

# Western Region Integrated Care

Comprehensive Community Services
Consumer Handbook

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Adapted from the CCS Consumer Handbook developed for the Lakeshore Recovery Consortium by Jason Latva, March 2016

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With sincere appreciation and permission, this handbook was adapted from a handbook that was originally developed in 2016 by Jason Latva for the Lakeshore Recovery Consortium consisting of Door, Shawano, and Kewaunee Counties.

<sup>&</sup>quot;I'm not where I need to be, but thankfully I'm not where I used to be."

### **Introduction**

### This handbook is for you if...

- ➤ You have a mental illness and/or a substance use problem and you are eligible for Comprehensive Community Services (CCS) through any member of the WRIC Consortium;
- You are a friend or family member of a CCS client;
- You work with individuals with mental illness and/or substance use issues.

This handbook explains how Comprehensive Community Services works in the WRIC Consortium. It will walk you through the process of taking control of your treatment and recovery.

### **Your Rights**

CCS clients have a number of rights under Wisconsin Statute sec. 51.61(1) and DHS 94 Wis. Administrative Code. These will be explained to you, and if appropriate to your family member or guardian, at Intake. You will also be given a written brochure with these rights.

### **CCS Specific Rights**

- In addition to those treatment rights, you have the right to:
- Choose the members of your Recovery Team
- Receive specific, complete, and accurate information about proposed services;
- Consent to treatment and to withdraw from the CCS Program at any time;
- Formal and informal grievance procedures in s. 51.61, WI Stats., and ch. DHS 94, and for Medical Assistance Clients, the rights to a fair hearing.

<sup>&</sup>quot;I'm not telling you it's going to be easy; I'm telling you it's going to be worth it."

### **Comprehensive Community Services (CCS)**

In the WRIC Consortium, CCS is a voluntary, community-based program funded by the State of Wisconsin and operated by La Crosse, Monroe and Jackson County Departments of Human Services.

The CCS program offers a wide array of psychosocial rehabilitation services. These are services and supportive activities that assist CCS clients with mental health and/or substance use conditions to facilitate recovery and to achieve their highest possible level of independent functioning and stability.

Some of the key features of the CCS program include:

- a. **Assessment**: Staff from one of the WRIC Consortium counties will meet with you to determine if you are eligible for CCS services, and to begin the assessment process.
- b. **Recovery Team**: You will identify a Recovery Team that will provide ongoing assistance to identify your strengths, needs, goals, desired outcomes, priorities, preferences, values, and steps to achieving goals.
- c. **Recovery Plan**: You will participate in the development of a Recovery Plan to achieve your recovery goals, hopes, and dreams.
- d. **Choice**: You will have a choice in services and service providers.
- e. **Change**: Your Recovery Plan is a document that can and will change over time as your needs and goals change and as you move towards recovery.

### **Definition of Recovery**

Recovery is defined by the Substance Abuse & Mental Health Services Administration (SAMHSA) as: A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

#### **Dimensions that Support a Life in Recovery**

SAMHSA has identified four major dimensions that support a life in recovery:

- **1. Health -** Overcoming or managing one's disease(s) or symptoms and making informed, healthy choices that support physical and emotional well-being.
- 2. Home A stable and safe place to live.
- **3. Purpose -** Meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income, and resources to participate in society.
- **4. Community -** Relationships and social networks that provide support, friendship, love, and hope.

"You are much stronger than you think."

### **10 Guiding Principles of Recovery**

As part of the working definition of recovery, SAMHSA has identified ten guiding principles. These include:

#### 1. Recovery Emerges from Hope

Recovery is achievable. People can overcome barriers and stigma and work towards a better future.

#### 2. Recovery is Person-Driven

Participants are in control of their own recovery. They determine what their recovery path will look like.

#### 3. Recovery Occurs Via Many Pathways

Recovery is not a straight path. There are ups and downs and setbacks. You can learn from your mistakes.

### 4. Recovery is Holistic

Recovery involves every aspect of one's life, including mind, body, and spirit. A sense of being a part of the community is also an important factor.

### 5. Recovery is Supported by Peers and Allies

People in recovery benefit from hearing the stories of others in recovery. Knowledge and skills are shared between peers.

### 6. Recovery is Supported Through Relationship and Social Networks

A group of supportive friends, family, providers and professionals is very important to recovery.

#### 7. Recovery is Culturally-Based and Influenced

Each person has their own values, traditions and beliefs. Your recovery will be a reflection of your own unique culture.

**8. Recovery is Supported by Addressing Trauma** Traumatic experiences, especially those that occur in childhood, affect one's mental health. Services must promote choice and empowerment while making a person feel safe.

# 9. Recovery Involves Individual, Family, and Community Strengths and Responsibility

By identifying strengths and practicing self-care the person is responsible for his/her own recovery.

#### 10. Recovery is Based on Respect

A person in recovery has rights. Stigma and discrimination in the community should be discouraged and eliminated. Education is the key to acceptance.

### **Your Life**

What are your hopes and dreams? What is important to you in your life?

Some people say it's about the basics – a safe affordable place to live, getting an education, having a decent job, effectively managing one's symptoms, getting healthy, feeling safe, having caring people around you, and feeling good about yourself.

Each individual is unique and so are each person's hopes and dreams. You don't need to have all the answers now. And your hopes, dreams, and goals may change over time.

#### Person-driven means:

- Making your own choices so long as they are not harmful to you or others;
- > Speaking up when you are not happy about something;
- ➤ Being an active participant in pursuing your recovery goals;
- ➤ Having control over your own life as much as possible;
- Being willing to try new things;
- Figuring out what you do and don't like;
- Asking for help when you need it; and
- ➤ Taking responsibility for your decisions

<sup>&</sup>quot;You can't have a better tomorrow if you are still thinking about yesterday."

### **Service Array**

The CCS program can provide many services you need. Services that fall under the Service Array and are part of your approved Recovery Plan are MA funded. Services are based on clinical need and are not meant to replace natural community supports or create dependences for you.

The CCS Service Array includes the following areas:

- > Screening and Assessment Screening and assessment includes the completion of the initial comprehensive assessment and ongoing assessments as needed.
- > Service Planning Service planning includes the development of your Recovery Plan.
- > Service Facilitation Includes the activities undertaken by the Service Facilitator to guide you in your recovery path and to make arrangements for services that will help you achieve your goals.
- **Diagnostic Evaluations** These are specialized tests to determine your needs.
- Medication Management Services may include: diagnosing, prescribing and monitoring medications; increasing understanding of the benefits of medication; monitoring changes in symptoms and side effects.
- ➤ Physical Health Monitoring The focus is on activities related to the monitoring and managing of your physical health.
- ➤ **Peer Support** Peer Support services are offered by persons with lived experience who can help you and your family negotiate the mental health and/or substance abuse systems. These services promote wellness, self-direction, and recovery.
- ➤ Individual Skill Development and Enhancement These services include training in communication, interpersonal skills, problem-solving, decision-making, conflict resolution, and other specific needs identified in your Recovery Plan.
- **Employment-Related Skill Training** These services address problems in finding, securing, and keeping a job.
- ➤ Individual and/or Family Psychoeducation Psychoeducation services include: skills training, problem solving, providing information and education resources about mental health and/or substance abuse issues, social and emotional support, and ongoing guidance about managing and coping with mental health and/or substance abuse issues.
- ➤ Wellness Management and Recovery/Recovery Support Services Includes helping you to manage your mental health and/or substance abuse issues, to develop your own goals, and to give you the information and skills necessary to help you make informed treatment decisions.
- **Psychotherapy** Includes the diagnosis and treatment of mental, emotional, or behavioral disorders, conditions, or addictions.
- > Substance Abuse Treatment This includes day treatment and outpatient substance abuse counseling services.

<sup>&</sup>quot;You, yourself, as much as anybody in the entire universe, deserve your love and affection"

There are some services that the CCS Program can not cover. Your CCS Service Facilitator will address those services if needed.

\*\*\*If you are receiving outpatient psychotherapy, these services must be provided through the CCS program\*\*\* We will make an attempt to contract with your current provider. If your current provider chooses not to contract with CCS, you will have the choice to change service providers to a CCS contracted provider or not enroll in CCS services.

# **Getting Started**

- 1. Meet with a CCS Representative in your county: The CCS Representative will meet with you, and if appropriate, your family, guardian, or other person(s) you select to explain the CCS program and the application process.
- 2. Determine Eligibility: The CCS Representative will use written information, a personal interview, and the results of a State functional screen to decide if you are eligible for the CCS program. The functional screen looks at risk factors and things you may need help with such as managing your symptoms, medications, or health; assistance to obtain benefits; assistance with work or school; and other factors. You may be asked to sign releases of information so that other persons may be contacted to obtain information.

### **Basic Eligibility:**

- County resident.
- Eligible for Medical Assistance.
- Mental health or substance use diagnosis.
- Functional limitation in one or more major life activities caused by mental health or substance use issues as measured by the State screen.
- Need for psychosocial rehabilitation services.
- **3.** Complete an Application and Admission Agreement: Eligible persons interested in applying for CCS will complete a brief application and sign an Admission Agreement that will give basic information on the program.
- **4. Review Client Rights and Grievance Procedures:** You will receive a Client Rights brochure and your rights and the grievance procedures will be explained to you.
- **5. Determine Any Immediate Needs**: The Service Facilitator will determine with you whether you have any needs that must be addressed immediately and make arrangements for those needs to be met until such time as CCS services can begin.

<sup>&</sup>quot;When 'I' is replaced by 'We,' even illness becomes wellness."

### **Your Service Facilitator**

A Service Facilitator is someone who will help guide you in your recovery path and make arrangements for services that will help you achieve your goals. The Service Facilitator will help you put together your Recovery Team and work with you and your Team to complete an assessment that covers many different areas of your life. From the assessment, you and your Team will identify your recovery goals and explore different options for treatment, services, and self-help programs to achieve those goals. This will result in a Recovery Plan. The Service Facilitator will help you keep track of your progress toward your recovery goals and to make needed changes in your plan or services along the way.

### Your Recovery Team

Your Recovery Team is the group of people who you want to help you achieve your goals. The Recovery Team will help you identify your preferences, strengths, needs, and priorities as part of an assessment. They will also partner with you in developing a Recovery Plan that will outline the services and supports that will help you realize your goals. Your Recovery Team must include:

- > You
- > Your Service Facilitator
- > A Mental Health and/or Substance Abuse Professional
- If you are a minor or have a guardian, your parent or legal guardian.

Your Recovery Team may also include other people who you want to be a part of your Team. You can choose to have:

- Family members
- > Friends or other natural supports
- Advocates
- ➤ Additional service providers

### **Roles**

The roles of the members of your Recovery Team include:

#### You

Your recovery is about you. That means that you have to be an active participant and let your Recovery Team know how you view your recovery, your strengths, challenges, resources, and needs. You also need to let the Team know your desired goals, how you would like to achieve them, what services you would like to receive, and with which agencies or programs you would like to work. Feel free to speak out and to ask questions about your services. If something is not working for you, it is important to speak up so that changes can be made.

#### **Service Facilitator**

A Service Facilitator is a staff person who has overall responsibility for all the activities related to coordinating your Recovery Plan, such as pulling together meetings of your Recovery Team, ensuring that your voice is heard and opinions are shared with all members of your Recovery Team, documenting the assessment and your Recovery Plan, making sure that you understand your options for treatment, coordinating your services and supports, keeping track of progress made on your goals, and more.

### **Mental Health Professional**

The Mental Health Professional reviews and attests to your need for psychosocial rehabilitation services to address your desired recovery goals. This individual participates in the assessment process and authorizes the services on the Recovery Plan. They also participate on the Recovery team as needed to insure that the team is receiving the clinical support.

### Substance Abuse Professional

If you have, or may have, a substance use issue, then a Substance Abuse Professional will be a part of your Recovery Team. This individual will conduct an assessment of your substance use, strengths, and treatment needs and establish any substance use diagnosis. This individual also signs off on your Recovery Plan.

If a mental health professional has the qualifications of both a mental health professional and substance abuse professional, then the mental health professional may serve in both roles on your Recovery Team.

#### Vendors

Vendors are the community partners that the CCS program pays for that you and the service facilitator will identify to support your recovery. These Vendors will be a part of your team as long as they are clinically need to assist you in reaching your goals.

"You'll move mountains! Today is your day! Your mountain is waiting, so get on your way!"

#### **Informal Supports**

Research has shown that having your friends, family or others whom you identify participate in your recovery teams can be a vital part of lasting recovery. When these informal supports are on your team they can learn how to help support you and can assist in creating long term wellness so you can maintain your recovery. Your service facilitator will help you identify which informal supports you would want on your team.

#### **Assessment**

The assessment is your opportunity to talk about how you view your recovery and your experiences, strengths, challenges, resources, needs, priorities, and preferences in each of the areas covered in the assessment process.

The Assessment is completed by the Service Facilitator with the help of you and your Recovery Team. Whenever possible, it will include your own words about how you view different areas of your life. The assessment will look at each of the following areas:

- 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. Any other relevant areas

<sup>&</sup>quot;Healing doesn't mean the damage never existed. It means the damage no longer controls my life."

### Your Recovery Plan

Your Service Facilitator will explain the recovery planning process to you and the members of your Recovery Team.

The Recovery Plan is a written document that:

- ➤ Is individualized to meet your needs based on the assessment;
- Lists the services or supports that will be provided to you or on your behalf;
- > Identifies when and how often you will receive those services or supports;
- Lists the service providers and natural supports who will be responsible for providing your supports and how each will be paid for;
- ➤ Indicates how you will know when you are making progress on your goals;
- > Outlines how you will know when you no longer need CCS services.

The Recovery Plan will be based on the Assessment and developed by you and your Recovery Team. The Plan will state what services you want, who will provide the services, and when they will be provided. The Recovery Plan should also include supports that you receive that are not part of the CCS program. For example, time spent with family, church or club memberships, and favorite neighborhood hang-outs.

At times, you and members of your Recovery Team may disagree about your needs or personal goals. A Service Facilitator will help you express your opinions while listening respectfully to the people who are important to you. The Service Facilitator can help you resolve conflicts to make sure that your needs are met and the people important to you continue to work as a team. A strong team helps people try new things but looks out for health and safety concerns. Your Recovery Plan will be signed by you, your Service Facilitator, a mental health and/or substance abuse professional, and by your legal representative.

The Recovery Plan will be reviewed regularly with you and your Recovery Team and updated as your needs change or at least every 6 months.

After gathering information from you and others, your Service Facilitator will write a summary of the information relevant to your chosen goals and outcomes.

With your Recovery Team, you will identify your desired measurable goals and outcomes. You will also be provided with options for treatment, services, and self-help programs to help you realize your goals.

<sup>&</sup>quot;Remember that everyone you meet is afraid of something, loves something, and has lost something."

### **Discharge**

You and your Recovery Team will decide when you will no longer need to be enrolled in the CCS Program. You will work together to decide when discharge will feel right for you.

You may also be discharged when:

- Your goals as identified on your Recovery Plan are met or being met.
- You no longer want CCS services.
- Your whereabouts are unknown for at least 3 months despite diligent efforts to locate you.
- You refuse services from CCS for at least 3 months despite diligent efforts to engage you.
- You enter a long-term care facility, (such as a nursing home or other facility), for medical reasons and are unlikely to return to community living.
- CCS services are no longer needed.

# **Grievance Resolution Policy**

- Clients who feel their rights have been violated may file a grievance.
- A client, a parent, or someone acting on the client's behalf may file a grievance.
- Clients cannot be threatened or penalized in any way for filing a grievance.
- The service provider or facility must inform clients of their rights and how to use the grievance process.
- Clients may, at the end of the grievance process or at any time during it, choose to take the matter to court.

You will receive and be asked to sign a copy of the county's Grievance Resolution Policy.

<sup>\*</sup>Please note: loss of MA may affect services

# **Quality Assurance**

Quality services are a vital to your success and that of the overall CCS program. There are a number of ways that the WRIC Consortium is making sure that CCS is providing quality services.

#### You and Your Recovery Team

You and your Recovery Team are the front-line for knowing which services and supports are working for you. You should feel free to speak out and ask questions about your services and supports. If something is not working, it is important to speak up so that changes can be made.

#### **CCS Coordination Committee**

The regional CCS Coordination Committee advises and assists the WRIC Consortium in developing and overseeing the quality of CCS services and protection of client rights. CCS Coordination Committees are made up of consumers or family members of consumers, County staff, service providers, and other community partners. CCS Coordination Committees meet at least quarterly. Meetings are open to anyone who wants to attend.

#### **Quality Improvement Plan**

Each year, the CCS Program develops and implements a quality improvement plan to assess client satisfaction and progress toward desired outcomes. This plan describes how CCS will evaluate the effectiveness of any changes in the CCS Program. Changes may be based on the results of the client satisfaction surveys, recommendations by CCS Coordination Committees, or other relevant information.

#### **Client Satisfaction Surveys**

Client satisfaction surveys will be sent out annually to all CCS clients. Completion of the surveys is voluntary, but is highly recommended in order to make your opinion count. The results are confidential. The tools used include:

- Mental Health System Improvement Project (MHSIP) Adult Satisfaction Survey is a survey for adult clients age 18 and older and asks about their experience with mental health and/or substance use services they have received in the past six (6) months.
- Mental Health System Improvement Project (MHSIP) Youth Satisfaction Survey is a survey for teens and adolescents age 13-17. The survey asks about their experiences and interactions with staff in the past six (6) months.
- Mental Health System Improvement Project (MHSIP) Family Satisfaction Survey is a survey completed by the parent or guardian of children age 12 and under. It asks about satisfaction with the mental health and/or substance use services their child has received in the past six months.

"You are amazing. Don't ever forget that"

### Western Region Integrated Care Multi-County Comprehensive Community Services Contacts

### La Crosse County (608) 784-4357

Emily Engling – WRIC CCS Administrator Ellen Daubert – WRIC CCS Service Director Ryan Ross – WRIC CCS Service Director/CST Coordinator

### Monroe County (608) 269-8600

Alicia Darling – Clinical Administrator

### **Jackson County (715) 284-4301**

Jessica Stinson – Behavioral Health Manager

"Today I choose life"