

CCS Service Facilitator Checklist

NOTE: ITEMS 1-7 MUST BE COMPLETED IN THE FIRST 30 DAYS of ENROLLMENT!!!!

1. Receive referral of new client from DCDHS Intake staff prior to Intake appointment.
 - Attend initial screening appointment if possible or schedule an alternative date/time with client directly.
 - Client will be connected in the module to agency supervisor. Supervisor assigns SF to client in module.
2. Meet with client. Gather information for 30 day plan & immediate services. After initial meeting:
 - **Complete 30 Day Plan** (CCS MODULE ONLY) to ensure continuity of needed services and authorize services for assessment, service planning, and service facilitation. No need to enter goals. Do not print paper copy.
 - Include **Assessment of Initial Needs** narrative.
 - Include **Service Authorizations** for:
 1. **Screening & Assessment, Service Facilitation, & Service Planning** (3 authorizations)
 2. Any services **that need to be provided during initial 30-day assessment** period. Reach out to providers to ascertain what is needed (psychotherapy, med management, etc.)
 3. **Submit** Service Authorizations to MHP/SAP for approval.
 - ***Besides initial SF functions, no other others can be provided without prior MHP approval***
 - **Assemble Recovery Team** (identify members) and Assign in CCS Module.
 - Make sure to include phone numbers and address for all members of recovery team. For homeless clients or those without a phone, include best way to contact
 - **Complete (& submit)** ROIs for any collaterals outside of CCS network (family, PCP, landlord, etc.)
 - Remember, ROIs are not needed between CCS staff/providers.
 - ROI's should be submitted to DCDHS.
3. **Complete Comprehensive Assessment & Assessment Summary** in module **within 30 days of Functional Screen date**. Include multiple sources of information (client, collateral, family, records, etc.)
 - Use client's own words as much as possible. Do not leave any fields blank.
 - Print Copy of Assessment & Summary and obtain all signatures on Assessment Summary (client/guardian, SF, MHP/SAP, others present) along with 6 month recovery plan & **attach NEW CLIENT Service Facilitator FAX/ Cover Sheet**.
- Complete 6-month Recovery Plan in CCS MODULE** within 30 days of *Functional Screen* date.
 - Convene Recovery Team for Recovery Planning Meeting to discuss goals, objectives, and supports.
 - Have **Recovery Meeting Roster signed at each meeting**.
 - Strengths/needs/goals should always relate back to needs identified in the Assessment.
 - Goals must be specific, measurable, & relate directly to services. Include actions to be taken by team members.
 - Remember to include both natural supports and non-CCS services on Recovery Plan on team as appropriate.
 - Use client's own words as much as possible.
 - Identify needed services, including frequency and duration. Always offer clients a choice in providers from: [CCS Provider Directory \(dcdhs.com\)](http://dcdhs.com)
 - After providers are chosen, call the provider to ensure availability for the service needed before adding to the plan.
 - Discuss the goals they will work on from RP as well as duration and frequency of service.
 - Complete Service Authorizations in CCS MODULE, including # of units. SUBMIT Service Authorizations to MHP/SAP
 - *Be sure to adequately account for travel & documentation time for providers when indicating units.*
 - *Service Authorization units should come from the conversations with the Service Provider and team MHP. They should be based on client needs and best practice.*
 - Enter all Recovery Plan information into Module (Narratives, Strengths, Needs, Goals, Action steps)
5. Submit Recovery Plan 5+ business days to MHP/SAP for review in order to allow time for necessary edits.
6. Once RP is approved in CCS Module:
 - Print paper copy for client/guardian to sign.
 - Notify service providers that service provision can begin, that services are authorized.
 - Facilitate client with setting up initial appointment if needed or desired by client.

****SUBMIT HARD COPY OF RECOVERY PLAN SIGNATURE PAGE AND MEETING ROSTER TO DCDHS****
PROVIDERS WILL NOT BE ABLE TO SIGN BILLABLE NOTES UNLESS THERE IS A FULLY APPROVED RECOVERY PLAN
7. Attach the following completed and signed documents to the NEW CLIENT Service Facilitator Cover Sheet and return to DCDHS within 30 days of application/enrollment:
 - Assessment Summary
 - 6 month Recovery Plan
 - CSSRS

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- Recovery Team Meeting Roster

EVERY 6 MONTHS:

1. Update Comprehensive Assessment, Assessment Summary, CSSRS, Recovery Plan and Service Authorizations every 6 months (sooner if there are major changes). Client must sign off on paper copy of Assessment Summary and Recovery Plan. This HARD COPY must be sent to DCDHS with all signatures.
2. Remember to begin assessment/plan updates with enough time to meet, submit to MHP, make changes, obtain all signatures and submit to DCDHS before current plan expires. **You may begin working on new plan 60 days in advance of the current plan expiring.**
3. Update General Client Information tab as needed
 - Demographics (email Intake) & Medical (in module: diagnosis, medications, hospitalizations)

ANNUALLY

1. Update ROIs for both CCS and non-CCS providers
2. Assist DCDHS Intake Social Worker in coordinating annual re-screen.
3. Obtain annual Physician's Prescription for CCS prior to Rx expiration date.

AS NEEDED:

1. **Agency Transfers:**
 - It is best practice to first try to resolve conflicts internally through discussions, SF re-assignments, etc.
 - When a client or SF/MHP/SD has determined that an agency transfer is the best course of action, the SF agency should **complete Transfer Summary Form** & reach out to DCDHS Intake to discuss capacity for a transfer.
 - Submit Transfer Summary Form to DCDHS.
 - The outgoing agency serves as SF until an official transfer has been completed. Ideally, a phone or in person staffing of the case transfer should occur between the outgoing and incoming SF agency.
 - DCDHS Intake will link the new agency in the module so that:
 - NEW AGENCY SD can assign primary & secondary SF End old authorizations for SF, SA, & SP services
 - Authorize NEW agency for SF, SA, and SP services.
2. **Client Discharges:**
 - Staff with MHP to determine appropriateness of discharge and establish discharge date.
 - Once approved, meet with client to complete Discharge Summary and obtain signature. Discharge date should be the date discussed above.
 - SF and agency MHP should sign Discharge Summary as well.
 - **Submit completed and signed Discharge Summary** to DCDHS. (Submit completed discharge CSDS form to DCDHS also)
 - End Recovery Plan with date of discharge. This will end all services as well
 - Notify all CCS providers of discharge from CCS and ending of authorizations.

WAYS TO SUBMIT PAPERWORK TO DCDHS:

1. FAX: (608) 283-2994
2. EMAIL: Send encrypted email to CCS@danecounty.gov. If your agency does not have encryption system, you can register for an account on Dane County's system: <https://web1.zixmail.net/s/login?b=countyofdane>
3. MAIL: DCDHS Attn: CCS Program
1202 Northport Dr, 3rd Floor
Madison, WI 53704

CCS FORMS CAN BE FOUND ON DCDHS CCS WEBSITE: <https://danecountyhumanservices.org/ccs/prov/forms.aspx>

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ONGOING SERVICE FACILITATOR RESPONSIBILITIES:

Return calls and emails within 1-2 days of receipt.

Maintain contact with service providers to ensure services provided are meeting needs. This includes email contacts, telephone calls, scheduling and leading regular meetings and reviewing providers' progress notes.

Ensure all members of the Recovery Team are invited to participate in regular recovery team meetings.

Reach out to provider with issues of concern. Include supervisor when appropriate. Notify DCDHS for persistent issues.

Maintain regular contact with client (minimum of monthly)

Assist client with meeting needs and with obtaining any necessary services (medical, dental, food, housing etc.).
Educate self on community resources

Document all contacts in progress notes in CCS MODULE within 2 business days of contact. Progress note documentation must relate back to specific goals outlined in the Recovery Plan.

Regularly review provider progress notes to ensure service delivery is meeting client's needs as well as to monitor timeliness, interventions used, frequency and duration. Address issues of concern with provider directly and/or supervisor when appropriate.

Meet with agency MHP for regular supervision and consultation

Update Progress on Goals in MODULE. Progress updates should be ongoing, but must occur prior to plan updates.

Notify DCDHS of client death within 24 hours.

Facilitate SF agency transfers when conflicts can not be resolved or if client expresses interest in new provider.

Ensure client maintains MA eligibility. Report changes in MA status to DCDHS and CCS providers immediately.

Submit copies of all information and documents pertaining to client to central file at DCDHS.