home and community.	Individual skill development	Individual skill development, parent skill training	Individual skill development and referral and linkages with services for persons who are elderly and/or disabled, such as personal care and/or home chore assistance, meals on wheels, etc.	
Housing Issues	Assistance with obtaining and maintaining safe and affordable housing.	Assistance with obtaining and maintaining safe and affordable housing.	Assistance with obtaining and maintaining safe and affordable housing, including obtaining residential supports necessary to maintain the individual in his/her own home for as long as desired.	Person centered planning, service facilitation, and individual skill development and enhancement funded through CCS. Other residential supports such as adult family homes, group homes, and community-based residential facilities may be funded outside of CCS.	Person centered planning, service facilitation, and individual skill development and enhancement funded through CCS. Other residential supports such as foster homes, treatment foster homes, group homes, and residential treatment centers may be funded outside of CCS.	Person centered planning and service facilitation funded through CCS. Other residential supports such as adult family homes, group homes, and community-based residential facilities may be funded outside of CCS.	
Employment	Assistance with qualifying for, finding, securing, and retaining a job. Assistance with coordination of benefits so that	Assistance with preparing for and finding a job.	To have meaningful, constructive daily activities.	Employment and education assessments; education about appropriate job related behaviors; job preparation	Employment and education assessments; education about appropriate job related behaviors;	Person centered planning, service facilitation, with referral and linkages to other services as needed.	

Assessment Domain	Ar	Anticipated Service Needs			Treatment Interventions		
	General	Minors	Elderly	General	Minors	Elderly	
	health/medical/ and/or SSI or other benefits are not lost.			activities; employment related skill training to find, secure, and retain a job; on-the-job support; assistance with work related crises; IPS supported employment.	job preparation activities.		
Education	Assistance to identify and achieve educational goals.	Assistance to identify and achieve educational goals.	To have meaningful, constructive daily activities.	Individual skill development and enhancement.	Individual skill development and enhancement.	Individual skill development and enhancement.	
Finances and Benefits	Having an income sufficient to meet one's daily needs for food, clothing, shelter, and transportation.	Having an income sufficient to meet one's daily needs for food, clothing, shelter, and transportation.	Having an income sufficient to meet one's daily needs for food, clothing, shelter, and transportation.	Education of and assistance with obtaining needed benefits.	Education of and assistance with obtaining needed benefits.	Education of and assistance with obtaining needed benefits.	
Mental Health	Symptom identification and management. To develop coping skills to manage one's mental health. To maintain mental health stability.	Symptom identification and management. To develop coping skills on an individual and family basis to manage and support the individual's mental health. To maintain mental health stability.	Symptom identification and management. To develop coping skills to manage one's mental health. To maintain mental health stability.	Diagnostic evaluations, illness management and recovery, psychotherapy	Diagnostic evaluations, illness management and recovery, psychotherapy	Diagnostic evaluations, illness management and recovery, psychotherapy	
Physical Health	Need to address and monitor physical health issues and to receive adequate	Need to address and monitor physical health issues and to receive adequate	Need to address and monitor physical health issues and to receive adequate	Physical health monitoring and referrals to needed services.	Physical health monitoring and referrals to needed services.	Physical health monitoring and referrals to needed services.	

Assessment Domain	Ar	nticipated Service Nee	ds	Treatment Interventions		
Domain	General	Minors	Elderly	General	Minors	Elderly
	routine health and dental care.	routine health and dental care.	routine health and dental care.			
Substance Use	To maintain sobriety. Identification, intervention, and treatment of substance use disorder issues.	Identification, intervention, and treatment of substance use disorder issues.	To maintain sobriety. Identification, intervention, and treatment of substance use disorder issues.	Diagnostic evaluations, individual psychoeducation, psychotherapy, day treatment, and outpatient substance counseling.	Diagnostic evaluations, individual and/or family psychoeducation, psychotherapy, day treatment, and outpatient substance counseling.	Diagnostic evaluations, individual psychoeducation, psychotherapy, day treatment, and outpatient substance counseling.
Trauma and significant life stressors	Persons are free from abuse in their daily living and treatment environments and relationships and are able to address trauma and life stressors which continue to impact their lives.	Persons are free from abuse in their daily living and treatment environments and relationships and are able to address trauma and life stressors which continue to impact their lives.	Persons are free from abuse in their daily living and treatment environments and relationships and are able to address trauma and life stressors which continue to impact their lives.	Recovery planning; service facilitation, illness management and recovery/ recovery support services; psychotherapy; individual and/or family psychoeducation;	Recovery planning; service facilitation, illness management and recovery/ recovery support services; psychotherapy; individual and/or family psychoeducation;	Recovery planning; service facilitation, illness management and recovery/ recovery support services; psychotherapy; individual and/or family psychoeducation;
Medications	Reduce the troublesome symptoms of the mental illness and/or behavior.	Reduce the troublesome symptoms of the mental illness and/or behavior.	Reduce the troublesome symptoms of the mental illness and/or behavior.	Medication management	Medication management	Medication management
Crisis prevention and management	Developing crisis prevention strategies and coordination of crisis services. To reduce stress.	Developing crisis prevention strategies and coordination of crisis services. To reduce stress.	Developing crisis prevention strategies and coordination of crisis services. To reduce stress.	Recovery planning; service facilitation, illness management and recovery/recovery support services; psychotherapy; individual and/or family	Recovery planning; service facilitation, illness management and recovery/ recovery support services; psychotherapy; individual and/or family	Recovery planning; service facilitation, illness management and recovery/ recovery support services; psychotherapy; individual and/or family

Assessment	Anticipated Service Needs			Treatment Interventions		
Domain	General	Minors	Elderly	General	Minors	Elderly
				psychoeducation; medication monitoring	psychoeducation; medication monitoring	psychoeducation; medication monitoring
Legal Status	To address outstanding legal issues and to ensure the safety and well-being of the individual and community.	To address outstanding legal issues and to ensure the safety and well-being of the individual and community.	To address outstanding legal issues and to ensure the safety and well-being of the individual and community.	Individual skill development and enhancement; psychotherapy; substance abuse treatment	Individual skill development and enhancement; psychotherapy; substance abuse treatment	Individual skill development and enhancement; psychotherapy; substance abuse treatment

CCS CONSUMER POLICIES – DHS 36.07(5)

The following is a synopsis of the CCS consumer policies found in the CCS Policies and Procedures Manual located on-site at the Dane County Department of Human Services and on the Dane County Department of Human Services website.

Consumer Records – DHS 36.07(5)(a)

Client records will be maintained in accordance with DHS 36.18. Records will be maintained by the Dane County Department of Human Services. Service providers will be required to use the County's Mental Health Module. Information to be collected includes the results of the assessment and assessment summary; initial and updated service (recovery) plans, including attendance rosters from service planning sessions; authorization of services; requests by the consumer for changes in services or service provider and the response by the CCS to such a request; service delivery information, discharge summaries and related information, and any other information appropriate for the consumer record.

Confidentiality Requirements - DHS 36.07(5)(b)

Client service records will be maintained pursuant to the confidentiality requirements under HIPAA, s. 51.30 Stats., ch DHS 92 and, if applicable, 42 CFR Part 2.

Timely Exchange of Information Between the CCS and Contracted Agencies - DHS 36.07(5)(c)

All CCS staff will be expected to share information on a timely basis and in accordance with required CCS deadlines. Delivery of information and responses will vary depending on the situation and the type of information but it will happen as quickly as possible. The County's Mental Health Module will facilitate the timely exchange of information between the CCS and contracted agencies.

Consumer Rights – DHS 36.07(5)(d)

The provision of client rights and the monitoring thereof is extremely important in CCS. The additional rights afforded by DHS 36, and explained in CCS policies and procedures, will be highlighted. Those are a) choice in the selection of recovery team members, services and service providers; b) the right to specific, complete and accurate information about proposed services; and, c) for Medical Assistance recipients, the fair hearing process under DHS 104.01 (5), and for others, how to request a review of a CCS determination by the department. Brochures explaining rights and grievance policies are distributed often and displayed in areas where persons/families will see and take them. Requirements for individual providers' adherence to client rights are specified in the Dane County contract and in the CCS Policy & Procedures Manual.

Monitoring Compliance with DHS 36 and Applicable Federal/State Laws – DHS 36.07(5)(e)

Monitoring compliance is the overall responsibility of the CCS Administrator. Compliance will be measured in accordance with DHS 36, 94, and 92 and other applicable administrative codes and state and federal laws. The Mental Health Module of the DCDHS Information System will be used to facilitate that process. The Administrator will maintain oversight and monitoring according to the monitoring plan. Information about compliance reports will be shared with the Coordination Committee at least annually.

Receiving and Making Referrals - DHS 36.07(5)(f)

There are two aspects of referrals: a) receiving referrals for potential applicants and then b) making referrals for services to outside resources. It is planned to have a system whereby potential applicants may knock on any "door" whether it be that of an existing service provider, the Aging and Disability Resource Center (ADRC), the Behavioral Health Resource Center, or other avenue and have a warm connection that provides information regarding the CCS program and helps direct the potential applicant to the centralized intake unit. Records of referrals of the consumer to outside resources will be recorded as part of the case notes in the Mental Health Module.

Communication to the Consumer - DHS 36.07(5)(g)

Communication with applicants and clients about the services offered by CCS will be accommodating to all. An initial communication tool will be the Service Admission Agreement – found in Section H – which explains the nature and purpose of the CCS Program, including the hours of operation, how to obtain crisis services during the hours in which CCS does not operate, staff member titles and responsibilities, consumer rights, and program costs. Every effort will be made to share information with clients.

Cultural Heritage and Primary Language - DHS 36.07(5)(h)

It is the intent of the CCS program to offer services that are person-driven and individually resonant. By definition, this means that services offered must acknowledge and take into account each individual's beliefs, customs and practices. CCS clients and their Service Facilitators will explore culture and language requirements, so that recovery plans reflect their values as well as their needs. Cultural competence of staff and accessibility to services based upon linguistic needs will be assured.

All CCS staff will be expected to discuss, document and provide services in ways that are relevant and understandable to the person from their perspective. Information about the topics of cultural competence and of linguistic accessibility is included on the orientation and training checklists, including an introduction to Title VI federal legislation. Each provider will adhere to a plan for providing interpreters when the client or others in their support system have limited English proficiency, as specified in the Dane County contract and the policy contained in the CCS Policy & Procedures Manual.

Orientation and Training - DHS 36.07(5)(i)

Dane County will develop and provide some, but not all, of the orientation and training required under DHS 36.12 (1)(b) for all staff and volunteers working or billing under CCS. In addition, the County will require documentation from its service providers that each member receives the required number of hours of initial and ongoing training under DHS 36.12

Outreach Services – DHS 36.07(5)(j)

The CCS will assertively reach out to individuals who have mental health or substance use disorders and are in need of comprehensive community services and will provide information about the program and guidelines for eligibility.

Application and Screening – DHS 36.07(5)(k)

Policies and procedures have been developed for Application and Screening in accordance with DHS 36.13, DHS 36.14, and DHS 36.15. The County's CCS Intake Workers will work with applicants to complete

the application and admission agreement, identify any immediate needs, and determine the need for psychosocial rehabilitation services.

Recovery Team Development and Facilitation - DHS 36.07(5)(I)

Following the application, screening, and determination of need for psychosocial rehabilitation services processes, the client will be able to select his/her service facilitation agency from among those that are part of the CCS Program and who have availability.

Per DHS 36.16(7), the recovery team will include the CCS participant; a service facilitator; a mental health professional; and for or persons who have or are suspected of having a substance use issue, a substance abuse professional or a professional who meets the qualification for both a mental health and substance abuse professional; a parent or legal guardian as applicable; and others, such as service providers, family members, natural supports, and advocates as desired by the consumer. The service facilitator will convene the recovery team at least once every six months to review progress and update the recovery plan as needed.

Assessment – DHS 36.07(5)(m)

Assessments and assessment summaries will be developed in compliance with DHS 36.16. Assessments will incorporate the CCS participant's own perspective, in their own words, as well as collateral information. The Mental Health Module of the DCDHS Information System is being modified to capture the required information.

Service Planning – DHS 36.07(5)(n)

Service plans, or Recovery Plans as they are known at the County level, will be developed in accordance with DHS 36.17 and reflected in the consumer service records per DHS 36.18. Plans will flow from the results of the assessment and recognize the needs, hopes, and dreams of the client while taking into consideration each individual's culture, background, and language. To the extent possible, recovery plans will be directed by the CCS participant who will be offered choices in the services and supports that will assist with their recovery and resilience.

Service Coordination, Referrals, and Collaboration - DHS 36.07(5)(o)

The CCS Module of the DCDHS Information System will help facilitate service coordination and collaboration with the network of CCS providers. As services are identified on the recovery plan (service plan) and authorized by the Mental Health Professional and Substance Abuse Professional (as applicable), the service provider identified in the recovery plan will be notified. The Service Facilitator will be responsible for coordinating services and making needed referrals.

Advocacy for the Consumer - DHS 36.07(5)(p)

CCS participants will be encouraged and helped to understand their rights, benefits and services, and to be treated with the respect and dignity they should be afforded. CCS staff will assist persons served in redressing their grievances to the extent they cannot do so for themselves. Peer support specialists may assist the member and his/her family to negotiate the mental health and/or substance abuse systems with dignity, and without trauma.

Support and Mentoring for the Consumer – DHS 36.07(5)(q)

Support and mentoring for CCS participants is built into all aspects of staff/ participant relationships and interactions. Recovery team members will teach and prepare people to work, play and live more independently. Mentoring services per se will not be billed to the CCS, as they are not a covered service.

Discharge Planning and Facilitation – DHS 36.07(5)(r)

Policies and procedures for discharge planning and facilitation have been developed in accordance with DHS 36.17(5). These take into consideration establishing discharge criteria as part of the recovery plan, involuntary and planned discharges, and discharge summaries.

The CCS Module of the DCDHS Information System is being modified to capture this information and provide written discharge summary information. Until the CCS Module is modified, a written Discharge Summary will be completed and shared with the client.

Monitoring and Documentation – DHS 36.07(5)(s)

Program monitoring will be the responsibility of the Service Director. Records will be maintained electronically as part of the CCS Module of the DCDHS Information System which will assist in the monitoring of the CCS Program by the CCS Administrator and Service Director. Records and documentation will be maintained in accordance with DHS 36.18 and DHS 36.12(d).

B. ARRAY OF CCS SERVICES

Name – Program: <u>County of Dane</u>

CCS PSYCHOSOCIAL REHABILITATION (PSR) SERVICE ARRAY – DHS 36.07(4)(a) Chapter DHS 36

Follows the service array and incorporates definitions from ForwardHealth Provider Update, June 2014 No. 2014-42, as well as, definitions from DHS 36.

Assessment Domains	Service Title	Description	Date Developed
All domains	Screening and Assessment	Screening and Assessment Screening and assessment services include: completion of initial and annual functional screens, determination of need for psychosocial rehabilitation services, and completion of the initial comprehensive assessment, assessment summary and ongoing assessments as needed. 2 sovery Planning (Service Planning) Recovery planning includes the initial and ongoing development and review of a written plan of the psychosocial rehabilitation services that will be provided or arranged for the member that is based on the individualized assessment of the individual. 2 vice Facilitation Service facilitation includes activities that ensures the member, (and where appropriate for minors, the member's family), receives assessment, service planning, service delivery, and supportive activities in an appropriate and timely manner. It also includes ensuring the service plan and service delivery for each member is coordinated, monitored, and designed to support the individual in a manner that helps the individual achieve the highest possible level of independent functioning. Includes assisting the member in self-advocacy and helping the member obtain other necessary services. 2 gnostic Evaluations Diagnostic evaluations include specialized evaluations needed by the member, including, but not limited to: neuropsychological, geropsychiatric, specialized trauma, eating 2	2014-2015
All domains	Recovery Planning (Service Planning)	and review of a written plan of the psychosocial rehabilitation services that will be provided or arranged for the member that is	2014-2015
All domains	Service Facilitation	Service TitleDescriptionDeeening and AssessmentScreening and assessment services include: completion of initial and annual functional screens, determination of need for psychosocial rehabilitation services, and completion of the initial comprehensive assessment, assessment summary and ongoing assessments as needed.2014.covery Planning (Service Planning)Recovery planning includes the initial and ongoing development and review of a written plan of the psychosocial rehabilitation services that will be provided or arranged for the member that is based on the individualized assessment of the individual.2014.vice FacilitationService facilitation includes activities that ensures the member, (and where appropriate for minors, the member's family), receives assessment, service planning, service delivery, and supportive activities in an appropriate and timely manner. It also includes ensuring the service plan and service delivery for each member is coordinated, monitored, and designed to support the individual in a manner that helps the individual achieve the highest possible level of independent functioning. Includes assisting the member in self-advocacy and helping the member obtain other necessary services such as medical, dental, legal, financial, and housing services.2014.gnostic EvaluationsDiagnostic evaluations in order to determine the appropriate treatment and adolescent alcohol/drug assessment intervention program evaluations in order to determine the appropriate treatment and behavioral interventions and the level of community support needed by the2014.	
All domains	Diagnostic Evaluations	Diagnostic evaluations include specialized evaluations needed by the member, including, but not limited to: neuropsychological, geropsychiatric, specialized trauma, eating disorder, adolescent behavioral and adolescent alcohol/drug assessment intervention program evaluations in order to determine the appropriate treatment and behavioral	2014-2015

Assessment Domains	Service Title	Description	Date Developed
i, j, k, m, n	Medication Management	Medication management activities will include: medication evaluation to diagnosis and specify target symptoms; prescribing medication to alleviate the identified symptoms; medication monitoring for changes in the member's symptoms and tolerability of side effects; individual client education to increase the member's understanding of the benefits of the medication and symptoms being treated and supporting the member in taking his or her medication. This will also include reviewing data, including other medications used to make medication decisions.	2014-2015
i, j, k, m	Physical Health Monitoring	Physical health monitoring services include activities related to the monitoring and management of a member's physical health. This may include assisting and training the member and the member's family to identify symptoms of physical health conditions, monitoring physical health medications and treatments, and developing health monitoring and management skills.	2014-2015
a, c, d, g, i, k, l, n	Peer Support	Peer supports services include a wide range of supports to assist the member and the member's family with mental health and/or substance abuse issues in the recovery process. These services promote wellness, self-direction, and recovery by enhancing the skills and abilities of members to meet their chosen goals.	2014-2015
a, c, d	Individual Skill Development and Enhancement	 Individual skill development and enhancement services include training in communication, interpersonal skills, problem solving, decision-making, self-regulation, conflict resolution, and other specific needs identified in the member's service plan. Services also include training in daily living skills related to personal care, household tasks, financial management, transportation, shopping, parenting, accessing and connecting to community resources and services (including health care services), and other specific daily living needs identified in the member's service plan. Services provided to minors will also focus on improving integration into and interaction with the minor's family, school, community, and other social networks. Services include assisting 	2014-2015

Assessment Domains	Service Title	Description	Date Developed
		individual skill development and enhancement.	
a, f	Employment Related Skill Training	Employment-related skill training services address the member's illness or symptom-related problems in finding, securing, and keeping a job. Services may include, but are not limited to: employment and education assessments; assistance in accessing or participating in educational and employment- related services; education about appropriate job-related behaviors; assistance with job preparation activities such as personal hygiene, clothing, and transportation; on-site employment evaluation and feedback sessions to identify and manage work-related symptoms; assistance with work-related crises; and individual therapeutic support.	2014-2015
c, d, i, k	Individual and/or Family Psychoeducation	 Psychoeducation services include: Providing education and information resources about the member's mental health and/or substance abuse issues; Skills training; Problem solving; Ongoing guidance about managing and coping with mental health and/or substance abuse issues; Social and emotional support for dealing with mental health and/or substance abuse issues. 	2014-2015
i, k	Wellness Management and Recovery / Recovery Support Services	 Wellness management and recovery services, which are generally provided as mental health services, include empowering members to manage their mental health and/or substance abuse issues, helping them develop their own goals, and teaching them the knowledge and skills necessary to help them make informed treatment decisions. These services include: psychoeducation; behavioral tailoring; relapse prevention; development of a recovery action plan; recovery and/or resilience training; treatment strategies; social support building; and coping skills. Recovery support services include: assisting the member in 	2014-2015
		increasing engagement in treatment, developing appropriate coping strategies, and providing aftercare and assertive continuing care. Continuing care includes relapse prevention	
Assessment Domains	Service Title	Description	Date Developed
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		support and periodic follow-ups and is designed to provide less	
		intensive services as the member progresses in recovery.	
i, k, l, n	Psychotherapy	Psychotherapy includes the diagnosis and treatment of mental, emotional, or behavioral disorders, conditions, or addictions through the application of methods derived from established psychological or systemic principles for the purpose of assisting people in modifying their behaviors, cognitions, emotions, and other personal characteristics, which may include the purpose of understanding unconscious processes or intrapersonal, interpersonal, or psychosocial dynamics.	2014-2015
k	Substance Abuse Treatment	Substance abuse treatment services include day treatment (DHS 75.12, Wis. Admin. Code) and outpatient substance abuse counseling (DHS 75.13, Wis. Admin. Code). Substance abuse treatment services can be in an individual or group setting. The other categories in the service array also include psychosocial rehabilitation substance abuse services that support members in their recovery.	2014-2015

Assessment Domains Chapter 36.16(4) Identify all domains applicable to each service described in the array. (i) Mental health(j) Physical health(k) Substance use (e) Housing issues(f) Employment (a) Life satisfaction (m) Medications (b) Basic Needs (n) Crisis prevention management (o) Legal status(p) Other identified domains (g) Education (c) Social network, family involvement

(d) Community living skills

- (h) Finances and benefits

Trauma / life stressors (1)

C. CCS STAFF LISTING

This is a placeholder to retain the layout of this document in accordance with the State's Initial Certification Application. Due to the size of the staff listing, it has been moved to the end of the document and may be found beginning on page 81.

D. QUALITY IMPROVEMENT PLAN - DHS 36.08

CCS Policy/Procedures Quality Improvement Plan DHS 36.08

Policy Statement: So that CCS clients and Dane County policy planners have information about compliance with CCS vision and regulations, and individuals' progress toward goals, as well as, overall transformation, a robust and continuous quality improvement plan and review process will be followed.

Discussion

QI indicators will measure:

- a. client satisfaction;
- b. progress toward desired outcomes identified through the assessment process; and
- c. programmatic compliance and improvement.

Procedures

Confidentiality Procedures

Each client service record will be maintained pursuant to the confidentiality requirements under HIPAA, s. 51.30, Stats., ch DHS 92, and if applicable, 42 CFR Part 2. Information obtained for the purposes of program evaluation shall remain confidential and shall not be used in any way that discloses the names or other identifying information about the individual whose records are being reviewed.

The CCS evaluation requirements dictate that certain client data be provided to the State of Wisconsin through secure means. The same confidentiality requirements listed above apply to the use of that data.

Reports developed by the County regarding client satisfaction, outcomes, and program compliance and improvement will be released in aggregate form only.

Client Satisfaction Surveys:

- The DCDHS Planning and Evaluation Division will be responsible for conducting client surveys at least annually using the instruments required by the State. These include the Recovery –Oriented Systems Indicators (ROSI), the Youth Satisfaction Survey (YSS) for youth ages 13-17, and the Youth Satisfaction Survey – Families (YSS-F) for families of children 12 and under.
- 2. Surveys will be administered according to the State guidelines which currently call for

sending out surveys in mid-September to all current CCS clients who have been in CCS for at least 6 months and to clients discharged in the past 6 months who have spent at least 6 months in CCS.

- 3. Clients will be informed that all responses are confidential, completion of the survey is voluntary, that their opinions are important to improving services, and that strong rules protect them from retaliation, no matter what they wish to say about their services.
- 4. Surveys will be conducted by mail using discreet unmarked envelopes.
- 5. Postage paid return envelopes will be provided.
- 6. If there are sufficient funds, a nominal incentive will be offered to persons completing a survey.
- 7. To the extent possible, surveys will be made available in alternate languages for persons who speak a language other than English. For clients who do not read or write, attempts will be made to have a neutral person (non-staff) read the questions and write the responses.
- 8. Data is to be submitted to the State by November 1.
- 9. DCDHS Planning and Evaluation staff will conduct an analysis of the data and provide a written report to the CCS Administrator, Service Director, and CCS Coordination Committee.

CCS Program Compliance and Improvement:

- 1. Quality improvement measures will be collected and analyzed to understand progress of CCS toward more fully achieving the goals and outcomes possible through CCS.
- 2. The CCS Administrator will complete a CCS Program Survey annually, to be submitted to WI DHS in February/March of each year, and presented to the CCS Coordination Committee thereafter.
- 3. Program measures will include:
 - a. Number of people served
 - b. Use of evidence-based practices
 - c. Use of wait list
 - d. Use of non-traditional services
 - e. Discharge reason and destination
 - f. Consumer grievances
 - g. Compliance with regulations and standards (through state and random

audits conducted by Administrator/designee)

- 4. Client outcome measures will include:
 - a. Community living skills
 - b. Living situation
 - c. Employment status (>age 15)
 - d. Educational functioning (for children/young adults)
 - e. Hospitalizations, emergency detentions, and ER visits
 - f. Institutionalization
 - g. Commitment status
 - h. Criminal justice involvement (> age 11)
 - i. Substance use
 - j. Co-occurring medical conditions

For All QI Components:

- 1. DCDHS Planning and Evaluation Division will prepare outcome reports for program and system design improvement measurements annually. All reports will be submitted to the Coordination Committee for its review and recommendations. The Administrator and Service Director will attend the Coordination Committee meeting where feedback and recommendations are given.
- 2. The Administrator and Service Director will design subsequent quality improvement plans, based on the outcomes and recommendations, designating point persons to carry out tasks and analyze ongoing results.
- 3. The Chair of the Coordination Committee will have the review of the QI plan progress as an agenda item at least annually at a Coordination Committee meeting.

[/]QI Policy.doc Developed: 5.1.2014 Revised: 8.18.2014. Formatting only revised: 8.25.2014 Reviewed by CCS Coordination Committee: 8.20.2014

E. COORDINATION COMMITTEE REPORT - DHS 36.09

Summary: Over the course of a number of meetings, members of the CCS Coordination Committee gave feedback to the Dane County Mental Health Program Specialist who is heading up the CCS Application project. Members received packets of information to be reviewed at least two weeks prior to each meeting and came prepared with suggestions and recommendations. Some suggestions were wording or grammar edits and were quickly agreed to and incorporated. Other recommendations were substantive and often generated discussion. Even where there may have been differences of opinion in detail, there was consensus that the recommendations are included in the listing for County staff to consider and respond to.

A general theme was to make the CCS Plan and its policies clear and usable, both to providers who will be part of the Dane County CCS program and to potential users of CCS services. A second major theme was to convey through the plan and policies the vision of CCS--i.e. that services are recovery-oriented, consumer-driven, and clinically and culturally competent and sensitive.

Significant changes were made to the CCS Plan in July of 2014, subsequent to DHS training and initial feedback from the Division of Quality Assurance (DQA). These changes were reviewed by the CCS Coordination Committee at their August meeting. This summary includes both recommendations made on the initial plan, and additional recommendations/observations made on the revised plan.

The specific recommendations follow.

From 11.13.13 meeting:

Quality Improvement Plan

Consumer Satisfaction Surveys

Look for a way to incorporate a sentence or two about how CCS consumers can have access to the Coordination Committee, especially during consumer satisfaction surveys (might have comments about results or action plans based on the results).

Committee generally liked the idea of gradually introducing and building up to more direct and pointed feedback when introducing consumer satisfaction surveys. However, some also thought there might be benefits to starting with the longer, more specific ROSI. They requested copies of the ROSI so they can make an informed decision about shorter versus longer consumer satisfaction surveys.

Need to build in ways to get responses and for persons served to understand that the CCS will give their responses. Some persons served need motivation to go to the trouble of filling out a survey; all need to trust that their time is valued and their input will be genuinely considered. Ideas included distributing to persons served a summary of the responses received thus closing the feedback loop, assertive outreach to persons served, sharing the action steps that are developed to address issues or concerns raised. One idea that had traction was to create a person-to-person "hook"; i.e., making survey time an event. Consider having tables available in the lobby or "survey drives", maybe with involvement of Coordination Committee members.

There was some feeling that consumers should be encouraged to give feedback or return surveys by giving a token reward (candy bar, free ticket, etc.).

Since the Dane County CCS program is one whole, surveys should be administered at the same time for all clients, possibly allowing staff from one program to help out consumers of another and thus avoiding conflict of interest or the appearance of it.

Need to state how the satisfaction survey questions will be chosen, and persons served should be involved in that choice. The questions need to be used across the CCS program. Not just content but also the language choice will be important.

Might make sense to develop the first set of questions soon, and start asking them as part of the requirements of the quarterly reports at the beginning of the year. Then will have some basis for comparison by the end of the year when we hope CCS has been operating for a while.

Other feedback about the narrative of the Quality Improvement Plan:

Do not use "WRAP" in the narrative unless actually purchasing that tool; instead use the generic term "recovery action plans".

Change wording to be clear about who will be making final decisions about what issues to address and how. "The management group" is confusing and nonspecific, i.e., say who in the structure actually will make decisions.

Members liked the 3-pronged approach to QI (consumer satisfaction, programmatic compliance and improvement, and system transformation).

The system transformation is vague and needs to be more specific about what programs and areas will be brought in, in what order, and what change is being sought or expected.

Quality Improvement Policy & Procedures:

Under CCS program compliance and improvement, add "number of Releases of Information signed". This will also give a way to measure if services are collaborating in providing services for participants.

Correction: "advance directives", not "advanced directives".

Discussion about how to measure certain indicators such as participants' own words being used or increased number of diverse providers/natural supports. Determined this could be done by random chart audits by supervisors and/or the CCS Administrator.

Admission Materials

Service (Admission) Packet and Agreement sheet was good. No changes suggested, other than to format like the other P&Ps.

Receipt of Service/Admission Agreement Documents: The sentence about consequences is too harsh and negative. Suggestion is to turn most of the points into positives and list under "benefits" and then say for consequences that if services are not received, the benefits listed may not happen. Also, could list a consequence as not having the array of choice of services or flexibility in another program possibly. Another recommendation was to look at State or SAMHSA outcome data and use it to state benefits that have occurred due to being part of CCS. The "alternatives to CCS" statement needs to be rewritten so as to convey that there are other services that may be as good, more appropriate, or might meet someone's taste or preferences better.

Overall: be careful of acronyms especially in documents that are given out to consumers/families especially in the early stages of involvement. People won't necessarily understand CCS, CSP, etc.

For another time: committee would like to discuss the use of the term "consumer". *

From 12.11.13 Meeting:

Operating Policies and Procedures

Advocacy for and with Persons Served—suggest that it be made explicit that the persons served should be advised that he/she could request a peer specialist be added to his/her team.

Communications with Persons Served—Need to expand: good communication skills are required for *all* staff, not just service facilitators.

Confidentiality—no concerns with the policy itself, but a discussion that exceptions to keeping confidentiality should be highlighted to persons served. Decision of the group was that it is covered in the policy but should also be looked at in admission and informed consent for treatment/services documents.

Cultural Competence and Linguistic Services—suggestion to add gender pronoun/being addressed by name of choice to areas to be explored with the person.

Records of Persons Served—clarify when records room needs to be locked.

Rights and Grievance Procedure-- we need to spell out where and how grievance records are kept and who can access them. In addition to consumer bill or rights being displayed, also should display Grievance Officer's name and phone number.

Item #6 should be the last item in the policy.

Review of ROSI—although the committee understands that it is not within our prevue to change this tool, the request is to give feedback that the gender choices on the demographic section are limiting.

From 1.08.14 Meeting:

Continuation of Policies and Procedures Review

Minimum Qualifications for Staff Positions—discussion about if we wish to have peer specialists be *certified peer specialists*; if not, should we change the title of this position to something else? Also suggested adding, same training requirements for #21 (rehabilitation workers) as for #20 (peer specialists).

Staff Functions and Credentials—Difficult to understand when mental health professionals and/or substance use disorder professionals are required to be present at the team meeting, and what/when signatures are required. Suggested that #1 be reworked. Suggestion that these functions be defined or if defined elsewhere in policies then be referenced.

Supervision and Clinical Collaboration—suggestion that "recovery-oriented" be added to descriptions in two places. Rather than listing various ways the regulations say supervision/collaboration may be documented, say instead "The method of documentation will be the master supervision log maintained by the CCS Administrator" since that will be Dane County's requirement.

Support and Mentoring for Persons Served—Specify that it is the responsibility of service facilitators to check with persons served about their desire for assistance for particular actions. #2 needs to be clarified. #6 can be deleted.

Strong suggestion that reviewing and keeping current about core competencies should be highlighted somewhere in policies or in the plan; i.e., in training or as a piece of supervision.

Final review of CCS Plan—

Addition of "recovery-oriented" in several places

Strike "normal" from "natural and normal workplaces"

"Peer-run agencies" is adequate, as opposed to "consumer- and peer-run agencies". When considering how to ensure that recovery concepts are being consistently applied, consider buying the Common Ground program as a way to evaluate. It is understood that this tool is expensive.

Contract addenda are the county's mechanism for contracting and paying for services. Strike "MOUs" as they will not be used.

Be careful not to overpromise what agencies can do. E.g., while we want best practice (cultural competence, linguistic services), we also want to make sure that we are not closing smaller agencies with fewer resources out of the process.

* Over the course of January 2014, committee members discussed over the list serve, the use of the term "consumer". On January 22, 2014 Carrie Simon, as Coordination Committee Chair, called the question. There was unanimous agreement by committee members to use terms other than "consumer" where possible. The preferred alternative was determined to be "client." A decision was made to change the term in most contexts.

From 8.20.14 meeting:

Revised CCS Plan

The Committee was pleased that the new plan is more broad based, rollout is faster.

Where did the list of possible providers come from? The list is speculative, based on existing POS agencies who provide services that would fit into CCS, definitely does not capture all who might be interested. Recommend outreach to providers outside of existing system.

Recommend that a peer support person be involved in the intake process.

Recommend 2 intake specialists at start-up, to accommodate initial influx

Positive feedback regarding centralized training.

Discussion of incorporating younger people and how to reach out and educate about services

Revised QI Plan

Recommend including Care Center data as an outcome measure

Recommend utilizing the peer network to get the word out about satisfaction surveys.

From 10.22.14 meeting:

Review/Recommendations on Revised CCS Plan, Policies

Discussion of role of MH/SA Professional – immediate supervisory entity above Service Facilitator.

Staff Functions Policy

Recommend putting qualifications before responsibilities. (This change was then made.)

Recommend wording change from "consultation to" to "consultation with" (This change was made).

Discussion of Recruitment to CCS Coordination Committee

Discussed recruiting people with specific expertise, i.e., AODA, kids. (This was done in March/April, 2015).

From 2.18.2015 meeting:

Completed payroll paperwork, introduction of new CCS Administrator, Julie Meister.

Updated on Provider Network Development and upcoming Provider Information Sessions.

Dialogue with consumers of what they would like providers to know.

No new policy/plans reviewed.

From 5.20.2015 meeting:

Reviewed Revised CCS Plan

Overall, easy to read and follow.

Recommend wording change from No Wrong Door – to Any Door Access in section under Client Experience. (Revision made 5.22.2015).

Need to sync language in the Coordination Committee summary sections on pages 11 and 56. (Revision made 5.22.2015).

Application For CCS Services – the footer appears to have decreased the amount of space for the Applicant Signature. This will be checked on the actual application and extra space allotted if needed.

Reviewed Client Handbook

Overall, easy to read and consumer-friendly. Glad to see the section on recovery.

Recommend revising the opening language in the CCS description (p. 4) to be in the first person. (Revision made 5.22.2015)

Recommend adding in a synopsis of the items under the service array. Also add in section to discuss what is not covered under the service array. (Revision made 5.22.2015).

Recommend having less jargon in the section under Intake on determining eligibility. (Revision made 5.22.2015).

Recommend simplifying language in the grievance resolution policy section. (Revision made 5.22.2015).

From 8.18.15 meeting:

Reviewed Coordination Committee Schedule

Recommend increasing meeting frequency now that Dane County CCS has received certification and enrolling clients. Recommend keeping time and place for meetings the same. (Response: Began monthly meetings effective immediately.)

Reviewed Brochure and Client Handbook

Recommend using computer program to assess reading level of handbook, may still be too high. (Response: Assessed reading level September 2015, reading level was 11th grade.)

Other Issues

Recommend Intake Worker come to CCS Coordination Committee meeting to discuss process, functional screen, etc. (Response: Intake worker attended 9.16.15 CCS Coordination Committee meeting.)

From 9.16.15 Meeting:

Reviewed Reading level of Client Handbook

Recommend entire committee look through the client handbook and identify specific words/concepts that should be changed, report back next month. (Response: Reading level calculated, County staff provided copies of handbook for review.)

From 10.21.15 Meeting:

Reviewed and Edited Client Handbook

Recommend specific word changes, format changes, and organization changes. (Response: Changes incorporated into handbook and updated handbook emailed to Coordination Committee for review prior to November meeting.)

From 11.18.15 Meeting:

Reviewed and Edited Client Handbook

Recommend moving "Your Life" section to page 6 and moving program eligibility to beginning of handbook. (Response: Changes incorporated into handbook and updated handbook emailed to Coordination Committee for review prior to December meeting.)

Recommend reducing jargon. (Response: Continue edits as a group in Committee meetings.)

From 12.16.15 Meeting:

Reviewed and Edited Client Handbook

All recommended changes were incorporated during the meeting and updated copies of handbook emailed to Committee members prior to the January meeting.)

From 1.20.16 Meeting:

Reviewed and Edited Client Handbook

All recommended changes were incorporated during the meeting. Recommend handling further edits in a smaller committee due to length of time it is taking to review entire document. (Response: Dorothy, Julie, Anna, and Todd volunteered to meet to revise remainder of handbook. The smaller group met on several occasions to complete edits of handbook and edited handbook was provided to committee at February meeting.)

From 2.17.16 Meeting:

Reviewed edited Client Handbook

Recommend re-checking reading level with computer program. (Rechecked reading level and it remained too high, ~10th grade level.

Recommend translate handbook into Spanish and Hmong. (Will work on this once handbook is finalized.)

Recommend qualitative survey to gauge CCS intake and service experience. (Response: Dane County Planning and Evaluation developed draft survey for committee to review in March meeting.)

From 3.16.16 Meeting:

Final review of Client Handbook before printing

Recommend sending back to work group due to reading level remaining too high. Recommend examining sentence structure. (Response: Dane County staff are working with Committee volunteers to seek input directly from consumers.)

Review of Survey Drafts

Recommended wording changes that were incorporated into draft surveys.

Review of Quality Improvement Plan

Recommend addressing capacity concerns, addressing wait time, increasing availability of psychiatry, and increasing the availability of challenging employment opportunities available to CCS participants. (Response: These recommendations were added to the QI plan.)

From 4.20.16 Meeting:

Due to not having quorum, Committee was unable to conduct business.

From 5.18.16 Meeting:

Review of Meeting Location

Recommend that parking information be sent out to Committee members due to congested area around meeting location and limited parking availability. (Response: Julie compiled map with parking options and sent to Committee members.)

Review of CCS Plan

Plan was approved with one recommendation of not putting staff listing in plan online. (Response: At this point it appears to be necessary to continue to include staff listing as noted in DHS 36.07 (1) (a).)

Review of Quality Improvement Plan

Recommend fix typo of "CCF" to "CCS". (Response: Error corrected.)

Recommend extension of staff survey deadline to March 2017. (Response: This deadline was changed.)

With aforementioned changes, QI Plan was approved.

From 6.15.16 Meeting:

Did not have quorum at the meeting.

From 9.21.16 Meeting:

Updated on current CCS census. Discussion about reaching out to AODA agencies to attempt to obtain AODA specific service facilitation agency. Discussion of Medication Assisted Treatment and CCS. (Response: Todd Campbell will obtain further clarification from the State on this issue.)

Updated on DQA site visit. 1-year provisional certification to allow for changes to intake processes and for DQA to verify changes made. Coordination committee emphasized their opinion that intake needs to allow consumers time for decision making at their own pace and to preserve consumer choice with regards to SF agency selection. Dane County seeking variance and will update committee when we obtain information on the variance.

Discussion regarding CCS Participant Handbook. New version printed in September 2016 based on listening session feedback from Yahara House members. Discussion regarding modifying the graphic on the CCS Participant Handbook. Committee member volunteered family member to work on this project.

From 10.19.16 Meeting:

Updated on current CCS Census. Discussed reasons for discharge of CCS participants (death, transition to more intensive services, move out of county, didn't want CCS services).

Discussion of denial of variance. Requested Coordination Committee thoughts on what County Staff should keep in mind when redesigning the CCS Intake process. Committee cited the following considerations: intake can be overwhelming and time consuming, some consumers may want the intake process spread over time, important to work at a pace that is comfortable for consumers, make sure that everyone is well informed about CCS with regard to risks and benefits of being in the program, make sure consumers have as much control as possible over which agency they go to, keep the locus of control with the consumer, changing providers is hard, look into hiring a peer support specialist to help with outreach. (Response:

CCS Coordination Committee feedback will be incorporated into new Intake procedures to the greatest extent possible.)

Updated committee on Medication Assisted Treatment and CCS. CCS participants can receive MAT (medications are covered outside of CCS). Therapy component must be provided by CCS providers. This may limit the MAT options for CCS participants. Currently CCS providers that provide MAT are: Connections Counseling, Journey Mental Health Center, and Tellurian.

Updated committee on Certified Peer Specialist training. There are currently no date scheduled for the Peer Specialist training. Provided information regarding mailing list through Access to Independence to committee members.

Committee suggested transitioning to every-other-month meetings and all voted in favor. (Response: Changed meetings to every-other-month.)

From 1.18.17 Meeting:

Updated committee on CCS Participant census. Discussed wait times for CCS services, which vary based on consumer pace and desire for assistance with obtaining Physician's Prescription and selecting an agency. If consumers don't have agency preference, wait time is very short—couple weeks to schedule.

Updated committee on new CCS intake process fully implemented on 1/1/17 to comply with State expectations. Feedback from staff and consumers has been positive. This is seen as an improvement. Continue to value consumer choice and honor consumer pace. (Response: Committee's input from 10.19.16 meeting incorporated into new procedures.)

Reaffirmed Coordination Committee member's interest in continued participation in 2017. All expressed interest in remaining on committee.

Lori Bastean from DCDHS Planning and Evaluation presented results of CCS Client Surveys (ROSI & MHSIP) to the committee and there was discussion of results.

Discussion of QA/QI plan and Coordination Committee provided feedback to add to the current QA/QI plan increasing outreach to schools along with increasing services in outlying areas (outside the City of Madison). (Response: CCS Coordination Committee input incorporated into updated QA/QI plan.)

From 3.15.17 Meeting:

Updated committee on CCS Participant census. Discussed reasons for discharge from CCS services including client moving out of Dane County, client needing higher level of service, client no longer wanting services, client death.

Updated committee on Provider Network and training of new CCS staff.

Spent time reviewing QA/QI Plan. Committee requested to add outlying areas (outside of Madison) to #7. (Response: added content.) Discussion of availability of substance abuse services and added increasing SUD services to QI plan. (Response: added content to QA/QI plan.) Discussion of when it is determined that SUD is primary. At this time there is no designation of which is primary, MH or substance abuse, both are included diagnoses. There is, however, designation of need for Substance Abuse Professional. Committee questioned whether most of the people in CCS are not identifying SUD as an issue they want to work on. (Response: County staff will obtain numbers and report back at May meeting.) #10, County staff will be responsible for this, ensuring that CCS materials are available in settings where people will see them. (Response: Detail regarding #10 will be added to capture discussion of issues of access and awareness of CCS in the community.) Committee would like to find out where people are finding out about CCS. Recommendation to add #11, increasing service options for people that have primary SUD.

(Response: added.) After discussion of addition, committee moved to approve QA/QI plan. Plan with changes specified above was approved by the committee.

Spent time reviewing CCS Plan. Reviewed all changes made to the CCS Plan since the last update with the committee. It was suggested to add an alphabetical index by subject, however committee ultimately decided against this idea due to there being other, more efficient, means for clients and providers to access the same information. After discussion, committee moved to approve CCS Plan. CCS Plan was approved by coordination committee.

From 5.17.17 Meeting:

Updated committee on CCS Participant census and number of CCS participants and percentage with substance use disorders. Updated committee on CCS Provider Network, ongoing training of new CCS personnel. CCS Administrative Assistant started in April and CCS Program Analyst is being hired. Dane County CCS DQA site visit scheduled for June 6, 2017.

Peer specialist trainings have been posted, includes new curriculum.

Discussion of QA/QI Plan. CCS Administrator received education system contact information from committee member. Discussed service facilitation for individuals with primary substance use disorder. Committee requested exploring reasons for discharge and reasons potential participants don't follow through with Intake Unit beyond initial call. Intake Social Worker will attend upcoming meeting. (Response: Once analyst starts will obtain discharge data to provide to coordination committee. Intake worker will come to next meeting to discuss reasons individuals don't enroll in CCS.)

From 7.19.17 Meeting:

Updated committee on CCS Participant census. Discussed specialty trainings provided to CCS Provider Network: Case Management Best Practices, Grief, Loss & Trauma for Children in Out-of-Home Care.

Committee asked questions of CCS Intake Worker, Intake worker explained process. Committee inquired about how intake process works for homeless individuals. Committee interested in data on people of color served by CCS. Committee interested in reviewing the mailing potential participants receive from CCS Intake at initial call. Reviewed with Committee the Intake survey and committee decided to have survey be anonymous and given to CCS participants at time of enrollment. Guest at meeting brought up concern regarding nursing rates in CCS and requested Committee advocate with the State. (Response: Will bring demographic data to committee to review at next meeting. Will bring materials that get mailed out to potential CCS participants for committee to provide feedback at next meeting. Will begin administration of CCS Intake survey. Committee will discuss nursing reimbursement issue at next meeting and decide course of action.)

From 9.20.17 Meeting:

Updated committee on CCS participant census and reviewed CCS statistics by age, sex, race, and ethnicity with Committee. Committee noted low enrollment of individuals of Hispanic background. Reviewed Intake mailing with Committee and answered questions. Committee did not recommend changes. Committee voted not to take up nursing rate issue with State. Informed Committee that Intake survey distribution started 9/1/17.

From 11.15.17 Meeting:

Updated committee on CCS participant census, onboarding of new agencies and new staff. Updated Committee on trainings provided to network since last meeting: Mandated Youth Services and Mandated Reporter. Updated Committee on forms being translated into Spanish. Updated Committee on annual consumer satisfaction survey process, received 20.4% response rate.

Reviewed and revised CCS Coordination Committee Policy/Procedure. Committee recommended no more than two 2-year terms per member, CCS Administrator standing member of committee, Administrator informed Committee that State recommended each member only fulfil one role on committee. Committee recommended reserving last 15 minutes of the meeting for public comment and add guest sign-in to roster to allow adequate time for comment. (Response: All suggestions incorporated.)

From 1.17.18 Meeting:

Updated Committee on CCS participant census, addition of Intake staff in 2018 to accommodate need. Administrator answered Committee questions. CCS Analyst provided synopsis of 2017 consumer satisfaction surveys. Reviewed updated CCS Coordination Committee policy. Committee recommended moving public comment to the beginning of meeting, changing "client" to "consumer". Reviewed QA/QI Plan with Committee and Committee provided recommended updates to #1-8. Will continue progress at next meeting. (Response: All recommended updates incorporated into the updated plan.)

From 3.21.18 Meeting:

Updated Committee on CCS participant census and training of CCS staff. Provided Committee with copy of updated CCS Coordination Committee policy. Completed review of QA/QI plan with Committee. Committee suggested adding #11, increased outreach efforts to groups identified as being underrepresented in CCS. Committee reviewed QA/QI plan in its entirety and approved. (Response: All Committee recommendations incorporated into updated QA/QI Plan.)

From 5.15.18 Meeting:

Updated Committee on CCS participant census and onboarding/training of new CCS staff. Updated Committee on increased number of DCDHS CCS Intake Workers—now at 8. Committee discussed Provider Survey and identified themes they would like to survey. Administrator and Analysis will bring draft to next meeting for review. (Response: All Committee recommendations were incorporated into the survey.)

From 7.18,18 Meeting:

Updated committee on CCS participant census, increased quality assurance efforts, addition of Cultural Competence to initial orientation and training, and onboarding of Intake Supervisor. Updated Committee on new data being tracked in the CCS Module regarding discharge reasons. Analyst reviewed results of CCS Intake Survey. Analyst reviewed draft of CCS Provider Survey. Committee eliminated duplicate questions. Analyst and Administrator will bring updated draft to next meeting for review. Committee voted to add an August meeting due to survey project. (Response: All suggestions from Committee incorporated into the survey. Scheduled additional August 2018 Coordination Committee Meeting.)

From 8.22.18 Meeting:

Updated Committee on CCS participant census and recruitment of Bilingual Hmong CCS Intake Worker. Reviewed templates for CCS Assessment and Assessment Summary with Committee. Committee was split on which version of the Assessment Summary they preferred. 0 members preferred the longest version with every domain, 4 members preferred the long version with only applicable domains, and 2 members preferred the short version. Administrator will share Committee preferences with the IT team and Assessment workgroup. Reviewed updated Provider Survey with Committee and incorporated feedback. Analyst will load survey into Survey Monkey for Committee to test prior to next meeting. (Response: All Committee suggestions were incorporated.)

From 9.19.18 Meeting:

Updated Committee on CCS participant census, staff training, and recruitment of Bilingual Hmong CCS Intake Worker. Analyst reviewed updated Provider Survey and obtained additional feedback on wording. Committee recommended adding Certified Peer Specialist as an education level for survey. Committee recommended ensuring that staff can't be individually identified based on results. Analyst reviewed data on reasons for client discharge with Committee. Committee requested additional data on length of time participants are in CCS and length in time sorted by diagnosis.

Continued work on QA/QI plan goals. Administrator updated that agencies have maintained sufficient capacity to accept referrals, so this is not a barrier to enrollment. Committee would like to work on Housing Instability goal next (#9). Committee would like to have more information on housing challenges in Dane County and understand percentage of homeless population that experiences challenges with mental health/substance use. Administrator will attempt to arrange guest speaker form Homeless Services Consortium for next meeting. (Response: Committee suggestion to work on goal #9 next pursued.)

From 11.14.18 Meeting:

Updated Committee on CCS participant census. Analyst reviewed the following data with Committee: housing arrangements of participants, employment status of participants, length of time enrolled in CCS, diagnosis of individuals discharged. (Response: No response needed.)

From 1.16.19 Meeting:

Updated Committee on CCS participant census and hiring of Bilingual Hmong CCS Intake worker. Presentation from Homeless Services Consortium. Committee reviewed QA/QI plan for updates and made changes to plan. Committee recommended adding goal to increase collaboration among CCS provider agencies. Committee removed #4 and added goal involving CCS Residential Treatment for Substance Use Disorders. (Response: All Committee suggestions that achieved agreement were incorporated.)

From 3.20.19 Meeting:

Updated Committee on CCS participant census, introduced CCS intern. Final review of 2019 CCS QI Plan and approval by CCS Coordination Committee.

From 5.15.19 Meeting:

Updated Committee on CCS participant census. Discussion of discharges from CCS program. Reviewed QI plan and determined next goal of Committee. Committee elected to develop survey and administer to youth service facilitators to obtain more information about role of CCS in schools.

From 7.17.19 Meeting:

Updated Committee on CCS participant census. Updated Committee on DHS/DQA site visit—2 year certification with no citations. Results of 2018 CCS Consumer Satisfaction Surveys were reviewed with the Committee. Committee expressed concern with ROSI questions and that they are easily misunderstood. Demographic distribution of consumers discussed including age, race/ethnicity, gender, and urban/rural. Committee worked on development of the youth service facilitator survey.

From 9.18.2019 Meeting:

Updated Committee on CCS participant census and plan to hire additional QA Specialist in 2020. Youth service facilitator survey was discussed and edited. Committee discussed goal for survey is to inform training needs.

From 11.20.19 Meeting:

Updated Committee on CCS participant census and new positions in 2020 budget which will allow CCS intake to keep pace with community interest. CCS Analyst reviewed outcomes for individuals that enroll in CCS while homeless. Discussed Youth Service Facilitator Survey—it has been disseminated and closes soon. Consumer Satisfaction Surveys have been mailed out to eligible CCS participants (late October). Began review of QI plan for update. Did not have quorum for voting purposes.

From 1.15.20 Meeting:

Did not have quorum for voting purposes. Reviewed CCS participant census. Reviewed results of Youth Service Facilitator Survey. Work on QI Plan.

From 4.15.20 Meeting:

Meetings moved to virtual format due to COVID-19 pandemic. Updated Committee on CCS participant census and DCDHS hiring freeze as a result of COVID-19. Committee reviewed and approved the following policies which were updated: Conduct Policy and Timely Exchange of Information. Reviewed updates to the QI Plan for 2020 and Committee approved.

From 5.20.20 Meeting:

Reviewed census with Committee. Committee requested information regarding re-enrollments after discharge. Hiring freeze continues to impact 1.0 FTE CCS intake position. Committee reviewed and approved the following updated policies: Communication with Clients; Minimum Standards; Orientation and Training of Staff; Service Coordination, Referrals, and Collaboration; Staff Functions; Supervision and Clinical Collaboration; and Systems Development. All policies updated to gender-neutral language. CCS Analyst reviewed results of 2019 Consumer Satisfaction Surveys.

From 7.15.20 Meeting:

Reviewed CCS census with Committee. Discussed slowing of discharges due to pandemic. Committee reviewed and approved the updated Confidentiality, Security, and Privacy policy. Discussed administration of 2020 Consumer Satisfaction Surveys. Committee approved changes to administration of surveys to include the following: code to collect service facilitation agency, ask language preference, ask COVID questions, and administer survey electronically when possible via email. Committee reviewed and approved the Dane County CCS Monitoring Plan. CCS Service Director reviewed CCS quality assurance practices with the Committee.

From 9.16.20 Meeting:

Reviewed CCS census and statistics/demographics with Committee. Reviewed QI plan for next steps Committee would like to take.

From 11.18.20 Meeeting:

Reviewed CCS census and DCDHS CCS personnel changes. Discussed impact of COVID-19 on provision of services and how agencies have adapted. Lead CCS Intake Worker fielded questions from Committee.

From 1.20.2021 Meeting:

Reviewed CCS census. Reviewed proposed edits to the CCS Plan with Committee. Proposed changes to CCS Plan included: updates to DCDHS CCS Organizational Chart, addition of Behavioral Health Resource Center as a referral source, removal of language describing contracting of Provider Network Coordinator (this position is now housed at Dane County), updating to gender-neutral language, updating language from client to CCS Participant. Committee approved CCS Plan as proposed.

From 3.17.21 Meeting:

Reviewed CCS census data, provided hiring update, reviewed confidentiality guidelines with committee. CCS Analyst reviewed results of 2020 CCS Consumer Satisfaction Survey. Began update of Quality Improvement Plan based on the satisfaction survey results.

From 5.19.2021 Meeting:

Reviewed census data and providing hiring update. Completed review and update of QI Plan.

From 7.21.2021 Meeting:

Reviewed CCS census data and provided hiring update. Review of DQA site visit with Committee. Reviewed proposed update to Recovery Team Development and Facilitation policy. Updated policy approved by Committee. Obtained feedback for the CCS Wait Time for Services survey. Reviewed turnover data.

From 9.15.2021 Meeting:

Presentation from BHRC supervisor, Molly Kloehn. Reviewed CCS census data and 2022 budget proposal as it impacts CCS. Proposal to add 6 positions in CCS in 2022. Updated Committee on MTM. Presented proposed revision to Assessment policy, Committee approved revisions. Completed development of Wait Time for Services survey.

From 11.17.2021 Meeting:

Presentation from CCS Quality Assurance Team. CCS census and hiring update. Difficulty recruiting Bilingual Spanish Case Manager. Reviewed proposed revisions to Conduct policy. Committee approved revised Conduct policy. Reviewed results of Wait Times for Services survey with Committee. Reviewed CCS Provider Directory with Committee for feedback. Committee did not recommend any changes.

From 1.19.2022 Meeting:

Reviewed census and hiring update. CCS Analyst reviewed results of 2021 Consumer Satisfaction Surveys. Began work on update of QI plan based on results of satisfaction surveys.

From 3.16.2022 Meeting:

Reviewed census data and hiring update. Completed revision of QI plan. Engaged in dialogue about how best to measure outcomes of the CCS program. Committee will consider adding 1-2 questions to the 2022 consumer satisfaction surveys to gauge outcomes.

From 5.18.2022 Meeting:

Reviewed census data and hiring update. Reviewed final edits to QI plan and Committee approved. Updated Committee on State proposal to administer satisfaction surveys on a rolling basis. Committee recommended re-administration of wait time survey with additional telehealth questions. Reviewed CCS disenrollment data with committee.

From 7.20.2022 Meeting:

Meeting did not have quorum. Updates provided to those in attendance, no action taken.

From 9.21.2022 Meeting:

Reviewed census data and provided hiring update. Dialogue regarding potential reclassification of social work positions to case manager positions. Committee in support of recruitment of case managers. Reviewed proposed revisions to Minimum Standards Policy. Committee approved updated Minimum Standards policy. Reviewed new Electronic Records and Signatures policy. Committee approved updated policy. Discussed update to satisfaction survey administration timeline. Reviewed Wait Time Survey results.

From 11.16.2022 Meeting:

Reviewed census data and provided hiring update. Began discussion of Bilingual Services & Accommodations Survey with Committee.

From 1.18.2023 Meeting:

Introduced new Coordination Committee members. Behavioral Health Division Administrator described newly-created Behavioral Health Division. Reviewed census data and reviewed updates to CCS Plan. Reviewed proposed updates to CCS Application and Committee approved. Reviewed QI goal of survey to assess bilingual services and accommodations and obtained feedback on proposed questions.

From 3.15.2023 Meeting:

Reviewed census data and CCS intake vacancies. Reviewed proposed changes to Conduct Policy with Committee and answered questions. Committee approved changes to Conduct Policy. Reviewed proposal to add requirement of suicide risk assessment training to CCS Orientation Training for all staff. This will ensure that all staff new to the CCS program are aware of best practice standards for suicide risk assessment. Reviewed mock-up of the bilingual services and accommodations survey and answered questions. Committee approved of Analyst revising and administering survey. Analyst reviewed CCS Provider Network data with the Committee. Reviewed results of 2022 MHSIP with Committee.

From 5.17.2023 Meeting:

Reviewed census data. Reviewed proposed changes to Orientation and Training Policy that involve reducing timeline to accept previously-taken trainings for CCS Orientation requirements from 24 to 12 months. Committee not in favor of this change and thus, no changes to the policy were made. Reviewed proposed changes to Minimum Standards Policy to require active MHP/SAP on staff listing for a service facilitation agency to accept new referrals and require that agencies new to service facilitation must have at least one MHP, Service Director, and Service Facilitator complete the CCS Module training and CCS SF/MHP/SAP/Service Director training prior to the agency receiving referrals. Questions were answered and proposed changes approved by Committee. Reviewed proposal to add C-SSRS training requirement for all staff new to CCS. Answered questions. Committee voted in favor of adding this training requirement. Reviewed proposed changes to QI plan for 2023 and answered questions. QI Plan for 2023 was approved. Began review of results of the Bilingual Services & Accommodations survey with the Committee.

From 7.19.2023 Meeting:

Reviewed census data. Completed review of the results of the Bilingual Services & Accommodations survey. Analyst provided an update on the survey that is being developed to send to all CCS providers monthly to ascertain availability to accept new CCS referrals. It is thought this tool will make it easier for Service Facilitators to match CCS participants with available services to meet their needs in a timely fashion. Survey will be administered monthly and results will be posted to the DCDHS CCS website and emailed to service facilitation staff. Survey will gather information on individual services and groups that are offered within the CCS program. Reviewed proposed updates to extra MHSIP questions. Proposed removal of telehealth questions. Committee wanted to keep telehealth questions and made minor tweaks to the language. Proposed removal of the additional outcome questions. Committee in favor of removal.

From 9.20.2023 Meeting:

Provided census update and answered questions from Committee about CCS discharges. Updated Committee on the Statement of Deficiency from the 2023 DQA site visit. It was found that the Admission Agreement did not contain all required components (this is Admission Agreement that has been used since 2015). Reviewed proposed changes to the Admission Agreement with Committee and answered questions. Committee requested to postpone approval and revisit at November meeting after having additional time to review. Analyst provided update on the survey to assess next month availability of services. Analyst updated Committee on the distribution of the 2023 MHSIP Survey to service facilitation agencies. This year the service facilitators will hand-deliver the survey to participants.

From 11.15.2023 Meeting:

Welcomed new Committee members. Reviewed census data. Reviewed proposed changes to Admission Agreement and Informed Consent document with committee and answered Committee questions. Committee approved revisions to Admission Agreement. Reviewed proposed updates to the Discharge Summary and answered Committee questions. Committee approved updated Discharge Summary. Updated on MHSIP response rate (25% so far). Results will be shared in March 2024. Analyst reviewed

PPS data to share information on CCS outcomes related to QI Plan. CCS participation is significantly associated with the following positive outcomes: increased meaningful daily activity, improved health status, improved employment status, improved living arrangement, lower stressor level, and lower suicide risk. CCS participation is not significantly associated with the number of arrests or commitment status. CCS analyst addressed QI Plan topic of Employment Related Skill Training. Employment outcomes improve after CCS enrollment, 33% of participants have been authorized Employment Related Skill Training, agencies offering ERST have immediate openings to serve CCS participants.

From 1.17.2024 Meeting:

Reviewed census data. Analyst reviewed data regarding discharged participants that have re-enrolled in CCS with the Committee. Analyst provided update on response rate of MHSIP Survey—currently 28%. Analyst updated Committee on results of survey that was sent to Service Facilitators about this year's survey process. 64% of SFs stated they were able to deliver all of surveys. 36% of SFs reported that they were unable to deliver one or more surveys due to lack of participant engagement or participant discharge. 84% of SF agencies reported providing some assistance to participants in completing the survey. Review of 2023 QI Plan. Goals met include developing mechanism to monitor ongoing capacity of CCS service providers, variance obtained from DQA for APNP personnel, utilization of PPS data to understand use of Employment Related Skill Training, and CCS Analyst presentation of data showing significant improvement in employment outcomes with CCS participation.

From 3.20.2024 Meeting:

Welcomed new Committee members. Reviewed census data. CCS Administrator reviewed proposed Telehealth Policy and answered questions. Committee requested extra time to review policy, proposing a vote on approval at May meeting. CCS Administrator reviewed proposed revisions to the Conduct Policy and answered questions. Committee voted unanimously to approve the revised policy. CCS Data Analyst reviewed results of the 2023 MHSIP Consumer Satisfaction Survey with the Committee and answered questions.

From 5.15.2024 Meeting:

Reviewed census data. Discussed proposal of Committee member to work on revising and updating CCS brochure. Obtained Committee volunteers to serve on the Brochure Sub-Committee. CCS Analyst continued review of 2023 MHSIP results and answered questions. Committee began work to update QI Plan. Reviewed 2023 goals 6-9. Discussed the goal of improving ability to compare youth and adult experience in CCS. Proposal to ensure same questions are asked of youth and adults on the survey.

From 7.17.2024 Meeting:

Guest at meeting. Reviewed census data. Committee completed final review of the 2024 QI Plan and approved unanimously. Data Analyst engaged Committee in discussion of 2024 MHSIP Survey administration process and timeline. Obtained general feedback from Committee on goals for update of CCS brochure. CCS Administrator will coordinate meeting of Brochure Sub-Committee to begin work. NAMI Walk announced.

From 9.18.2024 Meeting:

Reviewed census data. CCS Brochure Sub-Committee provided update. CCS Data Analyst provided update on 2024 MHSIP Survey administration. Surveys have been delivered to service facilitation agencies. CCS Administrator reviewed proposed edits to the CCS Plan. Committee members urged to email CCS Administrator if they would like to include additional edits. Revised CCS Plan will be sent out prior to the November Coordination Committee meeting.

From 11.20.2024 Meeting:

Reviewed census data and updated on recruitment for CCS Intake positions. Updated Committee on enhancements to CCS Module to allow providers to submit claims for interpreter services beginning in January 2025. Reviewed updated Cultural Competence and Linguistic Services policy; Committee provided feedback and approved. Data analyst facilitated review of progress on 2024 Quality Improvement

goals and provided update on MHSIP response rate. Reviewed CCS Pan for approval; Committee requested extra time for review. Postponed approval of CCS plan to January 2025 meeting.

CCS Coordination Committee Membership Roster November 2024

Linda Aroonsavath
Melodie Berry
Michelle Danielson
Kimberly Disch-French
Colleen Dunahee
Amber Hofmaster
Matt Julian
Corri Kohn
Julie Meister (chair)
Chloe Moore
Jamie Mulry
Tyson Rittenmeyer
Tracey Scherr
Vanessa Statam

F. ORIENTATION AND TRAINING - DHS 36.12

CCS Policy/Procedures

Orientation and Training of Staff

DHS 36.07(5)(i)

Policy Statement: Adequate training will be provided to ensure that all new staff, students, and regularly scheduled volunteers have the knowledge base to work with CCS participants according to Comprehensive Community Services principles, both initially and ongoing.

Discussion and Procedures:

CCS orientation for new staff will include:

- 1. Review of DHS 36, with special attention to the sections referring to the services the staff person provides;
- 2. Review of CCS policies and procedures;
- 3. Review of job responsibilities as specified in the job description;
- 4. Review of Wis. Stats. Chaps. 48, 51, 55 Stats.;
- 5. Review of DHS 94, patient's rights;
- 6. Review of DHS 92, HIPAA, and confidentiality of records;
- 7. Review of DHS 75 and 42 CFR Part 2;
- 8. Basic provisions of civil rights laws including ADA of 1990, Civil Rights Act of 1964, and pertinent parts of Title VI, i.e., the Limit English Proficiency guidelines;
- Discussion about CCS guidelines, beliefs, philosophy including recovery concepts such as hope, empowerment and connection to others;
- 10. Information about the mental health service delivery system, the substance use disorder system and other social/human service resources;
- 11. Pertinent information and updates to knowledge about mental health/illnesses, substance use disorders, co-occurring disabilities, service needs and treatment methods;
- 12. Non-violent crisis management including verbal de-escalation;
- 13. Risk assessment for suicide, homicide and non-suicidal self-injury.

Minimum Orientation and Training Hours

1. Staff members with less than 6 months experience providing psychosocial rehabilitation services to those with mental health/SUD disorders will receive 40 hours of documented orientation and training within 3 months of starting their employment.

- 2. Staff members with more than 6 months experience providing psychosocial rehabilitation services to those with mental health/SUD disorders will receive 20 hours of documented orientation and training within 3 months of starting their employment.
- 3. Each regularly scheduled volunteer or student will receive 40 hours of orientation training before he/she can work independently with consumers or family members.
- 4. Orientation training shall be documented on the *CCS Service Provider Orientation Checklist*. Both the completed *CCS Service Provider Orientation Checklist* and verification of trainings received and documented on the checklist shall be submitted to DCDHS within three months of initiating employment with the CCS.
- 5. If a CCS staff has received portions of the required CCS orientation training within 24 months of becoming a Dane County CCS staff, verification of training can be submitted to the CCS Provider Network Coordinator to be evaluated for meeting the relevant categorical training requirement. Approval will be granted by the CCS Provider Network Coordinator on a case-by-case basis following a review of the verification and content of the training received, as well as the individual's background and role within the CCS Program. The CCS Provider Network Coordinator will provide written notification of approval or denial. Past trainings accepted as meeting a categorical training requirement will not be counted among the 20 or 40 hours of total orientation and training required, as specified above, unless completed within three months of becoming a Dane County CCS staff.

Ongoing Training Program

Each staff member will receive 8 hours of training each year designed to build upon and enhance the orientation training. Training methods for all staff, students and volunteers will include:

- 1. Staff meeting time set aside for training;
- 2. Presentations by community resource staff from other agencies;
- 3. Individual staff attendance at conferences/workshops;
- 4. Discussion and presentations of current and new principles or methods for delivering culturally competent, recovery oriented services more efficiently and effectively. Any staff or consumers, especially those who have attended outside training, may deliver such education, as well as other experts within or outside the agency;
- 5. Cultural diversity/competence trainings;
- 6. The Provider Network Coordinator will maintain in a central administrative file appropriate documentation to demonstrate that all staff have met training requirements.

Orientation and Training Records

- 1. CCS Staff are required to provide DCDHS with verification of all trainings completed to satisfy the requirements of DHS 36.
- 2. Verification of all orientation and training hours completed by CCS staff to satisfy the requirements of DHS 36 will be retained in the CCS staff file at DCDHS.

Approved by CCS Coordination Committee on 5/20/2020.

5.1.14, 8.18.14, 5.6.15, 5.21.15 revised 6.8.15, 5.1.20 G. CONSUMER APPLICATION – DHS 36.13(1)

	on for Comprehensive Communi			
Applicant Name:		Date of Birth		
(If Applicable) Parent/Guardian Name: _				
Address:				
Email:		Pho	ne:	
If so, what's the provider	s name & contact information?			
Marital Status: 🗆 Single 🗌	Married Divorced Separ	rated 🗆 Widowed	Veteran: 🗆 Y	es ⊡No
Race:	Married Divorced Separ m or mandated services (<i>Check</i> (CPS) Youth Justice Cha	Latine or H	ispanic Descent? □Y	es ⊡No
Race: Involvement with legal syste Child Protective Services Worker's Name & Conto By signing below, I certify th of my knowledge. I unders	m or mandated services (Check	Latine or H all that apply): apter 51 Commitme art of this applicatio formation provideo	ispanic Descent? Y nt Probation n is true and correct t	es □No IParole
Race: Involvement with legal syste Child Protective Services Worker's Name & Conte By signing below, I certify th of my knowledge. I unders completed in order to deter Defined in order to deter I give today. With my for the CCS program the questions. Howe to appeal functional	m or mandated services (<i>Check</i> (CPS) □Youth Justice □Cha act Information: at all information provided as pa tand that in addition to the in	Latine or H all that apply): apter 51 Commitme art of this applicatio formation provided S. artment of Human S n and submit to DH nformation, will be s voluntary and I an y impact my eligibil	ispanic Descent? nt Probation n is true and correct t d, a functional screen Services to complete t S. I understand the in used to determine my n not required to answ ity. I understand I hav	es □No IParole to the best must be the Mental formation y eligibility wer any of e the right
Race: Involvement with legal syste Child Protective Services Worker's Name & Conte By signing below, I certify th of my knowledge. I unders completed in order to deter Define Adults: I give ro Health and Substance I give today, with my for the CCS program the questions. Howe to appeal functional Rights and the Grieve	m or mandated services (<i>Check</i> (CPS)	Latine or H all that apply): apter 51 Commitme art of this applicatio formation provided S. artment of Human S n and submit to DH nformation, will be s voluntary and I am y impact my eligibil e fair hearing process	ispanic Descent? \(\) nt \(\)Probation \(\) n is true and correct t d, a functional screen Services to complete t S. I understand the in used to determine my n not required to answ ity. I understand I hav ss as described in the posses only. I understa	es □No Parole To the best to the best to must be the Mental formation y eligibility wer any of e the right CCS Client and that a

General Description of CCS

CCS is a community-based program that can meet many mental health and substance use disorder needs. It is offered in a way that the client takes joint responsibility with professionals, peers and support persons in determining what his/her goals will be and how to achieve them. CCS instills hope and believes that people can and will recover the person they know themselves to be. Discharge planning is built in from the beginning because it is expected that CCS will not need to be a lifelong program for most.

Eligibility: CCS is a program for individuals, adults and children, who receive Medical Assistance and who have a mental health and/or substance use disorder. They must be in need of ongoing psychosocial services to minimize the effects of the disorder and to maximize independent functioning. Need for services can be low or high intensity, and this need may vary over time. Further, the person must have at least one functional impairment that interferes with or limits one or more life activities, as determined by the State of WI Functional Screen that will be administered by CCS Intake staff.

Emergency Contacts

1.	Name:
	Relationship to Applicant:
	Phone Number:
	Address:
2.	Name:
	Relationship to Applicant:
	Phone Number:
	Address:
	Dane County Department of Human Services
	Comprehensive Community Services (CCS) Program 1202 Northport Drive, Madison, WI 53704
	(608) 242-6415 Phone
	(608) 283-2994 Fax
	www.danecountyhumanservices.org

H. SERVICE ADMISSION AGREEMENT – DHS 36.13(1m)



Comprehensive Community Services (CCS)

Admission Agreement & Informed Consent

DHS 36.13 (1m) • DHS 94.03 (1)

Name:

Date:

Nature and Purpose of CCS

The Comprehensive Community Services (CCS) Program is a voluntary, community-based program for Medicaid eligible youth and adults diagnosed with mental illness and/or substance use disorder. It is operated by Dane County Department of Human Services in compliance with rules under Chapter DHS 36 of the Wisconsin Administrative Code.

Once enrolled in the CCS Program, you will:

- Work with a Service Facilitator, who has overall responsibility for all the activities related to
 coordinating your CCS services. They will be a member of your Recovery Team, facilitate the
 assessment process to determine your needs, help arrange and coordinate the services you
 select, and ensure that your voice is heard;
- Identify other people, who might be family, friends or professionals, to be members of your Recovery Team;
- Work with your Recovery Team to develop a recovery plan that outlines your goals and the services you select to help you meet your goals. Your Recovery Team will include a Mental Health Professional and/or a Substance Abuse Professional that participate in the assessment process, provide clinical guidance, and approve your plan and services;
- Receive the psychosocial rehabilitation services as outlined in your recovery plan; and
- Take steps, at your pace, to achieve your goals and desired level of stability, independence, and recovery.

You will choose services available through a network of providers. Most services are provided Monday through Friday from 8:30 a.m. to 4:30 p.m., but some providers may have hours that are a little different. Information about your care and progress may be shared between the members of your team and your service providers even though the team members and service providers may be from different agencies.

Crisis Services are available during and after hours by phoning the 24-hour crisis line of Journey Mental Health Center at (608) 280-2600.

If you have problems with the CCS program you may contact the CCS Administrator, Julie Meister at (608) 242-6413. The CCS Administrator is responsible for overseeing the operation of the CCS program and assists with requests for access to your health care records.

CCS Admission Agreement & Informed Consent

CCS Participant Rights

As a participant in the CCS program, you have the rights outlined in s. 51.61 Stats., DHS 94, and the right to:

- a. Choose the members of your recovery team, your services, and your service providers.
- b. Receive specific, complete, and accurate information about proposed services.
- c. Consent to treatment and to withdraw from the CCS program at any time.
- d. File formal and informal grievances per procedures in s. 51.61, WI Stats. and ch. DHS 94, and for Medical Assistance clients, the right to a fair hearing under s. DHS 104.01 (5). These are explained in the CCS Client Rights and the Grievance Procedure brochure.

Notice of Confidentiality Regarding Drug and Alcohol Treatment Records

The confidentiality of your treatment records maintained by this program is protected by Federal law. Generally, the program may not tell people outside the program that you are enrolled in the program or receive services from the program or disclose any information identifying you as a recipient of substance use services, unless:

- 1. You consent in writing;
- 2. The disclosure is allowed by a court order;
- 3. The disclosure is required by law; or
- The disclosure is made to medical personnel in a medical emergency or to qualified personnel for research, audit or program evaluation.

Violation of federal confidentiality laws may be enforced by criminal penalties. Federal law does not protect any information about a crime committed at the program or against any person who works for the program, or about any threat to commit such a crime. Federal laws also do not protect any information about suspected child abuse or neglect from being reported as authorized under Wisconsin law.

See 42 USC 290dd-3 and 42 USC 290ee-3 and related regulations regarding the confidentiality of drug and alcohol treatment records under 42 CFR Part 2.

Follow-Up After Discharge

Your records will be maintained by the Dane County Department of Human Services and will remain confidential within the network of providers unless you consent to their release to other organizations or persons, or the law permits such disclosure without your consent.

Telehealth

As a participant in the CCS program, you may choose to use telehealth to access your CCS services, but you can not be required to do so. Telehealth allows you to meet with your service providers using real-time, interactive communication using the internet or a telephone as long as the quality of the telehealth service is equal to an in-person service.

a. Both yourself and the provider of CCS services must agree in order for a service to be provided via telehealth. If either you or the provider decline the use of telehealth for any reason, the service should be performed in person.

CCS Admission Agreement & Informed Consent

Page 2 of 3

b.	You can not be required to use telehealth. You retain the option to refuse the delivery of
	CCS services via telehealth at any time without affecting your right to future care or
	treatment and without risking the loss of any benefits to which you're entitled.

c. Your CCS provider must refer you to another CCS provider, if necessary, such as when telehealth services are not appropriate, can't be functionally equivalent, or if you decline telehealth.

Cost of Services

There is no cost for CCS services for clients who are Medicaid eligible.

Your Acknowledgement and Informed Consent

- a. I acknowledge that I have received and understand this Admission Agreement and Informed Consent document, including the nature and purpose of the CCS Program.
- b. I have been provided with specific, complete and accurate information about the Dane County CCS program and time to study the information or to seek additional information.
- c. I have been provided sufficient information about the CCS program to understand the benefits of receiving services through the CCS program, the way in which CCS services are provided, any risks associated with CCS services, any consequences of not receiving CCS services, and my options for alternate treatment/services.
- d. I have received a copy of the CCS Client Rights and the Grievance Procedure brochure and the grievance procedures have been explained to me.
- e. I have been provided with information on the costs of services, as well as, my financial responsibility for the services I receive.
- f. I have received a copy of the Dane County Notice of Privacy Practices.
- g. I understand that I may choose to participate in telehealth services, which involves the use of video/audio conferencing technology, and I understand the benefits, risks and consequences of utilizing telehealth.
- h. I understand that if medications are prescribed to me by a CCS provider the risks and benefits of the medication will be explained to me by the prescriber and a separate Informed Consent for Medications will be required.
- I understand Informed Consent will be obtained from me annually and that this Informed Consent document is valid for no longer than 15 months from the date I sign below. I have the right to withdraw my informed consent at any time, in writing, through my service facilitator or the CCS Administrator.

Signature of Applicant	Date
Signature of Parent/Guardian	Date
páred #2828	
CCS Admission Agreement & Informed Consent	Page 3 of 3
I. CRITERIA OF DETERMINATION - DHS 36.14

CCS Policy/Procedures Criteria for Determining Need for Psychosocial Rehabilitation Services DHS 36.14

Policy Statement: The CCS program will be available to persons who need more services than those offered through outpatient counseling or other non-intensive programs but less than what is standard for community support programs. Eligibility is restricted to adults and children with mental health and/or substance use disorders.

Discussion and Procedures:

- 1. CCS Intake staff who have been certified as screeners will administer the State's Functional Screen to determine CCS eligibility. These screeners will assess and document initial service needs.
- 2. Eligibility criteria will include:
 - a. a diagnosis of a mental health or substance use disorder
 - b. a functional impairment that interferes with one or more major life activities
 - c. a need for services that is described as ongoing and comprehensive but can be either low- or high-intensity.
- 3. In addition to the functional screen; subjective professional clinical evaluations of the screeners, the Service Director, and in consultation with other professionals listed in DHS 36.10 (2) (e) 1. through 14. will be taken into account.
- 4. The applicant for services must meet one of the following descriptions:
 - a. Group 1: persons in need of ongoing, high-intensity comprehensive services and who have diagnoses of a major mental disorder or substance use disorder. They have substantial needs for psychiatric, substance use and/or medical treatment.
 - b. Group 2: Persons in need of ongoing, low-intensity comprehensive services who have a mental or substance use disorder. They can function independently and be stable much of the time but occasionally have acute psychiatric crises.
- 5. If the applicant meets eligibility criteria, a Mental Health Professional will attest to the need for CCS and psychosocial rehabilitation services and will sign an authorization for services.
- 6. After the applicant becomes a CCS client, there will be an annual functional screen review and update. Updated information will be used in the development of future service plans or to consider if the person served is reaching his/her discharge goals.

5.1.14, 8.22.14 Revised 4.7.15 J. ASSESSMENT POLICIES & PROCEDURES – DHS 36.16

CCS Policy/Procedures Assessment DHS 36.07(5)(m)

Policy Statement: So that each CCS participant receives timely assessments and evaluations on which to base service decisions, a State of Wisconsin Functional Screen will be completed at the time of application to CCS, a comprehensive assessment will be completed within 30 days of receipt of the application for services, and updates to the comprehensive assessment will occur at least once per year, or more frequently as needed.

Discussion and Procedures:

- 1. Assessments will:
 - a. be clearly explained to the participant, and parent/guardian if applicable, and family when feasible and desired by the participant;
 - b. include available family information as well as the participant's perspective on all assessment domains;
 - c. ascertain the degree of English language proficiency spoken and understood; and,
 - d. be incorporated into the development, reviews, and revisions of the participant's recovery plans.
- 2. CCS Intake Staff will verify CCS program eligibility annually through the appropriate State of Wisconsin Functional Screen.
- 3. The comprehensive assessment will be facilitated by the Service Facilitator, will include consult and collaboration with the Mental Health Professional and Substance Abuse Professional, and will be completed in collaboration with the client and other members of the recovery team. The comprehensive assessment will be updated annually, or more frequently if needed as new information becomes available.
- 4. A Substance Abuse Professional will be part of the team if the client has, or is thought to possibly have, a substance use disorder. The Substance Abuse Professional who is certified under DHS 75 will establish substance use diagnoses and will conduct the assessment of substance use, strengths and service or treatment needs.
- 5. Assessments shall incorporate, to the greatest extent possible, the following:
 - a. the participant's own perspective and own words about their recovery, experience, challenges, strengths, resources, and needs,
 - b. the participant's recovery goals and understanding of their treatment or service options,

- c. recent information and evaluations for coexisting mental health, substance use, physical and medical impairments,
- d. gathered facts and histories that are updated with new information when it is obtained,
- e. strengths, needs, recovery goals, priorities, preferences, values and lifestyle of the participant,
- f. strengths of client's family, social network, community, and natural supports,
- g. age and developmental factors,
- h. cultural and environmental supports as they affect the participant's goals, desired outcomes, and preferred methods for achieving goals.
- 6. The assessment will address all domains of functioning including:
 - a. life satisfaction
 - b. basic needs
 - c. social network and family involvement
 - d. community living skills
 - e. housing
 - f. employment
 - g. education
 - h. finances and benefits
 - i. mental health
 - j. physical health
 - k. substance use
 - l. trauma and significant life stressors
 - m. medications
 - n. crisis prevention and management
 - o. legal status
 - p. other domains identified by the CCS
- 7. The Service Facilitator will complete a comprehensive assessment with the participant and their recovery team within 30 days of the date of application for CCS services. The assessment may only be abbreviated if one of the following applies:
 - a. the participant's health or symptoms allows obtaining little or no information within the timeframe,
 - b. the participant chooses not to provide information necessary for completion,
 - c. the participant is immediately interested in receiving only specified services that require limited information
- 8. If an assessment is abbreviated for a reason acceptable above, it must still meet the requirements of a comprehensive assessment insofar as is possible under the conditions. The assessment summary will specify the reason for the abbreviation of the assessment.
- 9. An abbreviated assessment can be in effect for no longer than 3 months from the application for services. At the expiration date, a comprehensive assessment must

be completed. If the assessment cannot be completed, the client will be informed that psychosocial rehabilitation services through the CCS can no longer be offered and services will be discontinued according to DHS 36 regulations.

- 10. An assessment summary will be completed by the Service Facilitator or team designee that includes:
 - a. Each meeting date that occurred to gather information for the comprehensive assessment and the date when the assessment was completed.
 - b. A summary of the information that was used to develop the service recommendations and outcomes.
 - c. The participant's desired outcomes and goals.
 - d. The names and relationship to the participant of all individuals who participated in the assessment process.
 - e. Any significant differences of opinion that are not resolved among members of the recovery team.
 - f. Signatures of all persons present at assessment meetings.
- 11. The comprehensive assessment and assessment summary will establish the foundation for medical necessity and authorization of services.
- 12. The assessment summary will be updated concurrently with any update to the comprehensive assessment.
- 13. Screening and Assessment services provided to a participant will be documented in progress notes in the DCDHS CCS Module.
- 14. Assessment and assessment summary documents will be kept in the participant's central record at DCDHS. All assessment documents will reflect the dates the screening and assessment services took place and the dates the assessments were completed.

Approved by CCS Coordination Committee on September 15, 2021.

5.1.14, 8.25.14, 4.7.15, 4.28.15

Revised 9.14.21

K. SERVICE PLANNING AND DELIVERY PROCESSES – DHS 36.17

Service Planning and Delivery DHS 36.07(5)(n)

<u>Policy Statement:</u> Each client will have a comprehensive recovery plan developed and written within 30 days of admission, and a review and update of the plan in writing at least once every six months thereafter. CCS services will be delivered according to the plan.

Discussion and Procedures:

Facilitation of Recovery Planning:

- 1. The written recovery plan will be based on the assessment and completed within 30 days of application for services.
- 2. The recovery planning process will be explained to the person served, guardian or family member if applicable, in detail with ample examples of how he/she can be involved in constructing the team and the plan.
- 3. The client, service facilitator, mental health professional/SUD professional, guardian and service providers, family, and other individuals of the client's choosing will develop the plan. The client's participation in the development of the plan and goals will be documented in the record and evidenced by the client's signature on the plan.
- 4. Recovery plans will flow from the results of the assessment and recognize the needs, hopes, and dreams of the client while taking into consideration each individual's culture, background, and language.
- 5. Discharge planning will be built into the recovery plan from the outset to instill hope and convey the belief that clients will achieve independence.

Recovery Plan Documentation:

- 1. The plan will specify recovery goals and the treatment, rehabilitation, and support service actions necessary to accomplish the goals. The goals will be written in measurable terms. The plan will include schedules and frequency of services.
- 2. Recovery goals will be elicited from the client and reflected on the plan in the client's own words.
- 3. Expected outcomes and the staff, person or agencies responsible for providing the services will be identified in the plan. Payment source for each service will be explained.

- 4. The type and frequency of data collection that will be used to measure progress toward goals will be written into the plan.
- 5. The plan will be reviewed, approved, and signed by the client, licensed mental health or SUD professional and the service facilitator. The names of participants in the recovery planning meeting will be recorded on an attendance roster and will include the date of the meeting and the name, address, and telephone number of each person.
- 6. Each original, updated and partially completed service plan will be included in the service record contained within the Mental Health Module of the DCDHS Information System.
- 7. An electronic or hard copy of the plan will be available to all members of the recovery team.
- 8. The review of the recovery plan will be scheduled every six months and may occur more often. Progress and current status in meeting the goals set forth in the plan will be reviewed with the client. Goals that have been met will be upgraded, intensified, or deleted, as appropriate. Goals that have not been met will be modified, continued, or deleted, as explained by the review narrative.

Service Delivery:

- 1. Services, both psychosocial rehabilitation and treatment, will be provided in congruence with the client's wishes and style.
- 2. To the extent possible, services will be provided in natural and integrated settings preferred by the client, and will use the natural supports of the client and his/her community when possible.
- 3. Interventions and actions will be designed to assist the client to do for themselves to achieve their desired outcomes, rather than those actions that "do for" or "do to".
- 4. Services will be provided with reasonable promptness and with appropriate frequency to achieve the goals set out in the recovery plan.
- 5. If services are needed or desired that are not delineated in the recovery plan, the service facilitator will convene the recovery team to modify the plan.

5.1.14, 8.22.14 Revised 4.7.15

C. CCS STAFF LISTING

CCS S	STAFF	LISTING -	Chapter	DHS 36
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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Taylor, Christine	CCS Supervisor	LCSW 8871 CSAC 16087	N/A	5,16		⊡E ⊡C	8/2021	5/2021	5/2021	⊠Y ⊡N	
Wartenweiler, Wendy	Owner	SW 12974	5	9			11/2022	11/2022	11/2022	⊠Y ⊡N	

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emplo (full or part C = Contra	time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Rose, Sara	APSW	APSW 135285	5	9		⊠E □C	2/2025	2/2025	2/2025	⊠Y □N	
Van Fossen, Amber	Clinic Director	LPC 4878	5	6		⊠E □C	2/2025	2/2025	2/2025	⊠Y □N	

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	aulifications	FTE	%	Backgro	Caregiver Mound Checks	lisconduct – Dates Cor	nducted
Aboyah, Queen Liza Clinical Stud			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Con	rt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Aboyah, Queen Liza Ayinesom	Clinical Student/ Intern		5	22		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N
Abrajan, Cindy	Bilingual Psychotherapist	LPC-IT 7168	5	14		⊠E □C	8/2022	10/2022	10/2022	⊠Y □N
Ballweg, Nicholas	Psychotherapist	LCSW 11205 SAC-IT 19314	5	5,16		⊠E □C	5/2021	5/2021	5/2021	⊠Y □N
Beyler, Yeng	Service Facilitator		4, 5	15		⊠E □C	1/2023	1/2023	1/2023	⊠Y □N
Boatman, Natara	Service Facilitator		4, 4	15		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Bonaparte, Andrea	Psychotherapist	LCSW 9872	5	5		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N
Bravo, Kimberly	Service Facilitator		4, 5	15		⊠E □C	5/2021	5/2021	5/2021	⊠Y □N
Briggs, Bobbie	Psychotherapist	LMFT-IT 826	5	14		⊠E □C	3/2024	3/2024	3/2024	⊠Y □N
Catalan, Angelica	Bilingual Service Facilitator		4,5	15		⊠E □C	4/2024	5/2024	5/2024	⊠Y □N
Catlin, Zakiya	Intern/ Clinical Student		5	22		⊠E □C	8/2022	8/2022	8/2022	⊠Y □N
Cerda, Manuel	Psychotherapist	LPC-IT 7507 SAC-IT 20391	5	14,16		⊠E □C	4/2022	4/2022	4/2022	⊠Y □N
Chun, Esther	Psychotherapist	LMFT-IT 1113	5	14		⊠E □C	6/2023	6/2023	6/2023	⊠Y □N
Clay, Ruby	Clinical Student/ Intern		5	22		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Clay, Stacy	Peer Support Specialist		5	20		⊠E □C	2/2022	2/2022	2/2022	⊠Y □N

Clay, Vilitha	Psychotherapist/ Supervisor	LCSW 9913	5	9		⊠E □C	1/2025	1/2025	1/2025	⊠Y □N
Davidson, Chyanne	Service Facilitator		4, 5	15		⊠E □C	6/2021	6/2021	6/2021	⊠Y □N
Davis, Clifton	Psychosocial Rehab Specialist		5	15		⊠E □C	8/2023	8/2023	8/2023	⊠Y □N
Doss, Kevin	Psychotherapist	LPC-IT 7955 CSAC 16481	5 (SAP)	14		⊠E □C	1/2025	1/2025	1/2025	⊠Y □N
Dunlap, Chakita	Clinical Student/ Intern		5	22		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N
Foster, Alwyn	Service Facilitator	SAC-IT 19087	4, 5	16		⊠E □C	3/2024	3/2024	3/2024	⊠Y □N
Gomez, Nancy	Psychotherapist/ SF/ Supervisor	LMFT 1405	4, 5	6		⊠E □C	4/2023	4/2023	4/2023	⊠Y □N
Gonzalez Gonzalez, Bertha	Bilingual Psychotherapist		5	14		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N
Goodbear, Emily	Clinical Student/ Intern		5	22		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
Goodwin, Kianna	Psychotherapist/ Supervisor	LCSW 9831	5	5	100%	⊠E □C	6/2022	6/2022	6/2022	⊠Y □N
Gutierrez, Gilberto	Rehabilitation Worker	LMFT 1274	4, 5	14	100%	⊠E □C	9/2023	9/2023	9/2023	⊠Y □N
Harper, Enjoli	Psychotherapist	LCSW 9203 CSAC 15869	5	5,16		⊠E □C	2/2024	2/2024	2/2024	⊠Y □N
Harris, Victoria	Parent Peer Specialist		5	15,20		⊠E □C	6/2024	6/2024	6/2024	⊠Y □N
Hernandez Morales, Armando	Psychologist	Psychologist 2627	5	4		⊠E □C	12/2024	12/2024	12/2024	⊠Y □N
Herringa, Ryan	MD- Psychiatrist	MD 55651	5	1		⊠E □C	2/2022	3/2022	3/2022	⊠Y □N
Hoxha, Gisela	Clinical Student/ Intern		5	22		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N
Jewett, Christina	Parent Child Advocate		5	15		⊠E □C	4/2022	5/2022	5/2022	⊠Y □N
Korenuk, Rubiarbriana	Psychotherapist	APSW 134491	5	9		⊠E □C	6/2023	6/2023	6/2023	⊠Y □N

Leto, Anna	Clinical Student/ Intern		5	22		⊠E □C	4/2024	5/2024	5/2024	⊠Y □N
McNair, Myra	Owner/ Psychotherapist/ Supervisor	LMFT 1091	1, 3, 5 (SAP)	6		⊠E □C	7/2024	7/2024	7/2024	⊡N ⊠Y □N
Mendoza, Emily	Bilingual Psychotherapist	APSW 134870	5	9		⊠E □C	7/2023	7/2023	7/2023	⊠Y □N
Miranda Rodrigues, Jennifer	Clinical Student/ Intern		5	22		⊠E □C	6/2024	6/2024	6/2024	⊠Y □N
Molina Hernandez, Manuela	Psychotherapist	LPC 10975	5	6		⊠E □C	11/2021	1/2022	1/2022	⊠Y □N
Morgan, Teontae	Psychotherapist	LMFT-IT 1129	5	14		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N
Mueller, Marlina	Psychotherapist	LPC-IT 7945 SAC-IT 20026	5	14,16		⊠E □C	6/2023	7/2023	7/2023	⊠Y □N
Musial, Massendra	Clinical Student/ Intern		5	22		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Neal, Brittany	Psychotherapist	LCSW 9865	5	5	100%	⊠E □C	7/2022	6/2022	6/2022	⊠Y □N
Ng, Ze Tsuen (Zach)	Psychotherapist	LPC-IT 7666	5	14		⊠E □C	7/2022	9/2022	9/2022	⊠Y □N
Njeru, Stephanie	Service Facilitator		4,5	15		⊠E □C	12/2024	12/2024	12/2024	⊠Y □N
Norton, Marquel	Clinical Student/ Intern		5	22		⊠E □C	7/2023	7/2023	7/2023	⊠Y □N
Oby, Immanuel	Array Provider		5	21		⊠E □C	12/2024	1/2025	1/2025	⊠Y □N
Orozco, Valerie	Psychotherapist	LPC-IT 7744	5	14		⊠E □C	4/2022	9/2022	9/2022	⊠Y □N
Perez-Kohl, Alexandra	Psychotherapist	LMFT-IT 1034	5	14		⊠E □C	4/2023	7/2023	7/2023	⊠Y □N
Ramsey, Pamela	Psychotherapist/ Service Facilitator	LPC 8301	4, 5	6	100%	⊠E □C	2/2022	3/2022	3/2022	⊠Y □N
Raphaely, Shiri	Psychiatrist	MD 72185	5	1		⊠E □C	11/2023	11/2023	11/2023	⊠Y □N
Sawczak, Abigail	Clinical Student/ Intern		5	22		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N

Serrano, Lisette	Bilingual Service Facilitator		4, 5	15		⊠E □C	8/2023	8/2023	8/2023	⊠Y □N
Soward, Pamela	Psychotherapist	LPC (1.09) 6155	1, 5	6, 16	70%	⊠E □C	9/2023	10/2023	10/2023	⊠Y □N
Statam, Vanessa	Supervisor/ Psychotherapist	LCSW 9892	1, 3, 4, 5 (SAP)	5	100%	□E ⊠C	9/2021	10/2021	10/2021	⊠Y □N
Stoner Fehsenfeld, David Matthew	Clinical Student/ Intern		5	22		⊠E □C	4/2024	6/2023	6/2023	⊠Y ⊠N
Thao, Lyda	Psychotherapist	LCSW 11193	5	5		⊠E □C	2/2024	2/2024	2/2024	⊠Y ⊠N
Tsedon, Karma	Psychotherapist	LCSW 10250	5	5		⊠E □C	1/2023	1/2023	1/2023	⊠Y □N
Varecka, Mishell	Psychotherapist	LPC-IT 7520	5	14		⊠E □C	4/2023	5/2023	5/2023	⊠Y □N
Vazquez, Mason	Service Facilitator		4,5	14		⊠E □C	3/2023	3/2023	3/2023	⊠Y □N
Warren, Asly	Clinical Student/ Intern		5	22		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Yakubu, Andala	Psychotherapist	APSW 134263	5	9		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N
Young, Devon	Service Facilitator		4, 5	14		⊠E □C	10/2022	10/2022	10/2022	⊠Y □N
Yu, Serena	Psychotherapist	LPC 10625	5	6		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N

Name (Last, First, MI)	Position Description	Position Description Credentials/ License Number		Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
		Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Em (full or pa C = Cor	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/			
Andermann, Aaron (Luke)	Parent Coach		5	15		⊠E □C	9/2021	9/2021	9/2021	⊠Y □N		
Johnson, Katherine	Clinical Supervisor	LCSW 8994-123	N/A	5		⊠E □C	2/2022	3/2023	3/2023	⊠Y □N		
Larson, Cheryl	Clinical Supervisor	LPC 1304-125	5	6		⊠E □C	7/2021	8/2021	8/2021	⊠Y □N		
McElroy, Hilary	Clinical Supervisor	LPC 4283-125	5	6		⊠E □C	2/2023	3/2023	3/2023	⊠Y □N		
Meyer, Kayla	ITS Worker	LPC-IT 7824	5	14		⊠E □C	7/2023	7/2023	7/2023	⊠Y □N		
Plitzner, Jennifer	Program Supervisor	LPC 4593-125	N/A	6		⊠E □C	7/2021	7/2021	7/2021	⊠Y □N		
Scanlan, Cara	Parent Coach		5	14		⊠E □C	12/2024	12/2024	12/2024	⊠Y □N		
Sol, Elias	Parent Coach		5	15		⊠E □C	3/2024	3/2024	3/2024	⊠Y □N		
Wagner, Jenny	Parent Coach		5	14		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N		
Willeson-Holland, Christine	Parent Coach		5	15		⊠E □C	7/2023	6/2023	6/2023	⊠Y □N		
Wilmot, Julie	Parent Coach		5	15		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N		

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emplo (full or p time) C = Contract	art	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Callahan, Natalie	Counselor		5	15		⊠E □C	12/2023	12/2023	12/2023	□Y □N	
Carroll, Colleen	Clinical Supervisor	LCSW 8644	5	5		⊠E □C	6/2024	6/2024	6/2024	□Y □N	
Shelton, Caroline	Care Coordinator		5	15,20		⊠E □C	12/2021	5/2022	5/2022	□Y □N	
Verbauwhede, Sydney	Outpatient Services Program Manager	SAC-IT 19597	5	14,16		⊠E □C	10/2023	10/2023	10/2023	□Y □N	

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emj (full or pa C = Con	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Spires, Anne M.	Owner/ Service Provider	N/A	5	15	100%	⊠E C	10/2023	10/2023	10/2023	⊠Y □N	
Sweazy, Jessica	CCS Supervisor	LCSW 9433	N/A	5	5%	□E ⊠C	6/2023	6/2023	6/2023	⊠Y ⊡N	

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Functions and Qualifications FTE %		Backgr		ver Misconduct ecks – Dates Conducted		
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Erhardt, Anne	Clinical Supervisor	LMFT 1209	N/A	<mark>6</mark>	□E ⊠C	<mark>12/2020</mark>	<mark>12/2020</mark>	<mark>12/2020</mark>	⊠Y □N	
Syed, Salam	MD/ Owner	MD 53833	5	2	□E □C	4/2022	4/2022	4/2022	⊠Y □N	

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Nam e (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted					
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		(full or part time)		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Harmelink, John	Director		5	15		ΠE	8/2024	6/2024	6/2024	⊠Y		
						□C				□N		
Williams, Walter	CCS Supervisor	LPC 8145	N/A	6		E	2/2022	2/2022	2/2022	⊠Y		
						□C				□N		

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted					
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		(full or part time)		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Barrett, Emily	CCS Supervisor	LCSW 9080	N/A	5		⊡C	6/2024	6/2024	6/2024	⊠Y ⊡N		
Zaidi, Reba	Executive Director	RN 151730	5	12			6/2024	6/2024	6/2024	⊡N ⊠Y ⊡N		

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Turner, Mitchell	CCS Supervisor	LPC 7290 CSAC 16472	N/A	6,16		E E	5/2023	5/2023	5/2023	⊠Y ⊡N	
West, Robert	Owner/ Trainer		5	15			4/2023	4/2023	4/2023	⊠Y ⊡N	

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	FTE	%	Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Con	rt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Dienberg, Candice	CCS Supervisor	LCSW 9228 SAC 15826	N/A	5,16		□E □C	1/2023	1/2023	1/2023	⊠Y □N
Kabakov, Sabrina	Occupation Therapist	OT 8654	5	13		□E □C	8/2024	8/2024	8/2024	⊠Y □N
Ritsche, Keith	Director, Occupational Therapist	OT 7134	5	13		□E □C	11/2023	11/2023	11/2023	⊠Y □N

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications			%	Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emj (full or pa C = Con	rt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Bohlman, Ann	Psychotherapist	LCSW 7018	5	5	25%	⊡E ⊠C	12/2023	12/2023	12/2023	⊠Y □N	
Ginko, Amy	CCS Supervisor	LPC 4697-125	N/A	6	5%	⊡E ⊠C	7/2023	7/2023	7/2023	⊠Y □N	
Jahraus, Lindsey	Mental Health Specialist	APSW 131399-121	5	9	100%	⊠E □C	12/2023	12/2023	12/2023	⊠Y □N	
Lindner, Sara	Mental Health Specialist		5	14	100%	⊠E □C	2/2023	2/2023	2/2023	⊠Y □N	
Olson, Chelsea	Mental Health Specialist	APSW 131203-121	5	9	100%	⊠E □C	6/2024	5/2024	5/2024	⊠Y □N	

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Qualifications	FTE	:%	Caregiver Misconduct Background Checks – Dates Conducted										
										Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Em (full or pa C = Cor	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Allen, Terra	Service Facilitator		4,5	15		□E □C	1/2025	1/2025	1/2025	⊠Y □N							
Brown, Jennifer	Director	APSW 131293	4,5	9		□E □C	4/2023	4/2023	4/2023	⊠Y □N							
Evans, Jodi	ISDE Provider		5	15		□E □C	7/2024	8/2024	8/2024	⊠Y □N							
Garcia-Ludolph, Jennifer	Service Facilitator		4,5	15		□E □C	3/2024	3/2024	3/2024	⊠Y □N							
Gump, Judith	Skill Developer		5	15		□E □C	8/2024	9/2024	9/2024	⊠Y □N							
Huerth, Megan	Service Facilitator	SW 14243	4,5	9		□E □C	2/2025	2/2025	2/2025	⊠Y □N							
Jones, Alexandrea	Service Facilitator		4,5	15		□E □C	1/2025	2/2025	2/2025	⊠Y □N							
Kahl, Larry	MHP/SAP/SD	LPC 1295 CSAC 1265	1,3 (SAP)	6,16		□E □C	2/2024	2/2024	2/2024	⊠Y □N							
Lee, Xeng	Service Facilitator		4,5	15		□E □C	8/2024	8/2024	8/2024	⊠Y □N							
McDonough, Molly	Backup MHP	LCSW 11806	1,5 (SAP)	5		□E □C	11/2024	11/2024	11/2024	⊠Y □N							
Miller, Tara	Service Facilitator	SW 10285	4,5	9		□E □C	4/2024	4/2024	4/2024	⊠Y □N							
Siegel, Lisa	Service Facilitator		4,5	15		□E □C	3/2024	3/2024	3/2024	⊠Y □N							
Yang, Tracey	Rehabilitation Worker		5	21		□E □C	10/2023	10/2023	10/2023	□Y ⊠N							

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	FTE %	6	Backgro	Caregiver Misconduct kground Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		(full or part time) BID		DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Heemstra, Dylan	Owner/ Provider	LMFT 1289	5	6		⊠E □C	1/2025	1/2025	1/2025	⊠Y □N	
Rozeske, Jordan	Clinical Supervisor	LCSW 8018	N/A	5		□E ⊠C	8/2023	9/2023	9/2023	⊠Y □N	

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Name (Last, First, MI)	Position Description								Misconduct s – Dates Coı	nducted
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Con	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Adams, John	President	SAC-IT 19544	4,5 (SAP)	15		⊠E □C	3/2023	3/2023	3/2023	⊠Y □N
Andreakos, Maria	APSW	APSW 134991	4,5	9		⊠E □C	11/2022	11/2022	11/2022	⊠Y □N
Brooks, Shailyn	Case Manager		4,5	15		⊟E ⊠C	7/2023	7/2023	7/2023	⊠Y □N
Dreckschmidt, Daniel	Case Manager		4,5	15		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Ervin, Ruchita	CCS Supervisor	LPC 6487 CSAC 16072	1,3 (SAP)	6, 16		⊠E □C	6/2024	6/2024	6/2024	⊠Y □N
Fink, Sarah	LCSW	LCSW 11268	1,4,5	5		⊠E □C	8/2021	8/2021	8/2021	⊠Y □N
Frion, Brooke	Youth Case Manager		4,5	15		⊠E □C	10/2023	10/2023	10/2023	⊠Y □N
Keith, Kirstie	Peer Specialist		5	20		⊠E □C	1/2024	1/2024	1/2024	⊠Y □N
Kleindl, Abigail	Case Manager	LPC-IT 7776	4,5	14		⊠E □C	2/2023	3/2023	3/2023	⊠Y □N

Lewis, Marjorie	Service Facilitator		4,5	15	⊠E	2/2022	2/2022	2/2022	×Υ
-					□C				$\Box N$
Marifrog, Rainbow	Clinical Supervisor	LMFT 919	N/A	6	⊠E	6/2023	4/2023	4/2023	⊠Y
					□C				$\Box N$
Moody, Michael	CEO		4,5	14	⊠E	2/2024	2/2024	2/2024	⊠Y
					□C				$\Box N$
Messer, Jeffrey	Case Manager		4,5	15	⊠E	8/2024	8/2024	8/2024	⊠Y
					□C				$\Box N$
Retberg, Ashley	Case Manager		4,5	15	⊠E	9/2024	9/2024	9/2024	⊠Y
					□C				$\Box N$
Robertson, Lindsey	Case Manager		4,5	15	⊠E	7/2024	7/2024	7/2024	⊠Υ
					□C				$\Box N$
Sheftic, Erick	Psychiatrist	MD 67363	1,5	1	⊠E	12/2023	12/2023	12/2023	⊠Y
			(SAP)		□C				$\Box N$
Stoehr, Emma	Case Manager		4,5	15	⊠E	12/2021	12/2021	12/2021	×Υ
					□C				$\Box N$

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			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/		
Aney, Alexis	Counselor	LPC 10841 SAC 17178	1,5 (SAP)	6,16		□E □C	8/2024	9/2024	9/2024	⊠Y □N		
Boros, Penina	Clinical Student/ Intern		5	22		□E □C	8/2024	9/2024	9/2024	⊠Y □N		
Boughman, Lara Skye	Clinical Director	LPC 5352 CSAC 1459	1,3,5 (SAP)	6,16		□E □C	10/2023	10/2023	10/2023	⊠Y □N		
Darling, Madeline	Clinical Student/ Intern		5	22		□E □C	7/2024	7/2024	7/2024	⊠Y □N		
Flesch, Chloe	Clinical Student/ Intern		5	22		□E □C	9/2024	10/2024	10/2024	⊠Y □N		
Foster, Samantha	Counselor	LPC-IT 7906	4,5	14		□E □C	5/2024	5/2024	5/2024	⊠Y □N		
Holt, Kathleen	Director of Operations	CSAC 17006	5 (SAP)	16		□E □C	3/2024	3/2024	3/2024	⊠Y □N		
Jump, Gabriela	LPC	LPC 8116	5	6		□E □C	5/2024	5/2024	5/2024	⊠Y □N		
Lewandowski, Lara	Family Program Manager	LMFT 2143 SAC-IT 19108	1,5	6,16		□E □C	3/2024	3/2024	3/2024	⊠Y □N		
Mulcahy, Brooke	Eating Disorder Program Manager	LCSW 9893	5	5		□E □C	2/2024	3/2024	3/2024	⊠Y □N		
Noxon, Jamie	Clinical Student/ Intern	SAC 17066	4,5	22		□E □C	7/2024	7/2024	7/2024	⊠Y □N		
Peterson, Kailey	Substance Abuse Counselor	APSW 132464 CSAC 17184	5	9,16		□E □C	4/2024	4/2024	4/2024	⊠Y □N		

Pitzo, Jennifer	Psychotherapist	LPC 6337 CSAC 16353	5	6,16	□E □C	9/2024	9/2024	9/2024	⊠Y □N
Roxworthy, Angela	Clinical Student/ Intern		4,5	22	□E □C	8/2024	9/2024	9/2024	⊠Y □N

Name (Last, First, MI)	Position Description								Misconduct s – Dates Cor	nducted
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	(full or p	nployed art time) ntracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Ayo, Laronda	Child and Family Therapist	LMFT 2151	5	6	5%	⊠E □C	11/2023	11/2023	11/2023	⊠Y □N
Becerra, Sandra	Child and Family Therapist	LPC 8700	5	6	5%	⊠E □C	3/2024	3/2024	3/2024	⊠Y □N
Brochman, Kate	Child and Family Therapist	LPC 7078	5	6	5%	⊠E □C	11/2022	6/2021	6/2021	⊠Y □N
Burch, Morgan	Child and Family Therapist	LCSW 9316	5	5	5%	⊠E □C	5/2021	9/2023	9/2023	⊠Y □N
Carroll, Lillian	Child and Family Therapist	LPC 4072	5	6	5%	⊠E □C	5/2023	8/2023	8/2023	⊠Y □N
Carroll, Thomas	Child and Family Therapist	LPC 5969	5	6	5%	⊠E □C	10/2021	10/2021	10/2021	⊠Y □N
Cartwright, Elisabeth	Child and Family Therapist	APSW 134907	5	9	5%	⊠E □C	7/2024	7/2024	7/2024	⊠Y □N
Chester, Brittnee	Child and Family Therapist	LPC-IT 8180	5	14	5%	⊠E □C	10/2024	10/2024	10/2024	⊠Y □N
Hinahara, Gabrielle	Child and Family Therapist	LPC-IT 8280	5	14	5%	⊠E □C	12/2024	12/2024	12/2024	⊠Y □N
Kolb, Colleen	Child and Family Therapist	LMFT 1023	5	6	5%	⊠E □C	4/2021	4/2021	4/2021	⊠Y □N
Luebke, Brooke	Direct Services Manager	LMFT 835	5	6	5%	⊠E □C	5/2021	6/2021	6/2021	⊠Y □N
Lukes, Anna	Child and Family Therapist	LMFT 1414	5	6	5%	⊠E □C	2/2022	2/2022	2/2022	⊠Y □N
Matthews, Natalie	Child and Family Therapist	APSW 134275	5	9	5%	⊠E □C	10/2024	10/2024	10/2024	⊠Y □N
Rawoens, Dana	Child and Family Therapist	LPC-IT 7997	5	14	5%	⊠E □C	6/2024	6/2024	6/2024	⊠Y □N

Schlueter, Breanna	Child and Family	APSW 134636	5	9	5%	⊠E	10/2024	10/2023	10/2023	⊠Y
	Therapist					□C				□N
Schroeder, Nicole	Child and Family	LCSW 8330	5	5	5%	⊠Ε	5/2023	5/2023	5/2023	⊠Y
	Therapist					□C				□N
Solomon Schwabe,	Child and Family	LMFT 1250	5	6	5%	⊠Ε	5/2021	6/2021	6/2021	⊠Y
Madison	Therapist					□C				□N
Sterling, Michelle	Child and Family	LCSW 8392	5	5	5%	⊠Ε	7/2021	7/2021	7/2021	⊠Y
	Therapist					□C				□N
Vail, Marlene	Child and Family	LCSW 11373	5	5	5%	⊠Ε	5/2022	5/2022	5/2022	⊠Y
	Therapist					□C				□N
Wagner, Emilie	Child and Family	LPC-IT 8108	5	14	5%	⊠Ε	9/2024	9/2024	9/2024	⊠Y
	Therapist					□C				□N
Washburn, Shelby	Child and Family	LPC-IT 5407	5	14	5%	⊠Ε	11/2023	11/2023	11/2023	⊠Y
	Therapist					□C				□N
Williams, Breanna	Child and Family	APSW 134935	5	9	5%	⊠E	5/2024	5/2024	5/2024	⊠Y
	Therapist					□C				□N

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			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or time C = Contra	part e)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Beckman, Shelby	Occupational Therapist	OT 7002-26	5	13		⊠E □C	1/2023	2/2023	2/2023	⊠Y □N	
Bluske, Jennifer	Occupational Therapist	OT 3248-26	5	13	8%	⊠E □C	11/2023	11/2023	11/2023	⊠Y □N	
Dimick, Sarah	Parent Coach		5	14		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N	
Gilpin-Parks, Lynn	CCS Supervisor	LPC 6682-125	5	6		□E ⊠C	10/2023	10/2023	10/2023	⊠Y □N	
Hewitt, Laura	Occupational Therapist	OT 5306-26	5	13	12%	⊠E □C	11/2023	11/2023	11/2023	⊠Y □N	
Laird, Emily	Occupational Therapist	OT 5479-26	5	13	16%	⊠E □C	3/2022	3/2022	3/2022	⊠Y □N	
Messina, Marcy	Occupational Therapist	OT 7164-26	5	13		⊠E □C	12/2023	12/2023	12/2023	⊠Y □N	
O'Neil, Katie	LPC-IT	LPC-IT 8103	5	14		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N	
Robertson, Madeline	ISDE Provider		5	15		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N	
Srikanthan, Abigail	Occupational Therapist	OT 8452-26	5	13		⊠E □C	2/2024	6/2024	6/2024	⊠Y □N	
Stuckey, Shannon	Occupational Therapist	OT 7195-26	5	13		⊠E □C	3/2022	3/2022	3/2022	⊠Y □N	
Wodrich, Meredith	Parent Coach		5	15		⊠E □C	7/2022	7/2022	7/2022	⊠Y □N	

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Chavez, Daniel	CCS Provider		5	15		□E □C	11/2024	11/2024	11/2024	⊠Y □N
Hereford, Veronica	Rehabilitation Provider	APSW 134988	5	9		□E □C	2/2024	2/2024	2/2024	⊠Y □N
Nichols, Kathryn	APSW	APSW 131001	5	9		□E □C	10/2024	10/2024	10/2024	⊠Y □N
Rabideau, Tammy	CCS Provider		5	15		□E □C	11/2024	11/2024	11/2024	⊠Y □N
Rose, Ebony	Skill Developer		5	15		□E □C	12/2023	12/2023	12/2023	⊠Y □N
Williams, Walter	CCS Supervisor	LPC 8145	N/A	6		□E □C	2/2022	2/2022	2/2022	⊠Y □N
Wright, Annetta	CCS Provider		5	14		□E □C	11/2024	11/2024	11/2024	⊠Y □N

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Bissell, Jean	Peer Specialist		5	20	15%	⊠E □C	3/2024	4/2024	4/2024	⊠Y □N
Cardona Leon, Abril	Employment Specialist		5	21		⊠E □C	4/2023	4/2023	4/2023	⊠Y □N
Cerise, Mila	Vocational Peer Specialist		5	20		⊠E □C	1/2023	1/2023	1/2023	⊠Y □N
Colosky, Laura	Clubhouse Generalist		5	15		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
Duckert, Eren	Employment and Education Specialist	SW 14131	5	9		□E □C	6/2023	6/2023	6/2023	⊠Y □N
Edwards, Michael	Employment and Education Specialist		5	15		□E □C	8/2021	8/2021	8/2021	⊠Y □N
Hays, Riley	Peer Specialist		5	20		⊠E □C	5/2023	9/2023	9/2023	⊠Y □N
Jackson, Imani	Vocational Peer Specialist		5	20		⊠E □C	3/2024	4/2024	4/2024	⊠Y □N
Kittoe, Christopher	Employment Specialist		5	21		⊠E □C	11/2021	12/2021	12/2021	⊠Y □N
Lee, PorShoua	Employment Specialist	APSW 130551	5	9	100%	⊠E □C	8/2023	8/2023	8/2023	⊠Y □N
Lopez, Andrew	Vocational Peer Specialist		5	20	90%	⊠E □C	11/2022	11/2022	11/2022	⊠Y □N
Pesavento Perez, Jessica	Peer Specialist- Engagement Coordinator		5	20		⊠E □C	11/2023	11/2023	11/2023	⊠Y □N
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Peterson, Eric	Peer Specialist		5	20		⊠E □C	2/2023	2/2023	2/2023	⊠Y □N
Puleo, Audi	Employment Specialist		5	15		⊠E □C	5/2022	5/2022	5/2022	⊠Y □N
Rischall, Danielle	Executive Director/ Supervisor	LCSW 8149	1	5	10%	⊠E □C	1/2023	2/2023	2/2023	⊠Y □N
Simmons, Antonio	Vocational Peer Specialist		5	20		⊠E □C	6/2024	5/2024	5/2024	⊠Y □N
Staley, Ashley	Employment Specialist		5	15	50%	⊠E □C	2/2025	2/2025	2/2025	⊠Y □N
Stapleton, Kurtis	Vocational Peer Specialist		5	20	90%	⊠E □C	7/2024	7/2024	7/2024	⊠Y □N
Stark, Sonora	Employment Specialist		5	21		⊠E □C	8/2022	9/2022	9/2022	⊠Y □N
Strickland, Matthew	Peer Specialist		5	20	75%	⊠E □C	1/2023	2/2023	2/2023	⊠Y □N
Sylskar, Blair	Employment & Education Specialist		5	14		⊠E □C	6/2023	6/2023	6/2023	⊠Y □N
Yonker, Amy	Director of Programming	LPC 6347-125	5	6	50%	⊠E □C	4/2022	4/2022	4/2022	⊠Y □N
Ziegert, Katherine	Clubhouse Supervisor	LCSW 7592	5	5	80%	⊠E □C	3/2024	4/2024	4/2024	⊠Y □N

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Lending Halsten, Robyn	Supervisor	LPC 4564 DT 7	N/A	6	⊠E ⊡C	3/2023	3/2023	3/2023	⊠Y ⊡N	
Williams, Mary	Owner/ Psychotherapist	LPC 5099 AT 127	5	6	⊠E ⊡C	8/2024	8/2024	8/2024	⊠Y ⊡N	

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Greengus, Heidi	Grief Support		5	15		Œ	11/2021	12/2021	12/2021	⊠Y		
	Specialist									□N		
Kushner, Jessica	Founder/ Provider		5	15		Ш	7/2024	7/2024	7/2024	⊠Y		
										□N		
Taylor, Christine	CCS Supervisor	LCSW 8871	N/A	5,16		Œ	8/2021	5/2021	5/2021	⊠Y		
		CSAC 16087				Ľ				□N		

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		F 2 3 4 5	Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22			BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/				
Chen, Hsiang-Ting	Occupational Therapist	OT 8704	5	13		⊠E □C	9/2024	10/2024	10/2024	⊠Y □N				
Douglass, Kory	Marriage & Family Therapist	LMFT 2059	5	6		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N				
Elsbury, Savannah	Service Facilitator		4, 5	15	100%	⊠E □C	10/2022	10/2022	10/2022	⊠Y □N				
Gruen, Amy	LPC-IT	LPC-IT 7994	5	14		⊠E □C	5/2024	6/2024	6/2024	⊠Y □N				
Heimerl, Robin	LPC	LPC 5587 SAC 15852	1,3,5 (SAP)	6,16		⊠E □C	12/2022	12/2022	12/2022	⊠Y □N				
Hu, Yusi	Service Facilitator		4, 5	14		⊠E □C	1/2024	1/2024	1/2024	⊠Y □N				
Kaltenberg, Kennedy	Clinical Student/ Intern		5	22		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N				
Lacayo, Olivia	Service Facilitator		4, 5	14		⊠E □C	3/2024	3/2024	3/2024	⊠Y □N				
Layde, Patricia	LPC	LPC 11170	5	6		⊠E □C	9/2022	9/2022	9/2022	⊠Y □N				
Leick, Megan	SLP		5	15		⊠E □C	4/2023	5/2023	5/2023	⊠Y □N				
Long, Monty	Service Facilitator		4, 5	15	100%	⊠E □C	9/2021	9/2021	9/2021	⊠Y □N				
Marthaler, Jillian	Service Facilitator		4, 5	14		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N				
Ottosen, Hailey	Occupational Therapist	OT 7017	5	13		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N				
Princl, Ann	Service Facilitator		4, 5	15	100%	⊠E □C	10/2022	10/2022	10/2022	⊠Y □N				

Roeglin, Rhianna	Service Facilitator		4, 5	15		⊠E	11/2023	11/2023	11/2023	⊠Y
						□C				□N
Saniter, Ashley	Occupational Therapist	OT 8287	5	13		⊠E	6/2023	6/2023	6/2023	×Ν
						□C				□N
Scott, Jessica	Occupational Therapist	OT 8672	5	15		⊠E	8/2024	8/2024	8/2024	⊠Y
		SW 12276				□C				□N
Taylor, Andrea	Occupational Therapist	OT 7324	5	13		⊠E	7/2024	7/2024	7/2024	⊠Y
Dominique						□C				□N
Yopps, Michaela	Clinical Director	OT 6599	5	13	100%	⊠E	5/2021	5/2021	5/2021	⊠Y
						□C				□N

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Graham, Shannon	Clinical Case Manager	LCSW 10246	5	5		⊡E ⊠C	10/2022	10/2022	10/2022	⊠Y □N		
Nyhuis-Wing, Joy	Clinical Case Manager	LCSW 1553-121	5	5		⊡E ⊠C	10/2023	10/2023	10/2023	⊠Y □N		
Reynders, Rachel	Therapist	APSW 132450	5	9		⊠E □C	6/2021	6/2021	6/2021	⊠Y □N		
Rifken, Donna	Psychologist	Ph.D 1092-057	5	4	50%	⊠E □C	11/2024	11/2024	11/2024	⊠Y □N		
Schroeder, Lora	Clinical Case Manager	LCSW 6630-123	5	5		⊡E ⊠C	12/2022	3/2023	3/2023	⊠Y □N		
Simon, Mary	Supervisor	LCSW 830-123	5	5	50%	⊠E □C	12/2022	12/2022	12/2022	⊠Y □N		

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Barger, Sharon A.	Director, Psychotherapist / SAP Supervisor	LPC 308 LCSW 2583 SAC 12077	1, 3, 4, 5 (SAP)	5, 6, 16	60%	⊠E □C	12/2023	12/2023	12/2023	⊠Y □N		
Elkind, Steve	Psychologist	Psychologist 1102-057	1, 4, 5 (SAP)	4	20%	□E ⊠C	10/2023	10/2023	10/2023	⊠Y □N		
Emmerich, Galina	Service Facilitator	LPC 10713	1, 4, 5 (SAP)	6	90%	⊠E □C	2/2023	2/2023	2/2023	⊠Y □N		
Farmer-Oren, Mary	СОТА	OTA 404	4, 5	18	100%	⊠E □C	1/2025	1/2025	1/2025	⊠Y □N		
Galang, Mia	Service Facilitator		4, 5	15		⊠E □C	10/2023	10/2023	10/2023	⊠Y □N		
Koehler, Gregory	MHP/ Service Facilitator	LCSW 880	1, 4, 5 (SAP)	5	90%	⊠E □C	1/2025	1/2025	1/2025	⊠Y □N		
Muich, Catherine	Support Specialist	LMFT-IT 1026	4, 5	14	100%	⊠E □C	1/2022	1/2022	1/2022	⊠Y □N		
Rush, Jodi	Service Facilitator	SW 2911	4, 5	9		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N		
Schroeder, Sherri	Service Facilitator	CSAC 16415	4, 5	14,16		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N		
Shelton, Eric	Skills Provider		5	21		⊠E □C	5/2024	6/2024	6/2024	⊠Y □N		

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Basten, Ada	Community Support Specialist		4, 5	15		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N		
Isham, Nicholas	Community Support Specialist		4, 5	15	100%	⊠E □C	12/2021	12/2021	12/2021	⊠Y □N		
McGinley, Diana	Community Support Specialist	SW 6412	4, 5	9		⊠E □C	8/2023	8/2023	8/2023	⊠Y □N		
Murray, Michelle	Behavioral Health Clinician	LCSW (1.09) 7814	1, 5 (SAP)	5,16	6%	⊠E □C	2/2024	2/2024	2/2024	⊠Y □N		
Nordstrom, Daniel	Behavioral Health Clinician	LCSW 9151	1,5 (SAP)	5		⊠E □C	5/2022	5/2022	5/2022	⊠Y □N		
Roberson, Makala	Community Support Specialist		4, 5	15		⊠E □C	2/2023	2/2023	2/2023	⊠Y □N		
Shampo, Kaylin	BH Program Coordinator/ Supervisor	LCSW 9052	1, 3 (SAP)	5		⊠E □C	7/2021	7/2021	7/2021	⊠Y □N		

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	rieson Grota		Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employ (full or part ti C = Contrac	ime)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Carlsson, Greta	Counselor	LPC-IT 8076	5	14		⊠E ⊐C	9/2024	9/2024	9/2024	⊠Y □N
Lee, Sophia	Clinical Student/ Intern		5	22		⊠E ⊐C	2/2024	4/2024	4/2024	⊠Y □N
McCreadie, Robert	Assistant Director	CSAC 15500	5	16		⊠E ⊐C	12/2022	12/2022	12/2022	⊠Y □N
Pitzo, Jennifer	Supervisor	LPC 6337 CSAC 16353	5	6,16		⊠E ⊐C	12/2023	1/2024	1/2024	⊠Y □N
Plesh, Jason	Counselor	LPC 7656	5	6		⊠E □C	1/2023	1/2023	1/2023	⊠Y □N
Swanson, Kayla	Counselor	LPC-IT 7855	5	14		⊠E □C	4/2023	8/2023	8/2023	⊠Y □N
Webber, Cynthia	Counselor	LPC 10854	5	6		⊠E ⊐C	3/2023	6/2022	6/2022	⊠Y □N

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Qualifications	FTE	%	Backgro		Misconduct s – Dates Cor	nducted
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Beyer, Alison	Peer Specialist		5	20		⊠E □C	8/2021	9/2021	9/2021	⊠Y □N
Cassidy, Sandra	Skills Development Specialist		5	14		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Christianson, Kirstin	Array Provider		5	14		⊠E □C	1/2025	2/2025	2/2025	⊠Y □N
Doyle, Kathryn	CCS Supervisor	LCSW 9932	N/A	5		⊠E □C	11/2022	11/2022	11/2022	⊠Y □N
Herro, Karen A.	RN	RN 117586	5	12, 20		⊠E □C	8/2021	8/2021	8/2021	⊠Y □N
Pettersen, Erik	Peer Specialist		5	20		⊠E □C	1/2022	1/2022	1/2022	⊠Y □N
Schuetz, Debra	Peer Specialist		5	20		⊠E □C	2/2025	2/2025	2/2025	⊠Y □N

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Qualifications	FTE	Ξ%	Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Em (full or pa C = Cor	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Allen, Dan	CCS Intake Worker	SW 13061	5	9	100%	⊠E □C	8/2023	8/2023	8/2023	⊠Y □N	
Baldwin, Sarah	CCS Intake Worker	APSW 131803	5	9	100%	⊠E □C	4/2023	4/2023	4/2023	⊠Y □N	
Chew, Kelly	LTE CCS Intake Worker	SW 12595 SAC-IT 19069	5	9,16	10%	⊠E □C	9/2022	9/2022	9/2022	⊠Y □N	
Contreras, Luccas	CCS/ CLTS Service Facilitator		4,5	14		⊠E □C	2/2024	2/2024	2/2024	⊠Y □N	
Divine-Scott, Aubrie	CCS/ CLTS Service Facilitator	APSW 127587	4,5	9		⊠E □C	10/2023	10/2023	10/2023	⊠Y □N	
Evans, Debie	CCS/ CLTS Supervisor	LCSW 7681	1,5 (SAP)	5		⊠E □C	9/2023	9/2023	9/2023	⊠Y □N	
Ewoldt, Deborah	CCS/CRS Social Worker	SW 8732-120	5	9	5%	⊠E □C	10/2024	10/2024	10/2024	⊠Y □N	
Fuhrmann, Marcella	CCS Intake Worker	APSW 131534	5	9	100%	⊠E □C	8/2021	8/2021	8/2021	⊠Y □N	
Gerke, Sara	CCS Intake Worker	SW 8048-120	5	9	100%	⊠E □C	1/2025	1/2025	1/2025	⊠Y □N	
Gilbert, Jessica	CCS Service Director	LPC 5318	3	6	100%	⊠E □C	12/2024	12/2024	12/2024	⊠Y □N	
Gilles, Brittany	CCS/CRS Social Worker	LCSW 11710	5	5	5%	⊠E □C	2/2024	2/2024	2/2024	⊠Y □N	
Grant, Trish	CCS Intake Worker	APSW 126987	5	9	100%	⊠E □C	8/2024	8/2024	8/2024	⊠Y □N	
Graume, Megan	CCS Service Facilitator	APSW 129959	4,5	9	100%	⊠E □C	7/2023	7/2023	7/2023	⊠Y □N	

Hokkanen, Sara	Behavioral Health Access Coordinator	APSW 128321	5	9	5%	⊠E □C	4/2022	4/2022	4/2022	⊠Y □N
Kamp, Sydney	CCS QA Specialist	APSW 130262	5	9	100%	⊠E □C	1/2024	1/2024	1/2024	⊠Y □N
Kamps, Zachary	CCS Intake Worker	APSW 131343	5	9	100%	⊠E □C	4/2022	4/2022	4/2022	⊠Y □N
Lee, Kathy	CCS Intake Worker		5	15	100%	⊠E □C	7/2023	7/2023	7/2023	⊠Y □N
Lee, Sheng	Lead CCS Intake Worker	APSW 129975	5	9	100%	⊠E □C	11/2022	11/2022	11/2022	⊠Y □N
Matlock, Raymond	CCS Intake Worker		5	15	100%	⊠E □C	5/2023	5/2023	5/2023	⊠Y □N
McKenzie, Sarah	CCS Service Facilitator	SW 11230	4,5	9	100%	⊠E □C	9/2022	9/2022	9/2022	⊠Y □N
Meister, Julie	CCS Administrator	LCSW 8385-123	1,2,3	5	100%	⊠E □C	10/2022	10/2022	10/2022	⊠Y □N
Moore, Chloe	Behavioral Health Manager	APSW 131607	5	9	1%	⊠E □C	3/2023	3/2023	3/2023	⊠Y □N
Morris, Emily	CCS Lead Intake Worker	LCSW 9082	5	5	100%	⊠E □C	12/2023	12/2023	12/2023	⊠Y □N
Petersdorff, Makayla	CCS Intake Worker		5	15	100%	⊠E □C	8/2023	8/2023	8/2023	⊠Y □N
Peterson, Kyle	CCS Intake Worker	LCSW 9983	5	5	100%	⊠E □C	11/2022	11/2022	11/2022	⊠Y □N
Reddeman, Alexandra	CCS Intake Worker	SW 13457	5	9	100%	⊠E □C	4/2022	5/2022	5/2022	⊠Y □N
Reigh, Julia	CCS Intake Worker	APSW 134019	5	9	100%	⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Rodriguez, Tatiana	CCS Bilingual Spanish Intake Worker		5	15	100%	⊠E □C	8/2023	8/2023	8/2023	⊠Y □N
Roelke, Sarah	CCS Intake Worker	SW 13274-120	5	9	100%	⊠E □C	5/2022	5/2022	5/2022	⊠Y □N
Seiverd, Kristen	CCS Intake Worker	SW 4784-120	5	9	100%	⊠E □C	2/2024	2/2024	2/2024	⊠Y □N
Stockburger, Nicole	CCS Intake Supervisor	LCSW 8405-123	5	5	100%	⊠E □C	10/2022	10/2022	10/2022	⊠Y □N
Stringer, Heidi	Youth Connect Supervisor	LCSW (1.09) 8502-123	1,3,4,5 (SAP)	5,16	50%	⊠E □C	4/2021	4/2021	4/2021	⊠Y □N
Tanner Wallace, Melissa	CCS Intake Worker	APSW 126830	5	9	100%	⊠E ⊡C	6/2023	6/2023	6/2023	⊠Y □N

Thao, Mai	CCS Intake Supervisor	LCSW	5	5	100%	⊠Ε	4/2022	4/2022	4/2022	×Υ
		8238				□C				□N
Veloon, Heidi	CCS Service Facilitator	SW	4,5	9	100%	⊠Ε	2/2025	2/2025	2/2025	⊠Y
		328-120				□C				□N
Walasek, Jennifer	CCS Intake Worker	SW	5	9	100%	⊠E	2/2025	2/2025	2/2025	⊠Y
		9659-120				□C				□N
Warner, Terri	CCS Service Facilitator	SW	4,5	9	100%	⊠E	4/2021	4/2021	4/2021	⊠Y
		7736-120				□C				□N
Wende, Heather	CCS Service Facilitator	APSW	4,5	9	100%	⊠E	4/2021	4/2021	4/2021	⊠Y
		2093-121				□C				□N
Wiemiller, Natasha	CCS Intake Worker	SW	5	9	100%	⊠E	3/2024	3/2024	3/2024	⊠Y
		2716-120				□C				□N
Yang, Hnub	CCS Intake Worker	APSW	5	9	100%	⊠E	5/2022	5/2022	5/2022	⊠Y
		130788				□C				□N
Zahm, Ruthie	CCS/CLTS Intern		5	VOL		⊠E	5/2024	6/2024	6/2024	⊠Y
						□C				□N

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Name (Last, First, MI)	Position Description Credentials/ License Number Functions and Qualifications				FTE	%	Backgro	Caregiver Misconduct Background Checks – Dates Conducted					
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/			
Burns, Amber	ISDE Provider		5	15		⊠E □C	8/2024	9/2024	9/2024	⊠Y □N			
Crayne, Jamie	LPC-IT	LPC-IT 7922	5	14		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N			
Daentl, Sarah	LPC-IT	LPC-IT 7477	5	14		⊠E □C	6/2022	7/2022	7/2022	⊠Y □N			
Jurgens, Brigid	Clinical Student/ Intern		5	22		⊠E □C	2/2025	2/2025	2/2025	⊠Y □N			
King, Rebecca	Art Therapist	LPC 7313 ATR 144-36	5	6,17		⊠E □C	6/2021	6/2021	6/2021	⊠Y □N			
Meissner, Emily	Recreational Therapist		5	15		⊠E □C	1/2024	1/2024	1/2024	⊠Y □N			
Noltemeyer, Paige	Recreational Therapist		5	15		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N			
Schmidt, Kristin	Art Therapist, Professional Counselor	ATR (133-36) LPC (6340-125)	5	6,17		⊠E □C	4/2022	4/2022	4/2022	⊠Y □N			
Stubbs, Lucia	CCS Supervisor	Psychologist 3511	N/A	4		⊡E ⊠C	6/2022	6/2022	6/2022	⊠Y □N			
Trotter, McKayla	Recreational Therapist		5	15		⊠E □C	7/2021	7/2021	7/2021	⊠Y □N			

Agency Name: Community Service Associates, S.C. dba Pauquette Center for Psychological Services

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Qualifications			FTE % Caregiver Misconduct Background Checks – Dates Cond				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Con	rt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Cummings, Jennifer	LCSW	LCSW 7928	5	5		⊠E □C	1/2024	1/2024	1/2024	⊠Y □N	
Gonsalves, Valerie	Psychologist	Psychologist 2998	5	4		⊠E □C	11/2021	11/2021	11/2021	⊠Y □N	

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Functions and Qualifications			Caregiver Misconduct Background Checks – Dates Conducted					
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Cont	rt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/		
Dienberg, Candice	CCS Supervisor	LCSW 9228 SAC 15826	N/A	5,16		□E □C	1/2023	1/2023	1/2023	⊠Y □N		
Fuccillo, David	Case Manager		4,5	14		□E □C	11/2023	11/2023	11/2023	⊠Y □N		
Henderson, Valerie	Psychologist/ Owner	Psychologist 3167	1,3,5 (SAP)	4		□E □C	9/2022	9/2022	9/2022	⊠Y □N		
Murphy, Arianna	Case Manager		4,5	15		□E □C	1/2024	1/2024	1/2024	⊠Y □N		
Nash, Rakiesha	Case Manager		4,5	15		□E □C	9/2022	9/2022	9/2022	⊠Y □N		

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			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/		
Schmidt, Kristin	CCS Clinical Collaborator	ATR (133-36) LPC (6340-125	N/A	6,17		□E ⊠C	4/2022	4/2022	4/2022	⊠Y □N		
Stubbs, Lucia	Psychologist	Psychologist 3511	5	4		⊠E ⊡C	6/2022	6/2022	6/2022	⊠Y □N		

Privacy Officer – Security Officer –

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Qualifications	FTE	%	Backgr	Caregiver Misconduct kground Checks – Dates Conducte		
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Cont	rt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Diamond, Eric	Owner	LCSW 7817	5	5		×E	5/2023	5/2023	5/2023	⊠Y
							- /	- /	- /	□N
Turner, Mitchell	Supervisor	LPC 7290	N/A	6,16		×E	5/2023	5/2023	5/2023	⊠Y
		CSAC 16472								□N

Agency Name: Driftless Counseling, LLC dba Trailhead Therapy and Mentoring

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			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Em (full or pa C = Cor	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Bussa, Janine	Clinical Director	LPC 5622	5	6		□E	1/2023	1/2023	1/2023	⊠Y
	0.071		-			□C	0/0000	10/0000	10/0000	□N
Dunn, Stephanie	COTA	COTA 4569	5	18		□E	9/2023	10/2023	10/2023	⊠Y
	The survey is t					□C	0/0004	4/0004	4/0004	
Egerdal, Kyle	Therapist	LPC 10644	5	6		Œ	3/2021	4/2021	4/2021	⊠Y
Harris, Sara	Therapist	LCSW 11699	5	5			7/2022	8/2022	8/2022	
nams, Sala	merapist	LC3W 11099	5	5			1/2022	0/2022	0/2022	⊠Y
Hergenrader,	Rehab Worker		5	21			3/2023	3/2023	3/2023	⊡N ⊠Y
Madison			5				5/2025	5/2025	5/2025	
Lewis, Catherine	OT	OT 6501	5	13		Œ	8/2023	8/2023	8/2023	⊠Y
						□C				□N
Olson, Nicole	OT	OT 7070	5	13		Œ	1/2024	1/2024	1/2024	⊠Y
						□C				□N
Penaranda, Danielle	LCSW	LCSW 9968	5	5		Œ	3/2023	3/2023	3/2023	⊠Y
						□C				□N
Ruder, Christopher	Owner/ Supervisor	LMFT 1121	N/A	6		□E	5/2021	5/2021	5/2021	⊠Y
						□C				□N
Schroeder, Megan	APSW	APSW 135123	5	9		Œ	9/2024	9/2024	9/2024	⊠Y
						□C		- /		□N
Seehusen, Gregory	Therapist	LPC 10933	5	6		Œ	2/2022	2/2022	2/2022	⊠Y
				_		□C				□N
Stolarick, Shannon	LCSW	LCSW 11728	5	5		Œ	8/2021	9/2021	9/2021	⊠Y
						□C				□N

Toepfer, Maxwell	Occupational Therapist	OT 7312	5	13	Œ	9/2024	9/2024	9/2024	⊠Y
					□C				□N
Weishan, Tracy	Art Therapist		5	15	ΠE	5/2024	7/2024	7/2024	⊠Y
									□N
Wilkinson, Caitlyn	Mentor		5	15	Œ	1/2023	2/2023	2/2023	⊠Y
					□C				□N

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			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Con	rt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Dyer, Makailah	Skill Developer		5	15		⊠E	8/2023	8/2023	8/2023	⊠Y
						□C				□N
Dyer, Michael A.	Heartmath		5	14		⊠E	8/2023	8/2023	8/2023	⊠Y
	Trainer/Owner					□C				□N
Schwichtenberg, Ric	Supervisor	LCSW	N/A	5		ΠE	12/2023	3/2024	3/2024	⊠Y
		7138-123				⊠C				□N

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	alifications	FTE %	Backg		Misconduct s – Dates Co	nducted
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employe (full or part tir C = Contract	ne) BID	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Abiri, Sadat	Owner	APNP 5311 RN 133293	5	8		E 10/2022	10/2022	10/2022	⊠Y □N
Ali, Insaf	Array Provider		5	15		E 4/2024 C	4/2024	4/2024	⊠Y □N
Lobe, Stephanie	Skill Development Specialist		5	15		E 7/2024 C	7/2024	7/2024	⊠Y □N
Okelue, Alexander	Array Provider		5	15			4/2024	4/2024	⊠Y □N
Parkes, Claudia	Array Provider		5	14		E 12/2024 C	1/2025	1/2025	⊠Y □N
McCallum, Cynthia	ISDE Worker		5	15		E 3/2022 C	3/2022	3/2022	⊠Y □N
Mofikoya, Adebowale	CCS Supervisor	MD 60574	N/A	1		E 4/2022 C	4/2022	4/2022	⊠Y □N
Sangar, Ashna	Psychotherapist	LPC 8227	5	6		E 5/2024 C	6/2024	6/2024	⊠Y □N
VonFrankenberg, Annette	Psychiatric Mental Health Nurse Practitioner	APNP 552 RN 102158	5	8		E 10/2022 C	11/2022	11/2022	⊠Y □N

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Nam e (Last, First, MI)	Position Description	Credentials/ License Number	Functions and C	aulifications	FTE % Backgr			Caregiver Misconduct round Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Cont	rt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Desai, Anna	Owner/LPC	LPC 4741	5	6		⊠E	10/2023	10/2023	10/2023	⊠Y	
						□C				□N	
Doyle, Kathryn	Therapist	LCSW 9932	5	5		ЖE	4/2022	4/2022	4/2022	⊠Y	
						□C				□N	
Eifert, Mary McCaleb	APSW	APSW 134265	5	9		×E	7/2024	6/2024	6/2024	⊠Y	
						□C				□N	

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Qualifications	FTE	:%	Backgr		Misconduct s – Dates Co	nducted
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Alesch, Bryenne	Chief Operating Officer Mental Health Provider;		5	15	100%	⊠E □C	10/2021	10/2021	10/2021	⊠Y □N
Bostwick, Ashley	Mental Health Provider	LPC-IT 5314	5	14	100%	⊠E □C	8/2021	9/2021	9/2021	⊠Y □N
Daneshvar, Rosa	Mental Health Provider	LPC-IT 7404	5	14	100%	⊠E □C	8/2022	9/2022	9/2022	⊠Y □N
Davis, Frances Caroline	Mental Health Provider	LPC-IT 7640	5	14		⊠E □C	3/2024	3/2024	3/2024	⊠Y □N
Druker, Jacob	Mental Health Provider		5	21		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Gilpin-Parks, Lynn	Owner/ Chief Clinical Officer/ Therapist	LPC 6682-125	5	6	100%	⊠E □C	10/2023	10/2023	10/2023	⊠Y □N
Hoyte, Amy	Mental Health Provider		5	15		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N
Johanek, Sarah	Mental Health Provider	LPC-IT 8249	5	14		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
Knautz, Brock	Mental Health Provider		5	15	100%	⊠E □C	9/2022	9/2022	9/2022	⊠Y □N
Knutson, Elisabeth	Mental Health Provider		5	15		⊠E □C	7/2024	8/2024	8/2024	⊠Y □N
Maunu, Anna	Mental Health Provider	APSW 134268	5	9	100%	⊠E □C	6/2023	6/2023	6/2023	⊠Y □N
McArthur, Katharine	Mental Health Provider	LPC-IT 7163	5	14	100%	⊠E □C	5/2022	5/2022	5/2022	⊠Y □N
McGann, Nora	Mental Health Provider		5	21		⊠E □C	7/2024	8/2024	8/2024	⊠Y □N
McGonagle, Brittany	Mental Health Provider	LPC 10502	5	6	100%	⊠E □C	6/2021	5/2021	5/2021	⊠Y □N

Nicoll, Maeve	Mental Health Provider	APSW 134748	5	9		⊠Ε	11/2023	1/2024	1/2024	×Υ
						□C				□N
Polacek, Eric	Mental Health Provider		5	15		⊠Ε	8/2021	8/2021	8/2021	⊠Y
						□C				□N
Seaton, Autumn	Mental Health Provider		5	15		⊠Ε	7/2024	8/2024	8/2024	⊠Y
						□C				□N
Spooner, Sadette	Mental Health Provider/	LPC 7673	5	6	100%	⊠Ε	5/2023	5/2023	5/2023	⊠Y
	Therapist					□C				□N
Spicer, Mercedes	Mental Health Provider	APSW 134411	5	9		⊠Ε	11/2023	12/2023	12/2023	⊠Y
						□C				□N
Wheeler, Megan	Mental Health	APSW 135211	5	9		⊠Ε	2/2025	2/2025	2/2025	⊠Y
	Practitioner					□C				□N
Xiong, Hlee	Mental Health Provider	APSW 134916	5	9		⊠Ε	8/2022	9/2022	9/2022	⊠Y
						□C				□N
Yates, Ryan	Mental Health Provider		5	14	100%	⊠Ε	10/2021	10/2021	10/2021	⊠Y
						□C				□N

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Anderson, Amy	Employment Specialist		5	15		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
David, Michael	Peer Support Specialist		5	20		⊠E □C	1/2025	2/2025	2/2025	⊠Y □N
Goodletson, Tessa	Employment Specialist		5	15		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
McManus, Ciara	Employment Specialist		5	15		⊠E □C	4/2024	12/2024	12/2024	⊠Y □N
Mitchell, Andrea	Owner/ Supervisor	LCSW 11485	5	5		⊠E □C	5/2022	5/2022	5/2022	⊠Y □N
Parker, Alaina	Employment Specialist		5	15		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N
Peart, Gabriel	Employment Specialist		5	15		⊠E □C	6/2024	7/2024	7/2024	⊠Y □N
Spooner, Sadette	CCS Supervisor	LPC 7673	N/A	6		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N
Te Stroete, Crystal	Employment Specialist		5	15		⊠E □C	9/2022	9/2022	9/2022	⊠Y □N
Zaemisch, Kaitlynn	Employment Specialist		5	15		⊠E □C	8/2023	8/2023	8/2023	⊠Y □N

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Brauer, Jessica	Employment Specialist	LPC 7388	5	6	80%	⊠E □C	10/2022	10/2022	10/2022	⊠Y □N
Elswick-Hustad, Sarah	Community Benefits Specialist	APSW 1520	5	9		⊠E □C	12/2021	8/2022	8/2022	⊠Y □N
Koch, Megan	Work Incentive Benefits Specialist		5	15		⊠E □C	3/2024	3/2024	3/2024	⊠Y □N
Manuel, Ashley	Employment Specialist		5	15	50%	⊠E □C	9/2021	9/2021	9/2021	⊠Y □N
Mitchel, Jolin	Supervisor	LPC 7104-125	N/A	6	10%	□E ⊠C	5/2022	5/2022	5/2022	⊠Y □N
Olson, Corinne	CCS Program Manager/Benefits & Employment Specialist		5	14	80%	⊠E □C	1/2025	1/2025	1/2025	⊠Y □N
Schroeder, Sarah	Benefits Specialist and Pre-Driving Specialist		5	15	100%	⊠E □C	5/2022	2/2022	2/2022	⊠Y □N

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			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Con	irt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/		
Czecholinski, Jennifer	Director	CSW 11931-120	5	9	100%	⊠E ⊏C	9/2021	9/2021	9/2021	⊠Y □N		
Schmidt, Kristin	CCS Supervisor	ATR (133-36) LPC (6340-125)	N/A	6,17	5%	⊡E ⊠C	4/2022	4/2022	4/2022	⊠Y ⊡N		

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Herum, Taya	Psychotherapist	LCSW 12134	5	5		⊠E □C	4/2023	4/2023	4/2023	⊠Y □N
Janes, Kelly	Director of Outpatient Services	LMFT 1249 SAC 16442	5	5,16		⊠E □C	12/2024	12/2024	12/2024	⊠Y □N
Nichols, Judith	Psychotherapist	LPC 3009	5	6	Full- Time	⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Rozek, Heidi	Psychotherapist/ Supervisor	LPC 10285 SAC 16453	5	6,16		⊠E □C	3/2022	3/2022	3/2022	⊠Y □N
Valentin, Celie	Psychotherapist	LPC 7481	5	6		⊠E □C	11/2023	11/2023	11/2023	⊠Y □N
Zeleny, Morgan	Psychotherapist	APSW 134416	5	9		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N

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	P 2 3 4	Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Em (full or pa C = Cor	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Bonner, Nicole	Service Facilitator		4,5	14	100%	⊠E □C	3/2022	3/2022	3/2022	⊠Y □N
Bucki, Lindsey	Service Facilitator		4,5	15		⊠E □C	7/2023	6/2023	6/2023	⊠Y □N
Contreras, Sam	Service Facilitator	SAC-IT 18945	4,5 (SAP)	15, 16	100%	⊠E □C	6/2023	6/2023	6/2023	⊠Y □N
Dillon, Patricia	Clinical Student/ Intern		5	22		⊠E □C	10/2024	10/2024	10/2024	⊠Y □N
Duggan, Messina	APSW	APSW 134919	5	9		⊠E □C	10/2024	12/2024	12/2024	⊠Y □N
Essenburg, Katherine	Service Facilitator	LCSW 10184	4,5	5	25%	⊠E □C	2/2023	1/2023	1/2023	⊠Y □N
Follett-Graney, Rachel	Service Facilitator		4,5	15	100%	⊠E □C	3/2023	3/2023	3/2023	⊠Y □N
Goss, April	Service Facilitator		4,5	15	100%	⊠E □C	5/2021	5/2021	5/2021	⊠Y □N
Grunder, Ellen	Parent Support Specialist		5	21		⊠E □C	9/2023	9/2023	9/2023	⊠Y □N
Hall, Karen	Service Facilitator		4,5	14	100%	⊠E □C	11/2023	11/2023	11/2023	⊠Y □N
Hardin, Kaitlin	Service Facilitator	APSW 130517	4,5	9		⊠E □C	8/2022	9/2022	9/2022	⊠Y □N
Kempf, Braeden	Service Facilitator	OT 6262	4,5	13		⊠E □C	3/2023	3/2023	3/2023	⊠Y □N
Lancaster, Erica	Therapist	LPC 6310	1,5	6	25%	⊠E □C	5/2021	5/2021	5/2021	⊠Y □N
Long, Mark	Service Facilitator		4,5	15		⊠E □C	10/2023	11/2023	11/2023	⊠Y □N

Pinkovitz, Emilie	Wings Program	LCSW 8133	1,4,5	5		⊠E	8/2024	9/2024	9/2024	×Υ
	Director		(SAP)			□C				□N
Poedtke, Corey	Service Facilitator		4,5	14		⊠E	5/2022	5/2022	5/2022	⊠Y
						□C				□N
Rozeske, Jordan	Executive Director/	LCSW 8018	1,3,4,5	5		⊠E	8/2023	9/2023	9/2023	⊠Y
	Supervisor		(SAP)			□C				□N
Schaidle, Emily	ISDE Provider		5	15		⊠E	5/2023	5/2023	5/2023	⊠Y
						□C				□N
Schlitz, Elizabeth	Service Facilitator	LPC-IT 7622	4,5	14		⊠Ε	7/2022	7/2022	7/2022	⊠Y
						□C				□N
Sweazy, Jessica	Therapist/ Supervisor/	LCSW 9433	1,4,5	5	100%	⊠E	6/2023	6/2023	6/2023	⊠Y
-	SDD		(SAP)			□C				□N
Welch, Abby	SF/ ISDE Provider		4,5	15		⊠E	5/2024	5/2024	5/2024	⊠Y
						□C				□N

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BaDour, Jessica	LPC-IT	LPC-IT 8099	5	14		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Berg, Alexandra	MFT-IT	LMFT-IT 1065	5	14		⊠E □C	8/2023	9/2023	9/2023	⊠Y □N
Childs, Kathleen	APSW	APSW 131603	5	9		⊠E □C	2/2025	2/2025	2/2025	⊠Y □N
Daugherty-Dennis, Stephanie	Skill Developer	ISW 1036	5	9		⊠E □C	8/2023	11/2023	11/2023	⊠Y □N
Drewsen, Jonathan	Psychotherapist	LPC-IT 7939 SAC-IT 20349	5	14,16		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N
Frisella, Ann	Psychotherapist	LPC 11228 SAC-IT 20066	5	6,16		⊠E □C	9/2022	9/2022	9/2022	⊠Y □N
Gilles, Brittany	LCSW	LCSW 11710	5	5		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Goodman, Dana	Psychotherapist	LPC 5381	5	6		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N
Haas, Annette	Psychotherapist	LCSW 9533	5	5		⊠E □C	4/2021	4/2021	4/2021	⊠Y □N
Henschel, Amanda	Psychotherapist	LCSW (1.09) 8811	5	5,16		⊠E □C	5/2021	5/2021	5/2021	⊠Y □N
Hiller, Becky	Psychotherapist	LMFT 1244	5	6		⊠E □C	1/2024	1/2024	1/2024	⊠Y □N
Murray, Michelle R.	Owner/ Psychotherapist	LCSW (1.09) 7814-123	5	5,16	100%	⊠E □C	2/2024	2/2024	2/2024	⊠Y □N
O'Connell, Gyna	Psychotherapist	LPC 6142	5	6		□E □C	1/2025	1/2025	1/2025	⊠Y □N
Schuldies, Jacob	Psychotherapist	LCSW 7895	5	5		□E □C	4/2023	4/2023	4/2023	⊠Y □N

Walmer, Michael	Psychotherapist	LPC (1.09)	5	6,16	ΠE	3/2023	3/2023	3/2023	⊠Y
		6294			□C				□N
Woychik, Bethany	Psychotherapist/ SAC-	LCSW 10008	5	5,16	ΠE	5/2023	5/2023	5/2023	⊠Y
	IT	SAC-IT 18769			□C				□N
Zeldin, Emma	ISDE Provider	LMDT-IT 1031	5	14	ΠE	5/2023	5/2023	5/2023	×Υ
					□C				□N

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Artz, Jason	Psychotherapist	LPC 4349	5	6		⊠E □C	7/2023	8/2023	8/2023	⊠Y □N
Crabtree, Amanda	Psychotherapist	LCSW 7809-123	5	5		⊠E □C	10/2022	10/2022	10/2022	⊠Y □N
Duprey, Kelly Jo	Psychotherapist	LPC 3645-125	5	6		⊠E □C	9/2022	10/2022	10/2022	⊠Y □N
Fredrickson, Samuel	In-Home Therapist	LMFT-IT 1102	5	14		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
Gayan, Joseph	Therapist	LPC 8394	5	6		⊠E □C	10/2022	10/2022	10/2022	⊠Y □N
Kelly-Martina, Alisa	Supervisor	LCSW 7189-123	5	5		⊠E □C	10/2022	10/2022	10/2022	⊠Y □N
Mazar, Laurel	In-Home Therapist	APSW 134559	5	9		⊠E □C	4/2024	5/2024	5/2024	⊠Y □N
McNallie, Sara	In-Home Therapist	LMFT-IT 1089	5	14		⊠E □C	9/2024	10/2024	10/2024	⊠Y □N
Myers, Sonya	In-Home Therapist	LCSW 11784 SAC-IT 19156	5	5,16		⊠E □C	2/2023	4/2024	4/2024	⊠Y □N
Niekerk, Kati	In-Home Therapist	LCSW 10128	5	5		⊠E □C	11/2021	1/2022	1/2022	⊠Y □N
Storkson, Stephani	Supervisor, Psychotherapist	LMFT 905-124	5	6		⊠E □C	9/2022	10/2022	10/2022	⊠Y □N
Walden, Emily	In-Home Therapist	LCSW 12004	5	5		⊠E □C	8/2021	9/2021	9/2021	⊠Y □N
Wiegand, Makayla	In-Home Therapist	LMFT-IT 1107	5	14		⊠E □C	9/2024	10/2024	10/2024	⊠Y □N

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Luedtke, Abigail	Psychotherapist	LPC 10814	5	6		⊠E □C	1/2022	1/2022	1/2022	⊠Y □N	
Mitchel, Jolin	Psychotherapist	LPC 7104	5	6		⊠E □C	5/2022	5/2022	5/2022	⊠Y □N	
Moran, Sue	Director/Therapist	LPC 3357 CSAC 1890	5	6,16		⊠E □C	8/2021	8/2021	8/2021	⊠Y □N	
Parkes, Judith	CCS Supervisor/Therapist	LCSW 6884	5	5		□E ⊠C	1/2025	1/2025	1/2025	⊠Y □N	

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Ginko, Amy	Owner/ Psychotherapist	LPC 4697-125	5	6		⊠E ⊡C	7/2023	7/2023	7/2023	⊠Y ⊡N	
Marifrog, Rainbow	Supervisor	LMFT 919	N/A	6		E SC	6/2023	4/2023	4/2023	⊠Y ⊡N	
Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Qualifications	FTE	%	Caregiver Misconduct Background Checks – Dates Conducted				
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Grantman, Jessica M.	Founder and Provider/ Supervisor	LCSW 9311	5	5	1.0 FTE	⊠E □C	1/2025	2/2025	2/2025	⊠Y □N	
Holt, Amy	Psychosocial Rehab Specialist		5	15		⊠E □C	6/2024	6/2024	6/2024	⊠Y □N	
Maleck, Sara	CCS Supervisor	LMFT 977 LPC 5370	N/A	6		⊠E □C	4/2021	4/2021	4/2021	⊠Y □N	

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Aroonsavath, Linda	Director		4,5	14		⊠E □C	6/2021	7/2021	7/2021	⊠Y □N
Aroonsavath, Savannah	Skill Developer		5	21		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N
Bowers, Brandon	Service Facilitator		4,5	14		⊠E □C	1/2025	1/2025	1/2025	⊠Y □N
Hang, Yee Leng	Manager/ Skills Developer		5	20		⊠E □C	2/2022	3/2023	3/2023	⊠Y □N
Her-Xiong, Youhung	Therapist	LCSW 11457	1,5 (SAP)	5,15		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Kahl, Larry	MHP/SAP/SD	LPC 1295 CSAC 1265	1,3,5 (SAP)	6,16		⊠E □C	2/2024	2/2024	2/2024	⊠Y □N
Kue, Amy	Service Facilitator		4,5	15		⊠E □C	1/2025	2/2025	2/2025	⊠Y □N
Kue, Manila	Administrator		4,5	14		⊠E □C	7/2021	7/2021	7/2021	⊠Y □N
Lee, Nao Lue	Rehabilitation Worker		5	21		⊠E □C	1/2022	2/2022	2/2022	⊠Y □N
Scharrer, Melanie	MHP/SAP	MD 67055	1,3,5 (SAP)	1		⊠E □C	9/2022	9/2022	9/2022	⊠Y □N
Thor, Gau Zoua	Rehabilitation Worker		5	21		⊠E □C	3/2024	6/2024	6/2024	⊠Y □N
Thor, Mai	Rehabilitation Worker		5	21		⊠E □C	8/2023	4/2023	4/2023	⊠Y □N
Vang, Alexa	Service Facilitator		4,5	21		⊠E □C	6/2021	6/2021	6/2021	⊠Y □N

Vue, Linda	Service Facilitator	4,5	15	⊠E □C	9/2021	9/2021	9/2021	⊠Y □N
Vue, Moinee	Skill Developer	5	21	⊠E □C	1/2025	1/2025	1/2025	⊠Y □N
Xiong, Dao	Service Facilitator	4,5	15	⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Xiong, Seng	Skill Developer	5	21	⊠E □C	8/2023	4/2023	4/2023	⊠Y □N

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Qualifications	FTE %	FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emplo (full or part C = Contra	time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/		
Goldade, Kristi	CCS Supervisor	LCSW 11716	N/A	5		□E ⊠C	8/2022	4/2021	4/2021	⊠Y □N		
Norelle, Clare	Owner		5	15		⊠E □C	9/2021	9/2021	9/2021	⊠Y □N		

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Name (Last, First, MI) Borland, Asha	Position Description	Credentials/ License Number	Functions and G	ctions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	(full or pa	E = Employed (full or part time) C = Contracted		DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/		
Borland, Asha	Service Facilitator		4,5	15		⊠E □C	1/2024	1/2024	1/2024	⊠Y □N		
Burke, Beth	Service Facilitator		4,5	15		⊠E □C	1/2024	1/2024	1/2024	⊠Y □N		
Chastek, Winifred	Service Facilitator		4,5	14		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N		
Dobson, Keoinia	Service Facilitator	LPC 11084	1,4,5 (SAP)	6		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N		
Ehrlinger, Jennifer	ISDE Provider		5	15		⊠E □C	4/2024	5/2024	5/2024	⊠Y □N		
Fischer, Kathryn	Service Facilitator		4,5	15		⊠E □C	2/2025	2/2025	2/2025	⊠Y □N		
Flynn, Hilary	Psychotherapist	LMFT-IT 1140	5	14		⊠E □C	1/2025	2/2025	2/2025	⊠Y □N		
Gillen, Paige	Service Facilitator		4,5	14		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N		
Helmers, Kristin	Service Facilitator		4,5	15		⊠E □C	6/2024	6/2024	6/2024	⊠Y □N		
Jendusa, Melissa	Service Facilitator		4,5	15		⊠E □C	4/2022	4/2022	4/2022	⊠Y □N		
Ledford, Bailey	Therapist	LPC-IT 8062	5	14		⊠E □C	6/2024	6/2024	6/2024	⊠Y □N		
Livieri, Corey	Rehab Worker		5	21		⊠E □C	1/2025	1/2025	1/2025	⊠Y □N		
Metzger, Aimee	Therapist	LCSW 8882	5	5		⊠E □C	7/2021	7/2021	7/2021	⊠Y ⊡N		
Meyer, Annalisa	Psychotherapist	LMFT 672	5	6		⊠E □C	9/2024	9/2024	9/2024	⊠N ⊠Y □N		

Moll, Nicole	Owner/ Service Director	LCSW 10154	1,3,4,5 (SAP)	5	⊠E □C	6/2023	6/2023	6/2023	⊠Y □N
Mortensen, Cassie	Service Facilitator		4,5	14	⊠E □C	5/2024	6/2024	6/2024	⊡N ⊠Y □N
Noot, Kari	Service Facilitator	APSW 135269	4,5	9	⊠E □C	7/2022	7/2022	7/2022	⊠Y ⊡N
Schmidt, Claudia	Psychotherapist	LPC 6424	1,5 (SAP)	6	⊠E □C	5/2021	5/2021	5/2021	⊠Y □N
Simeon, Stephanie	Service Facilitator	LPC 11235	1,4,5 (SAP)	6	⊠E □C	12/2022	12/2022	12/2022	⊠Y □N
Weiss, Hannah	Service Facilitator	LPC 10917	1,4,5 (SAP)	6	⊠E □C	9/2022	9/2022	9/2022	⊠Y □N
Wittry, Lindsey	Service Facilitator	LPC-IT 7511	4,5	14	⊠E □C	5/2024	5/2024	5/2024	⊠Y □N

Agency Name: Gi	eyley Wellness LLC
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Zastrow, Liesa	Rehab Worker	SW 7140	5	9	35%	⊠Ε	1/2025	1/2025	1/2025	⊠Y
						□C				□N

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Bieno, Nicole	Art Therapy Intern		5	22		⊠E □C	9/2024	8/2024	8/2024	⊠Y □N	
Hale, Caroline	Creative Arts Therapist		5	15		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N	
Holsen, Timothy	Music Therapist		5	15		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N	
Taylor, Christine	CCS Supervisor	LCSW 8871 CSAC 16087	N/A	5,16		⊠E □C	8/2021	5/2021	5/2021	⊠Y □N	
Tomony, Molly	LPC	LPC 2281	5	6		⊠E □C	6/2024	6/2024	6/2024	⊠Y □N	

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Name (Last, First, MI)	Position Description	Credentials/ License Number	License Number Functions and Qualifications F			: %	Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Em (full or pa C = Cor	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Abel, Wendy	Psychotherapist	LPC 3365	5	6	50%	⊠E □C	12/2022	12/2022	12/2022	⊠Y □N	
Christianson, Sydney	Service Facilitator		4,5	14		⊠E □C	11/2024	12/2024	12/2024	⊠Y □N	
Colwin, Shannon	Array Provider		5	15		⊠E □C	12/2023	12/2023	12/2023	⊠Y □N	
Holman, Jenna	Service Facilitator	LMFT-IT 1095	5	14		⊠E □C	6/2024	6/2024	6/2024	⊠Y □N	
Kane, Megan	Registered Nurse	RN 1104192	5	12		⊠E □C	10/2024	10/2024	10/2024	⊠Y □N	
Macpherson, Elizabeth	Psychotherapist	LPC 10090	5	6		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N	
Martens, Stacey	Service Facilitator	APSW 1912	4,5	9		⊠E □C	10/2023	10/2023	10/2023	⊠Y □N	
Mayer, Madison	Psychotherapist	LCSW 9238	5	5	50%	⊠E □C	7/2023	7/2023	7/2023	⊠Y □N	
Meyer, Mary	Psychotherapist	LMFT 1330	5	6	50%	⊠E □C	4/2022	5/2022	5/2022	⊠Y □N	
Oliver, Kristine	Therapist/Affiliated Provider	LMFT 1242	4,5	14	50%	⊠E □C	8/2024	8/2024	8/2024	⊠Y □N	
Olsen, Madalyn	Service Facilitator	APSW 132162	4,5	9	75%	⊠E □C	10/2024	10/2024	10/2024	⊠Y □N	
Peterson, Andrew D.	Owner/President/ Supervisor	LMFT 834	1,3,4,5 (SAP)	6	25%	⊠E □C	4/2023	4/2023	4/2023	⊠Y □N	
Prenli, Drew	Service Facilitator		4,5	15	10%	⊠E □C	4/2023	4/2023	4/2023	⊠Y □N	
Raufman, Kelly	APSW	APSW 132442	4,5	9	100%	⊠E □C	8/2024	8/2024	8/2024	⊠Y □N	

Roethe, Judith	Psychotherapist	LPC 5314-125	4,5	6	100%	⊠E □C	4/2023	4/2023	4/2023	⊠Y
Roth, Donald	Psychologist/ APNP	Psychologist 2724 APNP 7902 RN 103968	5	8		⊠E □C	3/2024	3/2024	3/2024	⊡N ⊠Y □N
Seichter, Nathan	Service Facilitator	APSW 134645 SAC-IT 20454	4,5	9,16		⊠E □C	11/2023	11/2023	11/2023	⊠Y □N
Speich, Stacey	Service Facilitator		4,5	14	65%	⊠E □C	4/2023	4/2023	4/2023	⊠Y □N
Thao, Chia	APNP	APNP 15438 RN 249173	5	8		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Tierman, Hunter	Service Facilitator		4,5	14		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
Trewyn, Rebecca	APNP	APNP 2592 RN 114322	5	8		⊠E □C	2/2024	2/2024	2/2024	⊠Y □N
Unser, Alexis	Psychotherapist	LMFT 1235	5	6	100%	⊠E □C	7/2023	7/2023	7/2023	⊠Y □N
Vu, Hleechia	Associate Service Director	LCSW 8686-123	1,3,4,5 (SAP)	5	50%	⊠E □C	5/2021	5/2021	5/2021	⊠Y □N
Wick, Paula	Service Facilitator/ Rehab Specialist		4,5	15	5%	⊠E □C	10/2022	10/2022	10/2022	⊠Y □N
Woodford, Brenda K.	Affiliated Provider	RN 71949-30	5	12	25%	⊠E □C	4/2021	4/2021	4/2021	⊠Y □N
Woods, Jane A.	Therapist/Affiliated Provider	LCSW 1938 CSAC 843	1,5 (SAP)	5, 16	30%	⊠E □C	5/2023	5/2023	5/2023	⊠Y □N
Wuestenberg, Linda	Service Facilitator	LCSW 4284 CSAC 2021	4,5 (SAP)	5, 16	60%	⊠E □C	3/2024	3/2024	3/2024	⊠N ⊠Y □N

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Andreas, Jocelyn	Service Facilitator/Array		4,5	14		⊠E □C	8/2022	8/2022	8/2022	⊠Y □N		
Asbel, Amanda	Service Facilitator/Array	APSW 132413	4,5	9		⊠E □C	11/2021	12/2021	12/2021	⊠Y □N		
Belter, Rachel	Service Facilitator	APSW 135101	4,5	14		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N		
Blackwell, Hannah	Service Facilitator		4,5	15		⊠E □C	8/2023	8/2023	8/2023	⊠Y □N		
Brown, Sharita	Service Facilitator		4,5	14		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N		
Bunkleman, Megan	Service Facilitator	LMFT-IT 1138	4,5	14		⊠E □C	8/2023	8/2023	8/2023	⊠Y □N		
Doeppers, Aaron	Service Facilitator	LMFT 2109	4,5	6		⊠E □C	1/2025	2/2025	2/2025	⊠Y □N		
Edgren, Hope	Service Facilitator	APSW 132766	4,5	9		⊠E □C	1/2025	2/2025	2/2025	⊠Y □N		
Fabel, Kathryn	Service Facilitator		4,5	15		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N		
Fitzgerald, Rebecca	Service Facilitator	LPC 10823	4,5	6		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N		
Gardiner-Smith, Brooke	Service Facilitator	LPC-IT 7568	4,5	14		⊠E □C	10/2024	10/2024	10/2024	⊠Y □N		
Godinez, Roberto	Bilingual Service Facilitator	APSW 132472	4,5	9		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N		
Higgins, Jeremy	Service Facilitator		4,5	14		⊠E □C	2/2025	2/2025	2/2025	⊠Y □N		

Jensen, Amber	MHP	LMFT(1.09) 1169	1,4,5	6,16	⊠E □C	10/2024	10/2024	10/2024	⊠Y □N
Jones, Elizabeth	Owner/ Provider	LCSW 11348 SAC-IT 19329	1,3,4,5 (SAP)	5,16	⊠E □C	1/2025	1/2025	1/2025	⊠Y □N
Justesen, Emma	Service Facilitator	APSW 13463	4,5	9	⊠E □C	10/2023	10/2023	10/2023	⊠Y □N
Kaatz, Sarah	Service Facilitator	SW 2731	4,5	9	⊠E □C	11/2022	11/2022	11/2022	⊠Y □N
Kaiser, Gabrielle	Service Facilitator/ MHP	LCSW	1,4,5 (SAP)	5	⊠E □C	1/2025	2/2025	2/2025	⊠Y □N
Lancaster, Taran	Service Facilitator		4,5	15	⊠E □C	9/2022	9/2022	9/2022	⊠Y □N
Lancaster, Taylor	Array Provider		5	15	⊠E □C	5/2023	5/2023	5/2023	⊠Y □N
Martinez, Kathleen	Array Provider	APSW 132770	5	9	⊠E □C	9/2022	10/2022	10/2022	⊠Y □N
Mason, Melanie	Service Facilitator		4,5	21	⊠E □C	1/2025	2/2025	2/2025	⊠Y □N
Marion, McKenna	Service Facilitator		4,5	15	⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Monroe, Carlie	Service Facilitator	SW 14391	4,5	9	⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Moon, Erin	MHP/SAP	LCSW 9105	1,4,5 (SAP)	5	⊠E □C	1/2025	2/2025	2/2025	⊠Y □N
Muñoz, Stephanie	Bilingual Service Facilitator		4,5	14	⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Newman, Lucia	Service Facilitator		4,5	15	⊠E □C	10/2024	10/2024	10/2024	⊠Y □N
Oddis, Olivia	Service Facilitator	APSW 132378	4,5	9	⊠E □C	10/2024	10/2024	10/2024	⊠Y □N
Oetting, Jillian	SD/MHP/SAP/ Supervisor	LPC 8155	1,3,5 (SAP)	6	⊠E □C	1/2025	2/2025	2/2025	⊠Y □N
Ransom, Annmarie	APNP	APNP 7277 RN 181007	5	8	⊠E □C	6/2023	6/2023	6/2023	⊠Y □N
Rassmussen, Makenzi	Service Facilitator	APSW 132121	4,5	9	⊠E □C	5/2022	5/2022	5/2022	⊠Y □N
Riley, Patrick	Service Facilitator/ CSAC	CSAC 16597	4,5	16	⊠E □C	5/2024	4/2024	4/2024	⊠Y □N
Schumaker- Karstetter, Stephanie	Service Facilitator/Array	APSW 132647	4,5	9	⊠E □C	11/2021	1/2022	1/2022	⊠Y □N

Scott, Kevin	Housing, Benefits, and Vocational Spec.		5	15	⊠E □C	5/2023	5/2023	5/2023	⊠Y □N
Scott, Tineisha	Service Facilitator/Array	LMFT-IT 307	4,5	14	⊠E □C	12/2021	1/2022	1/2022	⊠Y □N

Shalit, Daniel	Service Facilitator	LCSW 11891	4,5	5,16	⊠E	1/2025	2/2025	2/2025	⊠Y
		SAC 16565	(SAP)		□C				\Box N
Shore, Emma	LMFT-IT	LMFT-IT 1104	4,5	14	⊠E	12/2024	1/2025	1/2025	×Υ
					□C				\Box N
Smith, Julia	Psychotherapist	LMFT 733	5	6	⊠E	1/2025	2/2025	2/2025	×Υ
					□C				\Box N
Sokolova, Kseniya	Service		4,5	14	⊠E	1/2025	2/2025	2/2025	⊠Y
-	Facilitator/Array				□C				\Box N
Straus, Gretchen	Psychotherapist/	LPC 6850	1,5	6	⊠E	11/2022	1/2023	1/2023	×Υ
	MHP/ SAP		(SAP)		□C				\Box N
Stutzman, Savannah	Service Facilitator	APSW 132338	4,5	9	⊠E	9/2023	10/2023	10/2023	×Υ
					□C				\Box N
Townsend, Zoe	Service Facilitator	SAC 17030	4,5	16	⊠E	9/2023	9/2023	9/2023	×Υ
			(SAP)		□C				\Box N
Waller, Heather	Service Facilitator		4,5	15	⊠E	4/2023	5/2023	5/2023	×Υ
					□C				\Box N
Wieser, Cassi	Service	SW 10292	4,5	9	⊠E	5/2023	5/2023	5/2023	×Υ
	Facilitator/Array				□C				□N

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Brown, Madeline	AODA Counselor	CSAC 16120	5	16		□E ⊠C	7/2022	8/2022	8/2022	⊠Y ⊡N
Duprey, Kelly Jo	CCS Supervisor	LPC 3645-125	N/A	6	5%	⊡E ⊠C	9/2022	10/2022	10/2022	⊠Y ⊡N
Goll, Traci	Director		5	15	25%	× B	3/2024	3/2024	3/2024	⊠Y ⊡N

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Ashton, Sara	Case Manager		5	21		⊠E □C	7/2028	8/2028	8/2024	⊠Y □N
Kraemer, Lindsay	Case Manager		5	15		⊠E □C	5/2024	7/2024	7/2024	⊠Y □N
McGettigan, Kevin	Case Manager/Peer Specialist		5	20		⊠E □C	11/2021	1/2022	1/2022	⊠Y □N
Stevens, Marion	CCS Supervisor	LPC (1.09) 4090	N/A	6,16		⊡E ⊠C	2/2024	2/2024	2/2024	⊠Y □N

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Banchik-Lesniak, Julia	Behavioral Consultant		5	15		⊠E □C	8/2022	8/2022	8/2022	⊠Y □N	
Erickson, Rachael	LPC	LPC 3980	5	6		⊠E □C	9/2022	9/2022	9/2022	⊠Y □N	
Hammer, Sharon	Psychotherapist	LPC 6822	5	6		⊠E □C	2/2025	3/2025	3/2025	⊠Y □N	
Hodgkins, Kathleen	Clinical Social Worker	LCSW 7698	5	5		□E ⊠C	2/2022	2/2022	2/2022	⊠Y □N	
Hoeme, Lisa	Psychotherapist	LPC 5051	5	6		⊠E □C	4/2021	5/2021	5/2021	⊠Y □N	
McCasey, Christine	Psychotherapist	LPC 4967	5	6		□E ⊠C	7/2024	8/2024	8/2024	⊠Y □N	
McClure, Haven	LCSW	LCSW 11918	5	5		□E ⊠C	4/2024	4/2024	4/2024	⊠Y □N	
Penkal, Kelsey	APSW	APSW 132978	5	15		□E ⊠C	4/2024	4/2024	4/2024	⊠Y □N	
Plamann, Chelsea	Behavior Consultant		5	15		□E ⊠C	10/2022	10/2022	10/2022	⊠Y □N	
Prosch, Shannon	Educational & Behavioral Consultant		5	15		□E ⊠C	5/2022	6/2022	6/2022	⊠Y □N	
Schmidt, Kimberly	Psychotherapist	LPC 4385	5	6		⊠E □C	4/2021	5/2021	5/2021	⊠Y □N	

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	FTE % E = Employed (full or part time) C = Contracted		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array			Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Becker, Joanna	Therapist	LCSW 8791	5	5		⊠E □C	8/2022	9/2022	9/2022	⊠Y □N
Beyer, McKenzie	Psychotherapist	LPC 11086	5	6		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Bosma, Emily	Service Facilitator	LPC 8798	4,5	6	100%	⊠E □C	6/2022	6/2022	6/2022	⊠Y □N
Centeno, Samantha	Service Facilitator		4,5	15		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
Cook, Nicole	LPC-IT	LPC-IT 5482	5	14		⊠E □C	12/2022	1/2023	1/2023	⊠Y □N
Craig, Abigail	Service Facilitator		4,5	15	100%	⊠E □C	12/2021	1/2022	1/2022	⊠Y □N
Ditlow, Theresa	Psychotherapist	LPC 5019	5	6	25%	⊠E □C	8/2021	8/2021	8/2021	⊠Y □N
Doyle, Kathryn	LCSW	LCSW 9932	5	5		⊠E □C	11/2022	11/2022	11/2022	⊠Y □N
Eggen, Ellen	Therapist	LPC 3849	5	6		⊠E □C	11/2023	11/2023	11/2023	⊠Y □N
Ellington-Deitz, Victoria M.	Therapist	LPC 6033-125	1,5 (SAP)	6	20%	⊠E □C	2/2023	2/2023	2/2023	⊠Y □N
Fanshaw, Brody	Psychotherapist	LPC 10918	5	6		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Fuller, Corrina	Service Facilitator		4,5	15		⊠E □C	10/2024	10/2024	10/2024	⊠Y □N
Galvez, Shequila	Service Facilitator		4,5	14		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
Gilbert, Kylee	Service Facilitator		4,5	14		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N

Hall, Mary	Clinical Student/ Intern		5	22		⊠E □C	11/2023	11/2023	11/2023	⊠Y □N
Herrmann, Matthew	Therapist	LPC 10406	5	6		⊠E □C	9/2022	10/2022	10/2022	⊠Y □N
Hesslink, Valerie	Yoga Therapist		5	15		⊠E □C	6/2024	8/2024	8/2024	⊠Y □N
Howard, Keilyn	Service Facilitator		4,5	15		⊠E □C	7/2024	8/2024	8/2024	⊠Y □N
Hyland, Lynn	Psychologist	Psychologist 2335	5	4		⊠E □C	4/2022	5/2022	5/2022	⊠Y □N
Jaminski, Kelly	Therapist	LPC 7224	5	6		⊠E □C	3/2023	3/2023	3/2023	⊠Y □N
Johnson, Kyra	Therapist in Training	LMFT-IT 1112	5	14		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
Kearns, Abigail	Clinic Director	LCSW 780	1,3,5 (SAP)	5	50%	⊠E □C	7/2024	7/2024	7/2024	⊠Y □N
Kendricks, Kelly	Therapist	LPC 10694	5	6	50%	⊠E □C	9/2022	9/2022	9/2022	⊠Y □N
Khang, Chienyann	Service Facilitator	APSW 128816	4,5	9	100%	⊠E □C	12/2021	2/2022	2/2022	⊠Y □N
Kies, Kim	Skills Provider		5	15	100%	⊠E □C	1/2022	1/2022	1/2022	⊠Y □N
Kolker, Jeanne S.	Clinic President	LPC 5967	1,3,5	6	50%	⊠E □C	2/2023	2/2023	2/2023	⊠Y □N
Laing, Elyse	Therapist	LPC 7210	1,5 (SAP)	6	50%	⊠E □C	12/2023	12/2023	12/2023	⊠Y □N
Lambert, Joe	Therapist	LPC 6271 CSAC 16324	1,5 (SAP)	6, 16	20%	⊠E □C	2/2025	2/2025	2/2025	⊠Y □N
Lauth, Katherine	Therapist	LCSW 9125-123	1,5 (SAP)	5	10%	⊠E □C	7/2023	7/2023	7/2023	⊠Y □N
Mao, Jenna	Therapist	LPC 7672	5	6		⊠E □C	10/2023	11/2023	11/2023	⊠Y □N
Marshall, Maureen	Service Director	LPC 1.09 4352	1,3 (SAP)	6		⊠E □C	12/2024	12/2024	12/2024	⊠Y □N
McDonald, Meghan	Service Facilitator	APSW 134182	4,5	9		⊠E □C	2/2025	2/2025	2/2025	⊠Y □N
Miller, Aimee	СОТА	OTA 5424	5	18		⊠E □C	2/2024	2/2024	2/2024	⊠Y □N
Mizelle, Jennifer	Therapist	LPC 7893	5	6		⊠E □C	1/2023	1/2023	1/2023	⊠Y □N
Natera, Emily	Therapist	LPC 7750	1,5 (SAP)	6	50%	⊠E □C	7/2024	7/2024	7/2024	⊠Y □N

Nehls, Zara	Therapist	APSW 134537	5	9		⊠E □C	12/2024	12/2024	12/2024	⊠Y □N
Niesen, Rachel	Therapist	LCSW 9799 SAC 17086	1,5 (SAP)	5,16	30%	⊠E □C	3/2022	3/2022	3/2022	⊡N ⊠Y □N
Pederson, Tracy	Therapist	LCSW 8875	1, 5 (SAP)	5	20%	⊠E □C	6/2021	6/2021	6/2021	⊠Y ⊠N
Peterson, Joshua	Service Director	LCSW 1.09 7739	1,3,5 (SAP)	5	100%	⊠E □C	10/2023	10/2023	10/2023	⊠Y ⊠N
Rollins, Tara E.	Therapist	LPC 4978-125 DT 13	1,5 (SAP)	6	50%	⊠E □C	1/2023	1/2023	1/2023	⊠Y ⊠N
Schneider, Erika	Service Facilitator		4,5	15	100%	⊠E □C	6/2021	6/2021	6/2021	⊠Y □N
Schueffner, Angela	Therapist	LMFT 884-124	5	6	5%	⊠E □C	2/2023	2/2023	2/2023	⊠Y □N
Stanley, Savannah	Skill Developer		5	15		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N
Stetenfeld, Rachel	Therapist in Training	LPC-IT 8087	5	14		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N
Story, Kira	Psychotherapist	LMFT 2247	5	6	40%	⊠E □C	5/2022	5/2022	5/2022	⊠Y □N
Taylor, Kylie	CCS Service Director/ Supervisor	LPC 5725	1,3,5 (SAP)	6	75%	⊠E □C	12/2023	12/2023	12/2023	⊠Y □N
Tseng, Claire	Therapist	LCSW 9974	5	5		⊠E □C	5/2021	6/2021	6/2021	⊠Y □N
Wargin, Katherine	Psychotherapist	LPC 8741 SAC-IT 19729	5	6,16		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Warpula Schultz, Jessica	Therapist	LMFT 1181	1,5 (SAP)	6	50%	⊠E □C	7/2024	7/2024	7/2024	⊠Y □N
Wooddell, Catherine	Service Facilitator		4,5	14	100%	⊠E □C	1/2025	1/2025	1/2025	⊠Y □N
Zamzow, April	Psychotherapist	LPC 6439	5	6		⊠E □C	1/2023	2/2023	2/2023	⊠Y □N

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			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		(full or part time) BID		DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Newman, Sara	CCS Supervisor	LCSW 8016-123	N/A	5		⊟E ⊠C	4/2021	4/2021	4/2021	⊠Y □N
Smith, Jason	Owner/Psychotherapist	LMFT 949-124	5	6		□E □C	2/2025	2/2025	2/2025	⊠Y □N

Name	Position Description	Credentials/	Functions and G	Qualifications	FTE	FTE %		Caregiver M		
(Last, First, MI)		License Number	Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator	Minimum Qualifications Per DHS 36.10 (c) 1-8 1-14 1-21	E = Emp (full or par C = Cont	t time)	Backgro BID (Mon/Yr)	und Checks DOJ (Mon/Yr)	s – Dates Co DHS IBIS (Mon/Yr)	nducted Review within last 4 yrs/
			5 – Services Array	Any						
Armbrust, Anya	Clinical Specialist IA (o/p)		4,5	15		E □C	04/2024	04/2024	04/2024	Y □N
Bohman, Aubrie	Clinical Specialist IIC (GROW)	APSW 132552	4,5	9		E □C	11/2024	11/2024	11/2024	Y □N
Borley, Abigail	Service Facilitator (PROPS)	LCSW 11402	4,5	5		E □C	08/2022	08/2022	08/2022	Y □N
Brewer, Bailey	Program Coordinator	APSW 134164	5	9		E □C	03/2023	03/2023	03/2023	Y □N
Coulibaly Sidime, Kadiata	Clinical Specialist IIC (o/p)	APSW 134532	5	9		E □C	08/2022	08/2022	08/2022	Y □N
Damm, Michelle	Clinical Specialist IIC (YH)	LPC 8423	4,5	6		E □C	11/2023	11/2023	11/2023	Y □N
Eberhardt, Shari	APNP	APNP 6567 RN 189691	5	8		E □C	07/2021	05/2021	05/2021	Y □N
Eklof, Jennifer	Clinical Specialist IIB (o/p)	LPC 11257 SAC 17133	5	6,16		E □C	11/2021	11/2021	11/2021	Y □N
Ellison, Elizabeth	Clinical Specialist IIC (GROW)	LMFT 970	4,5	6	50	E □C	10/2021	10/2021	10/2021	Y □N
Evans, Madison	Program Coordinator (o/p)	LMFT-IT 1101	5	14		E □C	05/2024	05/2024	05/2024	Y □N
Fellinger, Sophie	Clinical Specialist IA (PROPS)		4,5	15		E □C	07/2024	08/2024	08/2024	Y □N
Fox, Morgan	Clinical Specialist IIB (GROW)		4,5	14		E □C	05/2024	05/2024	05/2024	Y □N
Freeman, Kimberly	Peer Specialist/ SF (GROW)		4,5	20		E □C	04/2021	04/2021	04/2021	Y □N
Fregien, Olivia	Clinical Specialist IA (GROW)		4,5	15		E □C	02/2024	03/2024	03/2024	Y □N
Fullerton, Lisa	Clinical Specialist IIC (GROW)	APSW 134802	4,5	9		E □C	05/2024	05/2024	05/2024	Y □N

Gloudeman, Shirley	Registered Nurse	RN 136399	5	12	50	E □C	08/2024	08/2024	08/2024	Y □N
Gonzalez, Elizabeth	Clinical Specialist IIIB (YH)	LCSW 8195-123	1,5 (SAP)	5	50	E □C	03/2022	03/2022	03/2022	Y □N
Grinnell, Shelly	Registered Nurse II	RN 138506	5	12		E □C	05/2024	05/2024	05/2024	Y □N
Hamm, Emily	Student 4/ Intern (o/p)		5	22		E □C	05/2023	05/2023	05/2023	Y □N
Hartsough, Shanta	Program Support Specialist II		4,5	15		E □C	06/2024	06/2024	06/2024	Y □N
Hauser, Katharine	CommPRC		5	20		E □C	7/2023	7/2023	7/2023	Y □N
Ingram, Mandy	Clinical Specialist IIA (o/p)	SAC-IT 18958	5	15		E □C	05/2022	05/2022	05/2022	Y □N
Johnson, Laura	Clinical Specialist IIC (GROW)	APSW 128979	4,5	9		E □C	10/2024	10/2024	10/2024	Y □N
Joshi, Meera	Clinical Specialist IIA (GROW)		4,5	15		E □C	08/2023	08/2023	08/2023	Y □N
Kirch, Renee	Clinical Specialist IIC (GROW)	LPC 7945 SAC 16483	1,4,5 (SAP)	6,16		E □C	12/2022	12/2022	12/2022	Y □N
Klawiter, Aaron	Lead Clubhouse Specialist (YH)	LCSW 9538	1,4,5 (SAP)	5	50	E □C	04/2024	04/2024	04/2024	Y □N
Klodd, Alexa	Clinical Specialist IA (YH)		4,5	15		E □C	05/2024	05/2024	05/2024	Y □N
Kouba, Rachel	Clinical Team Manager (o/p)	LCSW 21544	1,4,5 (SAP)	5		E □C	08/2021	08/2021	08/2021	Y □N
Lawlor, Katherine	Clinical Specialist IIB (o/p)	Psychologist 5231	5	4		E □C	07/2023	10/2023	10/2023	Y □N
Lazo, Jessie	Bilingual Psychotherapist (o/p)	LPC-IT 2821	5	14		E □C	9/2024	9/2024	9/2024	Y □N
Lickel, Robin	Clinical Specialist II (o/p)	LPC 4605 CSAC 15268	5	6,16	50	E □C	12/2023	12/2023	12/2023	Y □N
Lipman, David	Clubhouse Generalist (YH)		5	20		E □C	01/2025	01/2025	01/2025	Y □N
Lucas, Keith	Clinical Specialist IIC (GROW)		4,5	15		E □C	02/2024	02/2024	02/2024	Y □N
Luchsinger, Gillian	Student 2/ Intern (PROPS)		5	22		E □C	07/2024	07/2024	07/2024	Y □N
Masbruch, Brett	Clinical Specialist IVB (o/p)	LPC 5654 CSAC 14161	5	6,16		E □C	09/2023	09/2023	09/2023	Y N
McKay, Cole	Clinical Specialist IA (GROW)		4,5	15		E □C	08/2023	08/2023	08/2023	Y N

Meland, Sheri	Clinical Specialist IIC (o/p)	APSW 134317 SAC-IT 19608	5	9,16		E □C	07/2023	07/2023	07/2023	Y □N
Meli, Chrystal	APNP	APNP 13546 RN 169750	5	8		E C	05/2022	05/2022	05/2022	Y □N
Milner, Karen	Psychiatrist	26155 MD	5	1		E □C	03/2024	03/2024	03/2024	Y □N
Moorman, Daniel	Clinical Specialist IA (YH)		4,5	15		E □C	07/2022	07/2022	07/2022	Y □N
Nass, Heidi	Clinical Specialist IA (YH)		5	15		E □C	11/2024	11/2024	11/2024	Y □N
Okoye, Damaris	GROW Behavioral Care Coordinator		4,5	14		E □C	08/2023	08/2023	08/2023	Y □N
Overholt, Rachel	Clinical Specialist IIC (o/p)	MFT-IT 1038	5	14		E □C	06/2021	06/2021	06/2021	Y □N
Persike, Julia	Clinical Specialist III (o/p)	CSAC 15776	4,5	15,16		E □C	01/2024	01/2024	01/2024	Y □N
Reneau-Major, Anne	Clinical Specialist IIC (GROW)	APSW 134273	5	9		E □C	7/2023	7/2023	7/2023	Y □N
Richards, Sherina	Clinical Specialist IA (YH)		4,5	15		E □C	5/2023	5/2023	5/2023	Y □N
Rickerl, Kathleen	Registered Nurse	RN 72109	5	12	50	E □C	11/2022	11/2022	11/2022	Y □N
Rittenmeyer, Tyson	Director of Program Services	LPC 8420	1,5 (SAP)	6		E □C	10/2021	05/2022	05/2022	Y □N
Robertson, Margaret	RN II	RN 119252	5	12		E □C	05/2023	05/2023	05/2023	Y □N
Robinson, Jesse	Clinical Specialist IA (o/p)		5	15		E □C	10/2021	10/2021	10/2021	Y □N
Schaefer, Shannon	Clinical Specialist II	LCSW 8694	1,4,5 (SAP)	5	50	E □C	01/2023	01/2023	01/2023	Y □N
Schlough, Bradley	Director of Community Services	LPC 2439	1,3 (SAP)	6	50	E □C	11/2023	11/2023	11/2023	Y □N
Schutz, Hunter	Clinical Specialist IA		4, 5	15		E □C	09/2023	09/2023	09/2023	Y □N
Smith, Sawyer	Clinical Team Manager (GROW/PROPS)	LPC 100018	1,5 (SAP)	6		E □C	12/2024	12/2024	12/2024	Y □N
Stern, Nelsie	Director of School Based Services	LPC 6289	1,5 (SAP)	6		E □C	04/2024	04/2024	04/2024	Y □N
Szocik, Eva	Clinical Specialist IIC (o/p)	LPC-IT	5	14		E □C	12/2023	12/2023	12/2023	Y □N
Taylor, Laura	Clinical Specialist IIB		4,5	15		E □C	12/2024	12/2024	12/2024	Y □N

Tennant, Evelyn	Clinical Specialist IA		5	15		E	11/2024	11/2024	11/2024	Y
	(YH)					□C				\Box N
Turner, Mikaelynn	Clinical Specialist IA		4,5	15		E	01/2025	01/2025	01/2025	Y
						□C				\Box N
Uttal, Lynet	Clinical Specialist IIIB	LCSW 9374	5	5		E	01/2023	01/2023	01/2023	Y
						□C				\Box N
Van Abel, James	Clinical Specialist IA		4,5	15	50	E	06/2021	07/2021	07/2021	Y
	(YH)					□C				\Box N
Walsh, Ann	Registered Nurse	RN 124776	4,5	12	50	E	05/2024	05/2024	05/2024	Y
	Ū.					□C				\Box N
Wang, Kristy	Clinical Specialist IA		4,5	15		E	10/2024	10/2024	10/2024	Y
0, ,	(GROW)					□C				\Box N
Weber, Lindsey	Team Leader (GROW)	LCSW 9710	1,4,5	5	50	E	09/2021	09/2021	09/2021	Y
	, , , , , , , , , , , , , , , , , , ,		(SAP)			□C				\Box N
Wedig, Quinton	Clinical Specialist III	CSAC 16408	4,5	16		E	04/2024	04/2024	04/2024	Y
	(o/p)					□C				\Box N
Wells, Jordan	Community Program		4,5	14		E	03/2024	04/2024	04/2024	Y
	Coordinator (PROPS)					□C				\Box N
Westenberg, Anne-	Licensed Program	LPC 6952	5	6,16		E	03/2023	03/2023	03/2023	Y
Marie	Coordinator	SAC 16402		,		□C				\Box N
Whearty, Deyanira	Clinical Specialist IIB		4,5	14		E	11/2022	11/2022	11/2022	Y
<i></i>	(GROW)		,			□C				\Box N
Wilde, Bailey	Clinical Specialist IA		4,5	15		E	05/2024	05/2024	05/2024	Y
	(GROW)		, -	-		□C				□N
Wright, Nichole	Clinical Team Leader /	LPC (1.09) 5096	1,3	6,16	50	E	01/2024	01/2024	01/2024	Y
	SAP	(, , , , , , , , , , , , , , , , , , ,	(SAP)	,		□C				□N
Yoesle, Jessica	Clinical Specialist IIC	APSW 134485	5	9		E	07/2023	07/2023	07/2023	Y
-,	(o/p)			-		□Ē				□N

Nam e (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Allee-Jatta, Sara	Counselor/ Owner	CSAC 16292	5	16		⊠E	4/2021	4/2021	4/2021	⊠Y	
						□C				□N	
Lewis, Catherine	Counselor/Supervisor	LPC 8278 CSAC 16570	N/A	6,16		□E □C	1/2024	2/2024	2/2024	⊠Y □N	
Stevens, Marion	Clinical Supervisor	LPC 1.09 4090	5	6,16		Œ	2/2024	2/2024	2/2024	⊠Y	
						□C				□N	

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Qualifications	FTE	%	Backgro		Misconduct s – Dates Cor	nducted
Assah, Pius	Service Facilitator		Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Qualifications Per DHSonal36.10 (g)ininistratorRecordDirectorNumber From Regs Ranging		E = Employed (full or part time) C = Contracted		DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
			4,5	21		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
Demba, Josephine	ISDE Provider		5	21		⊠E □C	10/2024	8/2024	8/2024	⊠Y □N
Demba, Louis	ISDE Provider		5	21		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N
Girard, Colette	Service Facilitator		4,5	14		⊠E □C	10/2024	10/2024	10/2024	⊠Y □N
Haas, Annette	MHP	LCSW 9533	1	5	5%	□E ⊠C	4/2021	4/2021	4/2021	⊠Y □N
Jallow, Kaddijatou	Service Facilitator	SAC-IT 20768	4,5	14,16		⊠E □C	10/2022	10/2022	10/2022	⊠Y □N
Jassey, Catherine	Rehabilitation Worker		5	21		⊠E □C	8/2023	6/2023	6/2023	⊠Y □N
Jatta, Marie	ISDE Provider		5	15		⊠E □C	9/2024	10/2024	10/2024	⊠Y □N
Moore, Khara	Owner	APSW 133086 SAC-IT 19180	4,5 (SAP)	9, 16	100%	⊠E □C	4/2021	4/2021	4/2021	⊠Y □N
Sackey, Nathaniel	Service Facilitator		4,5	21		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N
Thomas, Gerald	Supervisor/ MHP	Psychologist 1367	1,3,5	4,16		⊠E □C	2/2021	2/2021	2/2021	⊠Y □N

Agency Name: Lutheran Social Services

Name (Last, First, MI)	Position Description	1 License Number	Functions and G	Qualifications	FTE % E = Employed (full or part time) C = Contracted		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22			BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Bobek, Shelby	Therapist/ SD/MHP/SAP	LCSW 9820	1,3,4,5 (SAP)	5	80%	⊠E □C	3/2023	3/2023	3/2023	⊠Y □N	
Daniels, Brianna	Psychotherapist	LPC 11579	5	6		⊠E □C	11/2023	11/2023	11/2023	⊠Y □N	
Feryance, Samantha	Program Manager	LPC 6635	1 (SAP)	6	10%	⊠E □C	3/2023	3/2023	3/2023	⊠Y □N	
Finoguina, Alexandra	Service Facilitator		4,5	14		⊠E □C	3/2023	3/2023	3/2023	⊠Y □N	
Fischer, Kristen	Program Supervisor	LCSW 8746	1,5 (SAP)	5		⊠E □C	3/2023	3/2023	3/2023	⊠Y □N	
Janczak, Jared	Care Coordinator		4,5	14		⊠E □C	10/2024	10/2024	10/2024	⊠Y □N	
LeBreck, Jake	Human Services Professional		5	15		⊠E □C	10/2023	10/2023	10/2023	⊠Y □N	
Mattingly, Kathryn	Clinical Supervisor	LPC 6863 CSAC 16367	N/A	6,16		⊠E □C	11/2024	7/2024	7/2024	⊠Y □N	
Nelson, Dawn	Human Services Professional - OTSC		5	15		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N	
Nessel, Brittany	Clinical Manager/ Supervisor	LPC 5119 CSAC 15725	5	6,16		⊠E □C	3/2023	3/2023	3/2023	⊠Y □N	
Russell, Sydney	Peer Support Specialist- OTSC		5	20		⊠E □C	3/2023	3/2023	3/2023	⊠Y □N	
Smith, Carleigh	Service Facilitator		4,5	14		⊠E □C	3/2023	3/2023	3/2023	⊠Y □N	

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Qualifications	FTE	%	Backgr	Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/		
Ellis, Rachel	Psychotherapist	LCSW 11565 SAC-IT 19637	5	5,16		□E ⊠C	12/2023	12/2023	12/2023	⊠Y □N		
Grantman, Jessica	Supervisor	LCSW 9311	N/A	5		□E ⊠C	1/2025	2/2025	2/2025	⊠Y □N		
Hanzel, Katarina	LPC-IT	LPC-IT 7846	5	14		□E ⊠C	5/2024	5/2024	5/2024	⊠Y □N		
Liebmann, Ginger	Masters Level Rehabilitation Provider	LPC-IT 7443	5	14		□E ⊠C	5/2023	5/2023	5/2023	⊠Y □N		
Maleck, Sarah	Owner/ Therapist	LMFT 977 LPC 5370	5	6		⊠E □C	4/2021	4/2021	4/2021	⊠Y □N		

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Con	rt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Butler, Hannah	Service Facilitator		4,5	15		⊠E □C	10/2024	10/2024	10/2024	⊠Y □N
Calvert, Michael	MHP/ ISD provider	LCSW 8498	1,5 (SAP)	5		⊠E □C	4/2023	4/2023	4/2023	⊠Y □N
Cornell, Elliot	Service Facilitator	APSW 131938 SAT-IT 20678	4, 5 (SAP)	9,16	100%	⊟E ⊠C	8/2022	8/2022	8/2022	⊠Y □N
Crounse, Nicole	CCS Supervisor	LPC 5884 CSAC 15283	1	6, 16	10%	⊟E ⊠C	12/2024	1/2025	1/2025	⊠Y □N
Dollahan, Margaret	Psychotherapist	LMFT 2128	5	6		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Dorfman, Michael	Service Facilitator	APSW 130991	4, 5	9	100%	⊠E □C	8/2021	9/2021	9/2021	⊠Y □N
Dunlavey, Bayley	Service Facilitator		4, 5	14	100%	⊠E □C	8/2023	8/2023	8/2023	⊠Y □N
Grace, Emily	Service Facilitator		4, 5	15	100%	⊠E □C	1/2025	1/2025	1/2025	⊠Y □N
Hamlett, Danna	MHP/ backup SAP	LMFT 833	1 (SAP)	6	100%	⊠E □C	10/2023	1/2024	1/2024	⊠Y □N
Howard, Nicholas	Service Facilitator	LMFT-IT 1061	4, 5	14	100%	⊠E □C	5/2023	5/2023	5/2023	⊠Y □N
Hughes, Janet	Service Facilitator	CSAC 16194	4, 5	16	100%	⊠E □C	2/2023	2/2023	2/2023	⊠Y □N
Klekamp, Jennifer	Program Director and Service Director	LPC 7532 SAC 16150	1, 3, 4, 5 (SAP)	6, 16	100%	⊠E □C	12/2024	12/2024	12/2024	⊠Y □N
Kuecken, Kristen	Service Facilitator	SAC-IT 19053	4, 5 (SAP)	15,16	100%	⊠E □C	3/2022	3/2022	3/2022	⊠Y □N
Lein, Samantha	Service Facilitator		4, 5	15	100%	⊠E □C	3/2021	3/2021	3/2021	⊠Y □N

Lein, Stephanie	Individual Skill		5	15, 20		⊠E	10/2022	10/2022	10/2022	×Υ
	Developer					□C				□N
Nelson, Alysia	Program Director and	APSW 134479	4, 5	9,16	100%	⊠E	10/2021	10/2021	10/2021	×Υ
	Director of PD	CSAC 16372	(SAP)			□C				□N
Olson, Angel	Service Facilitator	APSW 134338	4, 5	9,16	100%	⊠E	3/2021	4/2021	4/2021	×Υ
		SAC-IT 20001	(SAP)			□C				□N
Rothschadl, Paige	Service Facilitator		4, 5	15	100%	⊠E	4/2022	4/2022	4/2022	×Υ
						□C				□N
Sherman, Kaitlin	Service Facilitator	LMFT 2164	1, 4, 5	6	100%	⊠E	12/2023	12/2023	12/2023	⊠Y
·			(SAP)			□C				□N
Siech, Lauren	Service Facilitator		4, 5	15	100%	⊠E	3/2023	3/2023	3/2023	⊠Y
						□C				□N
Stoelinga, Madeleine	Psychotherapist	LPC 11344	5	6		⊠E	10/2024	11/2024	11/2024	⊠Y
0 /	5	Art Therapist 201				□C				□N
Ullmark, Baylie	Service Facilitator		4, 5	15	100%	⊠E	7/2021	7/2021	7/2021	⊠Y
						□C				□N
Vang, Pha	Service Facilitator		4, 5	15	100%	⊠E	7/2024	9/2024	9/2024	⊠Y
0.						□C				□N
Warr, Mikayla	Service Facilitator	SAC-IT 20723	4, 5	16	100%	⊠E	6/2023	6/2023	6/2023	⊠Y
			,			□C				□N
Weigman, Mallorie	Service Facilitator		4, 5	14	100%	⊠E	10/2022	10/2022	10/2022	⊠Y
0,			,			□C				□N
Wills, Jenna	Service Facilitator	APSW 130961	4, 5	9	100%	⊠E	2/2022	2/2022	2/2022	⊠Y
,			,			□C				□N
Ziegler, Kelssi	Service Facilitator		4, 5	15	100%	⊠E	9/2023	9/2023	9/2023	⊠Y
			., •		,	□C	5,2025	3,2020	0,2020	□N

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted							
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		(full or part time)		(full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Abiri, Sadat	CCS Supervisor	APNP 5311	N/A	8		Œ	10/2022	10/2022	10/2022	⊠Y				
						⊠C				□N				
Mofikoya, Adebowale	Medical	MD 60574	5	1		×E	4/2022	4/2022	4/2022	⊠Y				
	Director/Provider					□C				□N				
Trost, Jean	Psychiatric Nurse Practitioner	APNP 10932	5	8		□E □C	9/2021	1/202	1/2022	⊠Y □N				

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Ayres, Michelle	Owner/ Therapist	LMFT 893	5	6		Œ	6/2021	7/2021	7/2021	⊠Y	
										□N	
Lending Halsten,	CCS Supervisor	LPC 4564	N/A	6		Œ	3/2023	3/2023	3/2023	⊠Y	
Robyn		DT 7								□N	

Nam e (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Con	irt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Decker, Dale	CCS Supervisor	LCSW 6789	N/A	5,16	5%	×E	9/2023	9/2023	9/2023	⊠Y	
		CSAC 11475				□C				□N	
Eisen, Merija	Psychotherapist	LMFT 859	5	6	100%	Œ	5/2023	5/2023	5/2023	⊠Y	
						⊠C				□N	
Nickles, Carol	Psychotherapist	LCSW 2843	5	5	100%	Œ	9/2024	9/2024	9/2024	⊠Y	
						⊠C				□N	
Reeder, Elizabeth	Psychotherapist	LMFT 901	5	6	100%	ΠE	8/2023	9/2023	9/2023	⊠Y	
						⊠C				□N	
Scherer, Abbey	Psychotherapist	LPC 5149	5	6	100%	Œ	8/2022	8/2022	8/2022	⊠Y	
						⊠C				□N	

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE	%	Backgro		iver Misconduct hecks – Dates Conducted		
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Con	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Her-Xiong, Youhung	Clinical Supervisor/ MHP	LCSW 11457	1,3,5 (SAP)	5		□E □C	8/2024	8/2024	8/2024	⊠Y □N	
Keys, Linda	Clinical Supervisor/ MHP	LCSW 2877	1,3,5 (SAP)	5		□E □C	4/2024	4/2024	4/2024	⊠Y □N	
Lee, Caitlyn	Rehabilitation Worker		5	21		□E □C	6/2023	6/2023	6/2023	⊠Y □N	
Lor, Yee	Service Facilitator		4,5	15		□E □C	5/2023	5/2023	5/2023	⊠Y □N	
Montgomery, Katherine	Service Facilitator		4,5	15		□E □C	7/2021	8/2021	8/2021	⊠Y □N	
Scharrer, Melanie	Psychiatrist	MD 67055	5	1		□E □C	9/2022	9/2022	9/2022	⊠Y □N	
Vang, Doua	President/ CEO		5	15		□E □C	4/2024	4/2024	4/2024	⊠Y □N	
Vang, Ricky	Service Facilitator		4,5	15		⊠E □C	10/2021	10/2021	10/2021	⊠Y □N	
Vang, Shwaw	Service Facilitator		4,5	14		□E □C	6/2024	6/2024	6/2024	⊠Y □N	
Yang, Kao	Rehabilitation Worker		5	21		□E □C	5/2023	5/2023	5/2023	⊠Y □N	
Yang, Maivaj	Service Facilitator		4,5	15		□E □C	4/2024	4/2024	4/2024	⊠Y □N	
Yang, Vicki	Rehabilitation Worker		5	21		□E □C	8/2023	8/2023	8/2023	⊠Y □N	
Ziegert, Kathy	CCS Supervisor	LCSW 7592	N/A	5		□E □C	3/2024	4/2024	4/2024	⊠Y □N	

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2025Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or pa C = Cont	rt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Bruce-Widder, Noelle	MH Therapist	APSW 132226	5	9		⊠E □C	1/2025	1/2025	1/2025	⊠Y □N	
Cooper, Susan A	MH Therapist/ SA Counselor	LCSW 8616 CSAC 15819	5	5,16		⊠E □C	11/2024	11/2024	11/2024	⊠Y □N	
Erhardt, Anne	MH Therapist/ SA Counselor	LMFT 1209-124	5	6		⊠E □C	11/2024	11/2024	11/2024	⊠Y □N	
Hamill, Keeley	MH Therapist	LPC-IT 8271	5	14		⊠E □C	1/2025	1/2025	1/2025	⊠Y □N	
Kleibor, Rachel	MH Therapist/ SA Counselor	LCSW (1.09) 7255	5	5,16		⊠E □C	11/2024	11/2024	11/2024	⊠Y □N	
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Name (Last, First, MI)	Position Description	Credentials/ License Number			FTE %		Caregiver Misconduct Background Checks – Dates Conducted					
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Emp (full or par C = Cont	rt time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/		
Dienberg, Candice	CCS Supervisor	LCSW 9228 SAC 15826	N/A	5,16		E E	1/2023	1/2023	1/2023	⊠Y ⊡N		
Moorer, Kimberly	Owner/ Therapist	LPC 8784	5	6		E C	3/2024	3/2024	3/2024	⊠Y ⊡N		

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and C	ctions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Em (full or pa C = Cor	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/		
Boerboom, Amanda	Service Facilitator		4,5	15		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N		
Cummings, Jennifer	Therapist	LCSW 7928	5	5		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N		
Douglas, Heather	Co-Owner, Supervisor	LPC 4925-15	1,3,5 (SAP)	6	100%	⊠E □C	3/2024	3/2024	3/2024	⊠Y □N		
Duhr Stowell, Natalie J.	Therapist	LMFT 1101-124	5	6	50%	⊠E □C	6/2022	7/2022	7/2022	⊠Y □N		
Ebbott, Jennifer	Therapist	LCSW 7109-123	1,5 (SAP)	5	50%	⊠E □C	6/2022	6/2022	6/2022	⊠Y □N		
Eichenseher, Alena	Therapist	LCSW 7984	5	5		⊠E □C	7/2022	7/2022	7/2022	⊠Y □N		
Grosse, Maureen	LPC-IT	LPC-IT 7840	4,5	14		⊠E □C	1/2023	1/2023	1/2023	⊠Y □N		
Haak, Michaela	LPC-IT	LPC-IT 7962 SAC-IT 20378	5	14,16		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N		
Hooper-Lane, Eli	Administrative Assistant, SF		4,5	15		⊠E □C	4/2023	5/2023	5/2023	⊠Y □N		
Jackson, Sally	Therapist	LCSW 9167	1,5	5		⊠E □C	1/2024	1/2024	1/2024	⊠Y □N		
Jordan-Zammuto, Lindsay	Therapist	LCSW 7482	5	5		⊠E □C	10/2022	11/2022	11/2022	⊠Y □N		
Joseph, Christiam	Therapist	LCSW 8283-123	5	5	40%	⊠E □C	4/2023	5/2023	5/2023	⊠Y □N		

Lyons, Nicole	Therapist	LCSW 9155	5	5		⊠Ε	12/2024	1/2025	1/2025	⊠Y
						□C				□N
Meister, Karyl	Therapist	LPC 10710	5	6		⊠Ε	1/2022	2/2022	2/2022	⊠Y
						□C				□N
Neff, Shayne	MFT-IT	MFT-IT 1019	5	14		⊠E	8/2022	8/2022	8/2022	⊠Y
						□C				□N
Nestler, Jeni	Therapist	LPC 10472	5	6		⊠Ε	10/2022	11/2022	11/2022	⊠Y
						□C				$\Box N$
Proano, Nicolle	Service Facilitator		4,5	15		⊠Ε	4/2024	4/2024	4/2024	⊠Y
						□C				□N
Roney, Dia Austine	Therapist	LPC 7424	1,5	6		⊠Ε	8/2023	9/2023	9/2023	⊠Y
			(SAP)			□C				$\Box N$
Seeley-Schreck,	Therapist	LMFT	1,5	6	80%	⊠E	5/2023	8/2023	8/2023	⊠Y
Heather W.		1036-124				□C				□N

Name (Last, First, MI)	Position Description	Functions and G	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
	gen, Rachael Certified Peer Specialist		Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Em (full or pa C = Cor	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Bergen, Rachael			5	20	50%	□E □C	5/2023	5/2023	5/2023	⊠Y □N	
Bopp, Jeffrey	Therapist/ SDD	LPC 7598	1,5	6	75%	□E □C	4/2024	4/2024	4/2024	⊠Y □N	
Carpenter, Kate	Service Facilitator		4,5	15		□E □C	8/2021	8/2021	8/2021	⊠Y □N	
Christian, Dominique	Peer Specialist		5	14,20		⊠E □C	1/2024	1/2024	1/2024	⊠Y □N	
Conn, Alane	Housing Specialist	SW 10641	5	9	50%	⊠E □C	2/2022	2/2022	2/2022	⊠Y □N	
Covey, Brian	Peer Support Specialist		5	20		⊡E ⊠C	10/2024	10/2024	10/2024	⊠Y □N	
Dienberg, Candice	Psychotherapist	LCSW 9228 SAC 15826	1,5	5,16		⊡E ⊠C	1/2023	1/2023	1/2023	⊠Y □N	
Drabik, Cierra	Service Facilitator		4,5	15		□E ⊠C	3/2024	3/2024	3/2024	⊠Y □N	
Faulman, Rachel	Service Facilitator	APSW 131772	4,5	9	50%	□E ⊠C	5/2022	5/2022	5/2022	⊠Y □N	
Fox Erdmann, Symantha	Service Facilitator		4,5	14	50%	⊠E □C	5/2023	5/2023	5/2023	⊠Y □N	
Franklin, Jody	Peer Support Specialist		5	20	25%	⊠E □C	1/2025	1/2025	1/2025	⊠Y □N	
Gillis, Laura	LPC	LPC 5896	5	6		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N	
Goldade, Kristi	LCSW	LCSW 11716	1,4,5 (SAP)	5	50%	⊠E □C	8/2022	4/2021	4/2021	⊠Y □N	

Hamilton, Dianne	Array Provider		5	21		⊠E □C	2/2025	2/2025	2/2025	⊠Y □N
Hefner, Derek	Service Facilitator	LCSW 11798	4,5	5		⊠E □C	9/2023	9/2023	9/2023	⊠Y
Heimerl, Sophia	RN	RN 1086580	5	12		⊡C	6/2024	6/2024	6/2024	⊡N ⊠Y
Heintz, Amy	Rehabilitation Worker		5	21		⊡C	5/2024	1/2024	1/2024	⊡N ⊠Y
Johnson, Samantha	SF/ ISDE		4,5	14	25%	⊠E □C	7/2022	7/2022	7/2022	⊡N ⊠Y □N
Klosterman, Francesca	Service Facilitator	SW 14508	4,5	9		⊠E □C	2/2025	2/2025	2/2025	⊡N ⊠Y □N
Lemeur, Helene	Peer Specialist		5	20	50%	⊠E □C	11/2022	11/2022	11/2022	⊡N ⊠Y □N
Levenson, Matthew	Service Facilitator		4,5	14		⊠E □C	4/2022	5/2022	5/2022	⊡N ⊠Y □N
Manders, Katherine	Service Facilitator		4,5	14		⊠E □C	5/2024	5/2024	5/2024	⊠Y ⊡N
Millard, Amy	RN	RN 151657	1,5	12,15		⊠E □C	6/2024	6/2024	6/2024	⊡N ⊠Y □N
Miller, David	Director/ Therapist/ Supervisor	LMFT 1142	1,3,5 (SAP)	6	100%	⊠E □C	5/2021	5/2021	5/2021	⊡N ⊠Y □N
Milstein, Karen	Peer Specialist		5	20		□E ⊠C	6/2021	6/2021	6/2021	⊡N ⊠Y □N
Murphy-Sinha, Robin	Array Provider/ SF		4,5	14	25%	□E ⊠C	2/2023	2/2023	2/2023	⊡N ⊠Y □N
Nazos, Georgiana	Array Provider/ SF	APSW 127910	4,5	9		□E ⊠C	2/2025	2/2025	2/2025	⊡N ⊠Y □N
Neal, David	Service Facilitator		4,5	15	20%	□E ⊠C	1/2025	1/2025	1/2025	⊡N ⊠Y □N
Payne, Jeremy	Service Facilitator		4,5	15	50%	□E ⊠C	6/2023	7/2023	7/2023	⊡N ⊠Y ⊡N
Roach, Laurie	Array Provider/ SF		4,5	15	50%	⊡E ⊠C	3/2023	3/2023	3/2023	⊠Y
Roach, Heather	Peer Specialist		5	20	25%	⊡E ⊠C	4/2021	4/2021	4/2021	⊡N ⊠Y
Rohn, Andrew	LMFT-IT	LMFT-IT 782	5	14		⊡E ⊠C	4/2024	4/4024	4/2024	⊡N ⊠Y
Rose, Emma	Physician Assistant	PA 3237	5	11		⊡E ⊠C	5/2022	5/2022	5/2022	⊡N ⊠Y
Schmitt, Jenna	Service Facilitator	APSW 130901	4,5	9	50%		1/2025	12/2024	12/2024	⊡N ⊠Y

Stevens, Anne	Service Facilitator		4,5	15		ΠE	6/2024	6/2024	6/2024	⊠Y
						⊠C				$\Box N$
Thomas, Berlinda	Service Facilitator	LPC 6464	4,5	6	50%	ΠE	7/2023	8/2023	8/2023	×Υ
						⊠C				$\Box N$
Thomason, Deidre	Peer Support Specialist		5	20		ΠE	5/2024	5/2024	5/2024	⊠Y
						⊠C				$\Box N$
Timler, Kiley	Peer Support Specialist	SW 14453	5	9,20		ΠE	6/2022	6/2022	6/2022	⊠Y
						⊠C				$\Box N$
Toth, Ariyanna	LPC-IT	LPC-IT 7213	5	14		ΠE	7/2023	7/2023	7/2023	⊠Y
						⊠C				$\Box N$
Van De Weerd,	Service Facilitator		4,5	15		ΠE	6/2021	6/2021	6/2021	⊠Y
Skyler						⊠C				□N

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Name (Last, First, MI)	Position Description	Functions and G	FTE %		Caregiver Misconduct Background Checks – Dates Conducted					
		Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Em (full or pa C = Cor	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Adams, Meshan	In-Home Therapist	APSW 132613	5	9		⊠E □C	3/2024	3/2024	3/2024	⊠Y □N
Alpert, Jennifer	In-Home Therapist	LCSW 11595	5	5	100%	⊠E □C	5/2021	5/2021	5/2021	⊠Y □N
Altman, Rebecca	In-Home Therapist		5	14		⊠E □C	3/2023	3/2023	3/2023	⊠Y □N
Arora, Simran	Clinical Director	LPC 6453	1,3,5 (SAP)	6		⊠E □C	10/2024	10/2024	10/2024	⊠Y □N
Bao, Yinuo	Clinical Student/ Intern		5	22		⊠E □C	1/2025	1/2025	1/2025	⊠Y □N
Barnett, Niquanna	In-Home Therapist	LMFT 1052	5	6	4%	⊠E □C	6/2021	6/2021	6/2021	⊠Y □N
Bebermeier, Cailin	Child and Family Therapist		5	15		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
Bohling, Austin	In-Home Therapist	APSW 134258	5	9		⊠E □C	7/2023	7/2023	7/2023	⊠Y □N
Briesath, Benjamin	In-Home Therapist	APSW 134945	5	9		⊠E □C	6/2023	6/2023	6/2023	⊠Y □N
Buske, Kristi	Service Facilitator		4,5	15	100%	⊠E □C	8/2023	9/2023	9/2023	⊠Y □N
Cali, Samuel	Individual Skill Developer		5	15		⊠E □C	9/2021	9/2021	9/2021	⊠Y □N
De Young, Makayla	In-Home Therapist	APSW 134937	5	9		⊠E □C	8/2023	8/2023	8/2023	⊠Y □N
Decker, Stephanie	Service Facilitator		4,5	15		⊠E □C	6/2023	6/2023	6/2023	⊠Y □N
Derry, Ashley	Individual/Family Therapist/ Supervisor	LMFT 1416	5	6	7%	⊠E □C	1/2024	2/2024	2/2024	⊠Y □N

Duehr, Olivia	Clinical Student/ Intern		5	22		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Erdos, Chandler	ISDE Provider		5	15		⊠E □C	9/2022	9/2022	9/2022	⊠Y □N
Fouts, Sarah	In-Home Therapist	LPC-IT 7570	5	14		⊠E □C	7/2023	7/2023	7/2023	⊠Y □N
Hawley, Jennifer	Individual/ Family Therapist/ Supervisor	LPC 3985	1,3,5 (SAP)	9		⊠E □C	1/2023	1/2023	1/2023	⊠Y □N
Heimann, Kimberly	CSP Supervisor		5	21		⊠E □C	1/2023	1/2023	1/2023	⊠Y □N
Howard, Michelle	MHP/SD	LPC 8276	1,3, (SAP)	6		⊠E □C	6/2024	6/2024	6/2024	⊠Y □N
Huemmer, Hannah	In-Home Therapist	LMFT-IT 1005	5	14		⊠E □C	10/2022	10/2022	10/2022	⊠Y □N
Jones, Amanda	In-Home Therapist	LMFT-IT 1045	5	14		⊠E □C	1/2022	1/2022	1/2022	⊠Y □N
Kamps, Caitlynn	Child and Family Support Specialist		5	15		⊠E □C	9/2023	9/2023	9/2023	⊠Y □N
Keele, Raven	In-Home Therapist	APSW 134301 SAC-IT 20211	5	9,16		⊠E □C	3/2024	3/2024	3/2024	⊠Y □N
Keller, Kelly	Service Facilitator	LPC 8017	4,5	6	90%	⊠E □C	9/2021	10/2021	10/2021	⊠Y □N
Korn, Melissa	Service Facilitator		4, 5	15		⊠E □C	6/2021	6/2021	6/2021	⊠Y □N
Leggiere, Laurel	Individual/ Family Therapist/ Supervisor	LCSW 9854	1,3,5 (SAP)	5	19%	⊠E □C	4/2023	4/2023	4/2023	⊠Y □N
Levy, Gette	Art Therapist	Art Therapist 137	5	14	100%	⊠E □C	9/2023	9/2023	9/2023	⊠Y □N
Love, Alexandra	Skills Developer		5	15		⊠E □C	3/2023	3/2023	3/2023	⊠Y □N
Lucas, Jennifer	In-Home Therapist	APSW 134707	5	9		⊠E □C	7/2022	7/2022	7/2022	⊠Y □N
Ma, Xihe	Clinical Student/ Intern		5	22		⊠E □C	1/2025	2/2025	2/2025	⊠Y □N
Magnanimo, Tessa	Clinical Student/ Intern		5	22		⊠E □C	8/2024	8/2024	8/2024	⊠N ⊠Y □N
Manogue, Miranda	Child and Family Specialist		5	15		⊠E □C	5/2024	5/2024	5/2024	⊠N ⊠Y ⊠N
McCormick, Eileen	Child and Family Specialist		5	15		⊠E □C	12/2023	2/2024	2/2024	⊠N ⊠Y ⊠N

Moorad, Ryan	Service Facilitator		4,5	15		⊠E □C	3/2023	3/2023	3/2023	⊠Y ⊠N
Morioka, Shelby	Individual/Family Therapist/ Supervisor	LCSW 9430	1,3,4,5 (SAP)	5	50%	⊠E □C	9/2022	9/2022	9/2022	⊠Y □N
Nijhawan, Nico	Outpatient Therapist	APSW 134734	5	9		⊠E □C	6/2024	6/2024	6/2024	⊠Y □N
Noorlun, Heidi	Individual Skill Developer		5	15		⊠E □C	9/2023	9/2023	9/2023	⊠Y □N
Parke, Stacey	Executive Director	LCSW 6601	1,3,5	5	5%	⊠E □C	8/2021	8/2021	8/2021	⊠Y □N
Peters, Corinne	In-Home Therapist	LPC-IT 8221	5	14		⊠E □C	9/2024	9/2024	9/2024	⊠Y ⊠N
Pruett, Melissa	Individual/Family Therapist	LMFT 1106	5	6	23%	⊠E □C	1/2024	2/2024	2/2024	⊠Y ⊠N
Reetz, Kimberly	Service Facilitator		4,5	15	100%	⊠E □C	9/2022	9/2022	9/2022	⊠Y □N
Riley, Jamie	Skill Developer		5	15		⊠E □C	6/2023	6/2023	6/2023	⊠Y ⊠N
Ruggiero, Nanette	Outpatient Psychotherapist	LMFT-IT 1062	5	14		⊠E □C	12/2023	12/2023	12/2023	⊠Y ⊠N
Schupbach, Sarah	Service Facilitator / In- Home Therapist	APSW 132662	4,5	9	100%	⊠E □C	10/2021	10/2021	10/2021	⊠Y ⊠N
Stearns, Sarah	Outpatient Therapist	APSW 135160	5	9		⊠E □C	10/2024	11/2024	11/2024	⊠Y ⊠N
Stenborg, Abby	Child and Family Specialist		5	15		⊠E □C	9/2023	5/2024	5/2024	⊠Y ⊠N
Sward, Jenna	Outpatient Therapist	APSW 132994	5	9		⊠E □C	6/2023	6/2023	6/2023	⊠Y ⊠N
Swiatek, Joanna	In-Home Therapist	LPC-IT 3350	5	14	31%	⊠E □C	5/2023	5/2023	5/2023	⊠Y ⊠N
Tenny, Patrick	Outpatient Therapist	LMFT-IT 785	5	14		⊠E □C	1/2023	2/2023	2/2023	⊠Y □N
VenHuizen, Andrew	Individual/ Family Therapist	LPC-IT 7951	5	14		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Wahal, Arpita	In-Home Therapist	APSW 133014	5	9		⊠E □C	4/2023	4/2023	4/2023	⊠Y ⊠N
Williams, Heaven	In-Home Therapist	APSW 135241	5	9		⊠E □C	9/2022	10/2022	10/2022	⊠Y ⊠N

Williams, Kaci	Individual/Family Therapist	LMFT 1353	5	6	100%	⊠E □C	2/2021	2/2021	2/2021	⊠Y ⊠N
Wolf, Liam	Skill Developer		5	14	100%	⊠E □C	10/2023	10/2023	10/2023	⊠Y □N
Zheng, Jieyang	In-Home Therapist	LMFT-IT 1063	5	14		⊠E □C	2/2023	2/2023	2/2023	⊠Y □N

Nam e (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Q		FTE 9	%	Backgro		Misconduct s – Dates Cor	nducted
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	(full or par	E = Employed ull or part time) E = Contracted $BID (Mon/Yr) (Mon/Yr)$ (Mon/Yr)			DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Charles, Ramona	ISDE/ Psychoed Provider		5	14		⊠E	5/2022	5/2022	5/2022	⊠Y
						□C				□N
Ervin, Ruchita	Director/Therapist/ Supervisor	LPC 6487 CSAC 16072	5	6,16		⊠E ⊡C	6/2024	6/2024	6/2024	⊠Y ⊡N
Hirt, Katelyn	ISDE/ Pscyhoed Provider	SAC-IT 19613	5	16		⊠E ⊡C	8/2022	8/2022	8/2022	⊠Y
		L DO 5004		<u>^</u>		-	4/0000	4/0000	4/2022	
Lee, Ka	Clinical Supervisor	LPC 5901	N/A	6		⊠E ⊡C	4/2023	4/2023	4/2023	⊠Y ⊡N
Pollard, Tige	ISDE/ Pscyhoed		5	14		⊠E	1/2024	1/2024	1/2024	⊠Y
	Provider					□C				
Reed, Jessica	Psychotherapist	LPC 6855	5	6,20		⊠Ε	10/2024	10/2024	10/2024	⊠Y
						□C				□N
Schultz, Brock	ISDE/ Pscyhoed	LPC 11082	5	6		⊠E	9/2021	9/2021	9/2021	⊠Y
	Provider					□C				□N

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted					
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		(full or part time)		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Mitchell, Andrea	CCS Supervisor	LCSW 11485	N/A	5		Œ	5/2022	5/2022	5/2022	⊠Y		
										□N		
Pecku, Nicole	Owner/ Service		5	15		Œ	8/2021	7/2021	7/2021	⊠Y		
	Provider									□N		

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	ctions and Qualifications FTE %		%	Backgr		aregiver Misconduct d Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/		
Fountain, Tiara	Rehab Worker		5	21		□E □C	6/2024	6/2024	6/2024	⊠Y □N		
Gussine, Sara	Director		4,5	15		□E □C	10/2023	10/2023	10/2023	⊠Y □N		
Levy, Jonah	Service Facilitator		4,5	15		□E □C	11/2024	11/2024	11/2024	⊠Y □N		
Thomas, Gerald	MHP/SAP/ Service Director/ Supervisor	Psychologist 1367	1,3 (SAP)	4		□E □C	2/2025	2/2025	2/2025	⊠Y □N		
Thorns, Ciara	Service Facilitator		4,5	15		□E □C	11/2024	12/2024	12/2024	⊠Y □N		

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and C	FTE %		-TE % Caregiver Misconduct Background Checks – Dates Conducted						
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Ginko, Amy	CCS Supervisor	LPC 4697	N/A	6		⊡E ⊠C	7/2023	7/2023	7/2023	⊠Y ⊡N		
Marifrog, Rainbow A.	Owner/Psychotherapist	919 LMFT	5	6	100%	⊠E ⊡C	6/2023	4/2023	4/2023	⊠Y ⊡N		

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Congdon, Logan	Service Facilitator		4, 5	15		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N		
Kobor, Heidi	LCSW/ Backup MHP/SAP	LCSW 11452	1, 4, 5 (SAP)	5		⊠E □C	9/2021	9/2021	9/2021	⊠Y □N		
Marifrog, Rainbow	Clinical Supervisor	LMFT 919	N/A	6		⊠E □C	6/2023	4/2023	4/2023	⊠Y □N		
McIntosh, Petrovnia	Director of Mental Health Services	LCSW 8137	1, 3, 4, 5 (SAP)	6		⊠E □C	6/2023	4/2023	4/2023	⊠Y □N		
Stueber, Jaylin	Service Facilitator		4, 5	14		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N		

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and G	Qualifications	FTE	%	Backgro		Misconduct s – Dates Coi	nducted
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Em (full or pa C = Cor	art time)	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Collins, Mackinzie	Service Facilitator		4, 5	15	100%	⊠E □C	5/2023	5/2023	5/2023	⊠Y □N
David, Katherine	Service Facilitator		4, 5	15	100%	⊠E □C	1/2023	1/2023	1/2023	⊠Y □N
Freeman, Alice	Service Facilitator		4, 5	15	100%	⊠E □C	9/2022	9/2022	9/2022	⊠Y □N
Fujikawa, Karen	Director of Mental Health Programs	LCSW 7648	1, 3, 4, 5 (SAP)	5	100%	⊠E □C	12/2024	12/2024	12/2024	⊠Y □N
Gurda, Kjerstin	HBTS Clinician	LCSW 8424	1, 5 (SAP)	5	25%	⊠E □C	11/2022	11/2022	11/2022	⊠Y □N
Jenkins, Felicia	Service Facilitator		4, 5	15	100%	⊠E □C	2/2023	2/2023	2/2023	⊠Y □N
Kramer, Brittany	Service Facilitator		4, 5	15	100%	⊠E □C	2/2023	2/2023	2/2023	⊠Y □N
Krueger, Shalynn	CCS Program Supervisor	APSW 134490	4, 5	9	100%	⊠E □C	4/2023	4/2023	4/2023	⊠Y □N
Marazita, Olivia	Service Facilitator		4, 5	15		⊠E □C	2/2024	2/2024	2/2024	⊠Y □N

McLaren, Teresa	Psychologist	Psychologist	5	4		⊠Ε	6/2023	8/2023	8/2023	×Υ
		3553				□C				$\Box N$
Neal, David	Service Facilitator		4,5	15	10%	⊠Ε	1/2024	1/2024	1/2024	⊠Y
						□C				$\Box N$
Patterson, Claire	Psychologist	Psychologist	1, 5	4	5%	⊠Ε	6/2023	6/2023	6/2023	×Υ
			(SAP)			□C				$\Box N$
Smaglick, Karissa	Service Facilitator		4,5	15	100%	⊠Ε	2/2023	2/2023	2/2023	×Υ
-						□C				□N
Smith, Rebecca	Service Facilitator		4,5	14		⊠Ε	1/2024	1/2024	1/2024	×Υ
						□C				□N
Smith, Sierra	Service Facilitator		4,5	15		⊠Ε	4/2024	4/2024	4/2024	×Υ
						□C				□N
Wallin, Robyn	Program Supervisor	LCSW 9187	1, 5	5	5%	⊠E	9/2024	9/2024	9/2024	×Υ
•			(SAP)			□C				□N

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Nam e (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted					
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – ServicesArray	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		(full or part time)		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Feaster, Dan	Executive Director/ Psychotherapist	LCSW 2511 SAC 12716	5	5,16	_	×E	8/2024	9/2024	9/2024	⊠Y		
	,					⊐C	0/0004	0/0004	0/0004	□N		
Gruen, Suzanne	Psychotherapist	LCSW 7512	5	5	D	ЖE	8/2024	9/2024	9/2024	⊠Y		
					[⊐c				□N		
McCauley, Jane	Psychotherapist	LCSW 8692	5	5		×E	5/2023	5/2023	5/2023	⊠Y		
						⊐c				□N		
Peterson, Janessa	Psychotherapist	APSW 134455	5	9	D	×E	5/2024	5/2024	5/2024	⊠Y		
						⊐c				□N		

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Andresen, Heather	Case Manager		4, 5	14		⊠E □C	7/2022	8/2022	8/2022	⊠Y □N		
Armbruster, Jessica	Supervisor/ Program Manager	LCSW 8773-123	1, 3, 4, 5 (SAP)	5	80%	⊠E □C	10/2023	10/2023	10/2023	⊠Y □N		
Baumgartner, Dana	Case Manager		4,5	15		⊠E □C	10/2023	10/2023	10/2023	⊠Y □N		
Berlinski, Tobias	Case Manager		4,5	15		⊠E □C	12/2024	12/2024	12/2024	⊠Y □N		
Gardiner, Gala	Peer Support Specialist		5	20		⊠E □C	5/2022	5/2022	5/2022	⊠Y □N		
Herson, Josie	Case Manager	RN 109653	4, 5	12	80%	⊠E □C	9/2024	10/2024	10/2024	⊠Y □N		
Jacobs, Lauren	Case Manager		4, 5	14		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N		
Kosidowski, Claire	Case Manager		4, 5	15		⊠E □C	12/2024	12/2024	12/2024	⊠E □C		
LeBouton, Gabrielle	Case Manager		4, 5	15		⊠E □C	6/2023	6/2023	6/2023	⊠E □C		
Mattes, Mark	Case Manager		5	21		⊠E □C	5/2023	5/2023	5/2023	⊠E □C		
O'Rourke, Miranda	Case Manager		4, 5	15		⊠E □C	11/2022	11/2022	11/2022	⊠E □C		
Schmit, Carrie	Case Manager		4, 5	14		⊠E □C	5/2021	5/2021	5/2021	⊠E □C		
Stange, Catherine	Case Manager		4, 5	15		⊠E □C	1/2025	1/2025	1/2025	⊠E □C		

Thakor, Sheila	Psychiatrist	MD 31401	1, 3, 5	2	35%	□E	5/2023	5/2023	5/2023	⊠Y
			(SAP)			⊠C				□N
Vaillancourt, Bert	Certified Peer Specialist		5	20		⊠Ε	2/2024	2/2024	2/2024	⊠Y
						□C				□N
Zizzo, Olivia	Case Manager		5	15		⊠Ε	5/2023	5/2023	5/2023	×Ν
						□C				□N

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Diamond, Eric	Supervisor	LCSW 7817	N/A	5		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N		
Pettry, Thomas	CSAC	CSAC 17054	5	16		⊠E □C	11/2024	11/2024	11/2024	⊠Y □N		
Turner, Mitchell	Owner	LPC 7290 CSAC 16472	5	6,16		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N		
Vetter, Lindsay	PhD		5	15		⊠E □C	7/2021	7/2021	7/2021	⊠Y □N		

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Dienberg, Candice	Clinical Supervisor	LCSW 9228 SAC 15826	N/A	5,16		□E □C	1/2023	1/2023	1/2023	⊠Y □N	
Foster, Alwyn	Case Manager	SAC-IT 19087	4,5	16		□E □C	9/2024	10/2024	10/2024	⊠Y □N	
Henderson, Valerie	Director	Psychologist 3167	1,3,5 (SAP)	4		□E □C	9/2022	9/2022	9/2022	⊠Y □N	
Maurice, Victoria	Individual Skill Developer		5	15		□E □C	2/2025	2/2025	2/2025	⊠Y □N	
Nash, Rakiesha	Case Manager		4,5	15		□E □C	9/2022	9/2022	9/2022	⊠Y □N	

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Calmese, Cherise	Service Facilitator		4,5	15		ΠE	1/2024	1/2024	1/2024	⊠Y	
						□C				□N	
Johnson, Connor	Service Facilitator		4,5	15		ΠE	5/2024	7/2024	7/2024	⊠Y	
						□C				□N	
Lamb, Traci	Owner	CSAC 16578	4,5	14,16		ΠE	12/2022	12/2022	12/2022	⊠Y	
			(SAP)			□C				□N	
Lamb, Woodie	Service Facilitator		4,5	15		ΠE	8/2023	8/2023	8/2023	⊠Y	
						□C				□N	
Renninger, Margaret	Service Facilitator	LPC-IT 8067	4,5	14		ΠE	5/2024	8/2024	8/2024	⊠Y	
						□C				□N	
Walmer, Michael	MHP/SD/ Supervisor	LPC (1.09)	1,3	6,16		ΠE	3/2023	3/2023	3/2023	⊠Y	
		6294	(SAP)			□C				□N	

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McCann, Nikyra	Rehabilitation Worker		5	21		×E	9/2021	9/2021	9/2021	⊠Y
										□N
McCann-Smith,	Skill Developer		5	15		⊠E	1/2022	1/2022	1/2022	⊠Y
Wanda						□C				□N
Taylor, Christine	Supervisor	LCSW 8871 CSAC 16087	N/A	5		Œ	8/2021	5/2021	5/2021	⊠Y
		0000				X				□N

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Acker, Jenna	CIT Case Manager		4,5	14		⊠E □C	7/2023	7/2023	7/2023	⊠Y □N
Avery, Furman	Certified Peer Specialist		5	20		⊠E □C	12/2021	11/2021	11/2021	⊠Y □N
Blum, Derek	CIT Case Manager	CSAC 16203	4,5 (SAP)	15,16	50%	⊠E □C	2/2025	2/2025	2/2025	⊠Y □N
Bryan, Gina	APNP	APNP 2196 RN 132549	5	8		⊠E □C	3/2024	3/2024	3/2024	⊠Y □N
Buccelli, Katherine	CIT Case Manager		4,5	15		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N
Cullen, Randall	Psychiatrist	MD 21235	5	1		⊠E □C	8/2023	8/2023	8/2023	⊠Y □N
Davis, James	PAIR Program Supervisor		5	20		⊠E □C	10/2021	9/2021	9/2021	⊠Y □N
Enloe, Amy	Peer Support Specialist		5	20		⊠E □C	5/2023	5/2023	5/2023	⊠Y □N
Golden, Elena	MHP	LCSW 7217	1,3,4,5	5		⊠E □C	7/2024	9/2024	9/2024	⊠Y □N
Hussien, Sophia	CIT Case Manager		4,5	15		⊠E □C	3/2023	6/2024	6/2024	⊠Y □N
Johnson, Whitney	CIT Case Manager		4,5	14		⊠E □C	11/2024	11/2024	11/2024	⊠Y □N
Judkins, Erin	RN (CIT)	RN 254244	5	12		⊠E □C	5/2021	5/2021	5/2021	⊠Y □N
Kelley, Rachel	Backup MHP/ Supervisor	LCSW 11517 SAC 17123	1 (SAP)	5,16		⊠E □C	12/2023	1/2024	1/2024	⊠Y □N
Lazo, Jessie	Human Services Specialist	LPC-IT 2821	4,5	14		⊠E □C	7/2024	7/2024	7/2024	⊠Y □N

McAuliffe-Schroeder,	Outpatient Therapist	LCSW 3629	5	5,16	25%	⊠E	4/2024	6/2024	6/2024	⊠Y
William		SAC 12640				□C				$\Box N$
Meir, Jason	Outpatient Therapist	LPC 7583	5	6,16	25%	⊠E	2/2023	2/2023	2/2023	×Υ
		SAC 16284				□C				$\Box N$
Morshead, Megan	Peer Support		5	20		⊠Ε	2/2023	2/2023	2/2023	×Υ
	Specialist (PAIR)					□C				$\Box N$
Pichette, Casey	Outpatient MH Clinic	LPC 5594-125	5	6,16	25%	⊠Ε	1/2023	1/2023	1/2023	×Υ
	Therapist	CSAC 16096				□C				$\Box N$
Sawczak, Alaynah	Case Manager (CIT)	SW 13296	4,5	9	50%	⊠E	4/2023	5/2023	5/2023	×Υ
						□C				□N
Sayles, Stephanie	Program Supervisor	LCSW 7837	4,5	5		⊠E	10/2023	10/2023	10/2023	×Υ
						□C				□N
Scharpf, MaKayla	Case Manager (CIT)		4,5	15		⊠E	11/2023	12/2023	12/2023	×Υ
	,					□C				□N
Schill, Emily	Psychotherapist	LPC-IT 8160	5	14		⊠E	11/2024	11/2024	11/2024	×Υ
						□C				□N
Zertuche, Jessica	CIT Case Manager		4, 5	14		⊠E	7/2022	6/2022	6/2022	×Ν
						□C				□N

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Ervin, Ruchita	Clinical Supervisor	LPC 6487 CSAC 16072	N/A	6,16		⊠E □C	6/2024	6/2024	6/2024	⊠Y □N		
Lee, Ka	LPC/ Supervisor	LPC 5901	1,3,5 (SAP)	6		⊠E □C	4/2023	4/2023	4/2023	⊠Y □N		
Ly, Rose	Case Manager		4,5	21		⊠E □C	8/2023	10/2023	10/2023	⊠Y □N		
Scharrer, Melanie	Psychiatrist	MD 67055	5	1		⊠E ⊡C	9/2022	9/2022	9/2022	⊠Y ⊡N		
Vue, Mai Zong	Case Manager		4,5	14		⊠E □C	2/2023	2/2023	2/2023	⊠Y □N		

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Aprill, Mary	Therapist	LPC 7615 SAC 16445	5	6, 16	50%	□E ⊠C	5/2023	6/2023	6/2023	⊠Y □N	
Armstrong, Libby	Service Facilitator		4,5	14	100%	⊠E □C	2/2023	1/2023	1/2023	⊠Y □N	
Baker, Jesse	Service Facilitator	LPC 7905-125	4,5	6	100%	⊠E □C	2/2023	1/2023	1/2023	⊠Y □N	
Benner, Laiza	Service Facilitator	APSW 134921	4,5	9	50%	□E ⊠C	6/2022	6/2022	6/2022	⊠Y □N	
Black, James	Clinic Director, Psychologist	Psychologist 1620-57	3,5 (SAP)	4	50%	⊠E □C	11/2023	11/2023	11/2023	⊠Y □N	
Burton, Justin	Service Facilitator	APSW 130915	4,5	9		⊠E □C	2/2024	2/2024	2/2024	⊠Y □N	
Czerwinski, Jordyn	Supervisor/ Therapist	LCSW 9006	1,3,4,5	5	50%	⊠E □C	6/2022	6/2022	6/2022	⊠Y □N	
Daly, Laura	Service Facilitator		4,5	15		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N	
DeZell, Gregory	Service Facilitator, Psychotherapist	LCSW 9553	4,5 (SAP)	5	50%	⊠E □C	8/2022	8/2022	8/2022	⊠Y □N	
Elsing, Katherine	Therapist	LMFT 1090	1,5	6	50%	□E ⊠C	8/2024	8/2024	8/2024	⊠Y □N	
Emmerich, Galina	Psychotherapist	LPC 10713	5	6		⊠E □C	2/2025	2/2025	2/2025	⊠Y □N	
Felland, Kyoko	Physician Assistant	PA 4139	5	11		⊠E □C	12/2023	12/2023	12/2023	⊠Y □N	
Fishnick, Kathryn	Service Facilitator		4,5	15		⊠E □C	8/2022	8/2022	8/2022	⊠Y □N	
Franklin, Julie	Psychotherapist	LCSW 8163	5	5		⊠E □C	12/2024	12/2024	12/2024	⊠Y □N	

Gardiner, Lea	RN	RN 238523	5	12		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N
Goerman, Katherine	Psychotherapist	LMFT 2009 SAC-IT 19481	5	6,16		⊠E □C	10/2024	10/2024	10/2024	⊠Y □N
Halloran, Miranda	Service Facilitator	LCSW 11225 SAC-IT 19119	4,5 (SAP)	5, 16	100%	⊠E □C	12/2024	12/2024	12/2024	⊠Y □N
Hubner, Olivia	Service Facilitator	APSW 132546	4,5	9	50%	⊠E □C	8/2023	8/2023	8/2023	⊠Y □N
Jackson, Lucy	Service Facilitator	LCSW 9174	4,5	5		⊠E □C	2/2024	2/2024	2/2024	⊠Y □N
Janik, Katie	Service Facilitator	LCSW 10016	4,5	5	50%	⊠E □C	5/2023	5/2023	5/2023	⊠Y □N
Johnson, Nori	Service Facilitator	LPC 11486 SAC-IT 19813	4,5	6,16	100%	⊠E □C	3/2022	4/2022	4/2022	⊠Y ⊠N
Kelly, Shannon	Service Facilitator	APSW 132833	4,5	9	50%	⊠E □C	4/2022	4/2022	4/2022	⊠Y □N
Laechelin, Sonya	Service Facilitator		4,5	14	100%	⊠E □C	8/2021	7/2021	7/2021	⊠Y □N
LaMasney, Leah	Service Facilitator	APSW 132245	4,5	9		⊟E ⊠C	3/20201	4/2021	4/2021	⊠Y □N
Lu, Isaac	Service Facilitator		4,5	14	100%	⊟E ⊠C	10/2024	10/2024	10/2024	⊠Y □N
Lucht, Elizabeth	Psychiatric Physician Assistant	LCSW 6817 PA 3332	5	5,11		⊟E ⊠C	8/2022	11/2022	11/2022	⊠Y □N
Martel, Andrea	Service Facilitator	LPC-IT 7825	4,5	14		⊟E ⊠C	2/2023	3/2023	3/2023	⊠Y □N
Matysik, Gregory	Therapist	LPC 3847 CSAC 15307	1,4,5 (SAP)	6,16	50%	⊟E ⊠C	7/2024	7/2024	7/2024	⊠Y □N
Miller, Erika	Registered Nurse	RN 148305	5	12	50%	⊟E ⊠C	12/2021	1/2022	1/2022	⊠Y □N
Miller, Sandra	Physician Assistant	PA 2987	5	11		⊟E ⊠C	10/2024	10/2024	10/2024	⊠Y □N
Nataraj, Rupa	Service Facilitator	APSW 134370	4,5	9		□E ⊠C	3/2023	3/2023	3/2023	⊠Y □N
Nelson, Andrea	Psychologist	Psychologist 2722-57	5	4	50%	□E ⊠C	10/2023	10/2023	10/2023	⊠Y □N
Parkes, Judith	Psychotherapist	LCSW 6884	5	5	50%	□E ⊠C	7/2021	7/2021	7/2021	⊠Y □N
Pollema, Andrea	APNP	APNP 7802	5	8	100%	□E ⊠C	12/2024	12/2024	12/2024	⊠Y □N

Rieder, Alyssa	Service Facilitator	APSW 134474	4,5	9	100%	⊠E	3/2023	3/2023	3/2023	×Υ
						□C				⊠N
Roethe, David	Clinic Director,	Psychologist	1,3,5	4	90%	⊠E	11/2023	11/2023	11/2023	⊠Y
	Psychologist	1360-57				□C				□N
Roethe, Erin	Operations Manager		5	15		⊠E	4/2024	4/2024	4/2024	⊠Y
						□C				□N
Stoffel, Elaina	Service Facilitator	APSW 134652	4,5	9		⊠E	5/2023	5/2023	5/2023	×Υ
						□C				⊠N
Von Bauer, Henning	Psychotherapist	LCSW 6923	1,5	5	50%	ΠE	8/2021	8/2021	8/2021	×Υ
						⊠C				□N
Whitlatch, Samantha	RN	RN 258397	5	12		ΠE	8/2024	8/2024	8/2024	×Υ
						⊠C				□N
Woodman, Kelly	Service Facilitator	APSW 128462	4,5	9	50%	ΠE	3/2021	4/2021	4/2021	⊠Y
						⊠C				□N

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Huerta, Celia	Psychotherapist	LPC 3950	5	6	FT	ЖE	2/2022	3/2022	3/2022	⊠Y		
										□N		
LeCount, Darren	Clinical Manager/	LCSW 7004	5	5	FT	×E	2/2022	2/2022	2/2022	⊠Y		
	Psychotherapist									□N		
Madrigal, Monica	Bilingual	LPC 8360	5	6	FT	ЖE	2/2022	2/2022	2/2022	⊠Y		
	Psychotherapist									□N		
Martinez, Johnathan	Bilingual	LPC 8385	5	6	FT	×	3/2020	3/2020	3/2020	⊠Y		
	Psychotherapist									□N		

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Adkins, Marcella	CCS Clinical Collaborator	LPC 4059	N/A	6		3/2022	3/2022	3/2022	⊠Y ⊡N		
Williams, Walter	Owner/ Clinician	LPC 8145	5	6	⊠E ⊏C	2/2022	2/2022	2/2022	⊠Y ⊡N		

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Abbott, Austann	ISDE Provider	APSW 134441	5	9		□E □C	7/2022	7/2022	7/2022	⊠Y □N
Birkett, Derek	Therapist	LCSW 10087	5	5		□E □C	2/2022	2/2022	2/2022	⊠Y □N
Carvin, Andrea	ISDE Provider	OT 1173	5	13		□E □C	3/2022	3/2022	3/2022	⊠Y □N
Ethun, Scott	Psychotherapist	LCSW 2217	5	5		□E □C	1/2024	1/2024	1/2024	⊠Y □N
Geiger, JoAnn	Partner/ Therapist	LPC 3604	5	6		□E □C	1/2025	1/2025	1/2025	⊠Y □N
Giebel, James	Mentor		5	15		□E □C	1/2025	1/2025	1/2025	⊠Y □N
Henderson, Lauren	Recreation Mentor		5	14		□E □C	1/2025	1/2025	1/2025	⊠Y □N
Humphrey, Haley	Psychotherapist	Psychologist 4069	5	4		□E □C	11/2023	12/2023	12/2023	⊠Y □N
Mason, Jane	Mentor		5	15		□E □C	3/2022	3/2022	3/2022	⊠Y □N
Meeker, Morgan	ISDE Provider		5	15		□E □C	9/2024	9/2024	9/2024	⊠Y □N
Michiels-Weldon, Mikele	Therapist	LPC 11355 SAC-IT 20104	5	6,16		□E □C	8/2024	9/2024	9/2024	⊠Y □N
Moore, Danielle	Psychotherapist	LPC 6183	5	6		□E □C	1/2025	1/2025	1/2025	⊠Y □N

Moore, Madison	Recreation Mentor		5	15	□E □C	4/2024	4/2024	4/2024	⊠Y □N
Moylan, Jeffry	Mentor		5	15	□E □C	1/2023	1/2023	1/2023	⊠Y □N
Silverwood, Katherine	Psychotherapist	LMFT 2142	5	6	□E □C	1/2025	1/2025	1/2025	⊠Y □N
Symanski, Jill	ISDE Provider		5	14	□E □C	1/2024	1/2024	1/2024	⊠Y □N
Voss, Louise	ISDE Provider	SW 8354	5	9	□E □C	8/2022	8/2022	8/2022	⊠Y □N
Wheeler, Sarah	Therapist	LPC 8318	5	6	□E □C	2/2023	2/2023	2/2023	⊠Y □N

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Auter, Lisa Marie	Peer Support Specialist		5	20		⊠E □C	1/2025	1/2025	1/2025	⊠Y □N
Bahr, Tami	Owner/ MH Professional	LCSW 7135 CSAC 15135	1,3,4,5 (SAP)	5, 16	100%	⊠E □C	6/2024	6/2024	6/2024	⊠Y □N
Bautch, Timothy	MHP/SAP	LPC 3921 CSAC 15366	1 (SAP)	5,16	100%	⊠E □C	6/2024	6/2024	6/2024	⊠Y □N
Carpenter, Matthew	Service Facilitator		4,5	15		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
Eastman, James	Service Facilitator	APSW 134705	4,5	9	100%	⊠E □C	12/2023	12/2023	12/2023	⊠Y □N
Ellingson, Nicole	Service Facilitator		4,5	15		⊠E □C	4/2024	4/2024	4/2024	⊠Y □N
Fleming, Jennifer	Service Facilitator	SAC 15500	4,5	16	65%	⊠E □C	7/2023	7/2023	7/2023	⊠Y □N
Inman, Cailin	Clinical Student/ Intern		5	22		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Jacobsen, Lindsey	LCSW	LCSW 11730	4,5	5	100%	⊠E □C	2/2023	2/2023	2/2023	⊠Y □N
Johnson, Essence	Service Facilitator		4,5	15		⊠E □C	1/2024	1/2024	1/2024	⊠Y □N
Lobdell, Kendall	Service Facilitator		4,5	15		⊠E □C	5/2024	5/2024	5/2024	⊠Y □N
Luetzow, Sarah	Psychotherapist	LCSW 11095 SAC-IT 19209	5	5,16		⊠E □C	12/2024	12/2024	12/2024	⊠Y □N
Ruland, Erin	Clinical Student/ Intern		5	22		⊠E □C	8/2024	10/2024	10/2024	⊠Y □N
Song, Ying	Service Facilitator	APSW 134142	4,5	9	100%	⊠E □C	6/2021	6/2021	6/2021	⊠Y □N

Welch, Ella	Therapist	LMFT-IT 1044	5	14	⊠E	8/2023	8/2023	8/2023	ΣY
					□C				□N

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Brister, Charkesia	Behavioral Health Care Coordinator		5	21		⊠E □C	1/2025	1/2025	1/2025	⊠Y □N
Cooper, Susan	MHP/SAP Supervisor	LCSW 8616-123 CSAC 15819-132	1,3 (SAP)	5,16		⊠E □C	11/2024	11/2024	11/2024	⊠Y □N
Jobe, Sulayman	APNP	APNP 15529 RN 196593	5	8		⊠E □C	9/2024	9/2024	9/2024	⊠Y □N
Johnson, Essence	Service Facilitator		4,5	15		⊠E □C	8/2024	8/2024	8/2024	⊠Y □N
Reed, Angela D.	Owner, SF, SAP	CSAC 10625	4,5 (SAP)	16	100%	⊠E □C	10/2023	10/2023	10/2023	⊠Y □N
Saeman, Sandhya	Behavioral Health Care Team Lead	LPC 11253	1,3,5	6		⊠E □C	6/2024	6/2024	6/2024	⊠Y □N
Sui, Christine	Clinical Student/ Intern		5	22		⊠E □C	1/2025	1/2025	1/2025	⊠Y □N
Syed, Salam	MHP	MD 53833	1	2		⊠E □C	12/2022	12/2022	12/2022	⊠Y □N
Wong, Patrina Hei Tung	Clinical Student/ Intern		5	22		⊠E □C	12/2024	1/2025	1/2025	⊠Y □N

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Stubbs, Lucia	CCS Supervisor	Psychologist 3511	N/A	4		E 6/2022 C	6/2022	6/2022	⊠Y □N			
Washington-Ross, Venus	Owner		5	15		E 10/2022 C	3/2023	3/2023	⊠Y □N			

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Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and C	aulifications	FTE	%	Backgro		Misconduct s – Dates Co	nducted
	F 2334	Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	(full or pa	E = Employed (full or part time) C = Contracted		DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Brown, Marc	Array Provider		5	15		□E □C	12/2024	12/2024	12/2024	⊠Y □N
Conley, Viashaun	Case Manager		4,5	15		□E □C	7/2024	8/2024	8/2024	⊠Y □N
Contreras, Guadalupe	Case Manager		4,5	15		□E □C	10/2024	10/2024	10/2024	⊠Y □N
Denman, Andrew	Peer Specialist		5	20		□E □C	5/2024	5/2024	5/2024	⊠Y □N
Henschel, Amanda	MHP/SAP/SD/ Supervisor	LCSW 8811	1,3 (SAP)	5		□E □C	9/2022	9/2022	9/2022	⊠Y □N
Liu, Xueyi	Array Provider		5	21		□E □C	9/2023	9/2023	9/2023	⊠Y □N
Martinez, Fernanda	Case Manager		4,5	15		□E □C	1/2025	1/2025	1/2025	⊠Y □N
Metzloff, Jasper	Case Manager		5	21		□E □C	4/2024	4/2024	4/2024	⊠Y □N
Sedlmayr, Sadie	LMFT-IT	LMFT-IT 1142	5	14		□E □C	2/2025	2/2025	2/2025	⊠Y □N
Turner, Mitchell	MHP	LPC 7290, CSAC 16472	1,3 (SAP)	6,16		□E □C	5/2023	5/2023	5/2023	⊠Y □N
Vaval, Geralyn	Owner	SAC-IT 20504	5	14,16,20		□E □C	10/2022	10/2022	10/2022	⊠Y □N

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Black-Chappuies, Jeanne	Parent Peer Specialist		5	15		□E □C	7/2024	8/2024	8/2024	⊠Y □N
Johnson, Elizabeth	Parent Peer Specialist		5	15		□E □C	1/2025	1/2025	1/2025	⊠Y □N
Miller, Rebecca	CCS Supervisor	LPC 6454	N/A	6		□E □C	6/2024	6/2024	6/2024	⊠Y □N
Nutter, Angelique	Parent Peer Specialist		4	15		□E □C	1/2025	1/2025	1/2025	⊠Y □N

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Williams, Patricia	Job Developer		5	15		Œ	2/2024	2/2024	2/2024	⊠Y
										□N
Williams, Walter	CCS Supervisor	LPC 8145	N/A	6		Œ	2/2022	2/2022	2/2022	⊠Y
										□N

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Boudreaux, Jeremy	Psychotherapist	LCSW 10072	5	5		□E □C	2/2024	3/2024	3/2024	⊠Y □N	
Coan, Patricia	Yoga Therapist		5	14		□E □C	7/2024	8/2024	8/2024	⊠Y □N	
Douglas, Heather	CCS Supervisor	LPC 4925	N/A	6		□E □C	3/2024	3/2024	3/2024	⊠Y □N	
Podell, Anna	Intern/ Clinical Student		5	22		□E □C	12/2024	12/2024	12/2024	⊠Y □N	
Stoesz, Laura	LPC-IT	LPC-IT 8047	5	14		□E □C	9/2024	9/2024	9/2024	⊠Y □N	
Troyan, Scott	Peer Specialist		5	20		□E □C	8/2024	9/2024	9/2024	⊠Y □N	
Zine, Anna	Peer Specialist		5	20		□E □C	9/2024	9/2024	9/2024	⊠Y □N	
Zine, Tammi	Owner/ Psychotherapist	LPC 3729	5	6		□E □C	3/2024	3/2024	3/2024	⊠Y □N	

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Aprill, Mary	Psychotherapist	LPC 7615 SAC 16445	5	6, 16		⊟E ⊠C	5/2023	6/2023	6/2023	⊠Y □N	
Black, James	Clinical Supervisor	Psychologist 1620-57	N/A	4		⊟E ⊠C	11/2023	11/2023	11/2023	⊠Y □N	
Fox, Travis	Psychologist	Psychologist 3343	5	4		⊟E ⊠C	5/2024	5/2024	5/2024	⊠Y □N	
Grantman, Jessica	Psychotherapist	LCSW 9311	5	5		□E □C	5/2024	5/2024	5/2024	⊠Y □N	
Johnson, Sheila	Owner/ Psychotherapist	LMFT 957 CSAC 15831 MTBT 491	5	6,16		□E □C	2/2022	3/2022	3/2022	⊠Y □N	
Jossart, Kelly	PMHNP	RN 150208 APNP 13251	5	8		□E □C	1/2024	5/2024	5/2024	⊠Y □N	
Kammerzelt, Todd	Psychiatrist	MD 54533	5	1		□E □C	5/2024	5/2024	5/2024	⊠Y □N	

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Arora, Simran	Clinical supervisor	LPC 6453	N/A	6		E 10/2024 C	10/2024	10/2024	⊠Y □N		
Ugur, Jennifer	LPC Psychotherapist	LPC 10086	5	6		0/202.	6/2024	6/2024	⊠Y □N		