

COMPREHENSIVE COMMUNITY SERVICE (CCS) PROGRAM MODEL SERVICE ARRAY (Updated October 15, 2013)

County's DHS 36 - CCS Psychosocial Rehabilitation Service Array

*Assessment Domains 36.16 (4). Identify all domains applicable to each service described in the array:

(a) life satisfaction, (b) basic needs, (c) social network, family involvement, (d) community living skills, (e) housing issues, (f) employment, (g) education, (h) finances and benefits, (i) mental health, (j) physical health, (k) substance use, (l) trauma / life stressors, (m) medications. (n) crisis prevention management, (o) legal status, (p) other identified domains

ASSESSMENT DOMAINS*	SERVICE TITLE	DESCRIPTION AND EXAMPLES OF ACTIVITIES
all domains	1. Assessment	<p>Initial assessment, functional screen and assessment summary; completion of annual review of strengths, attributes and needs. Includes:</p> <ul style="list-style-type: none"> • Activities involved in the process used to identify the strengths, needs and desired outcomes of a consumer, and • Activities involved in evaluating progress toward desired outcomes.
all domains	2. Recovery Planning	<p>Services are determined through the development of an individualized recovery/service plan designed to provide for the highest level of independent functioning and quality of life possible and desired by the consumer.</p>
all domains	3. Service Facilitation	<p>All coordination, follow-up and monitoring activities that ensure the consumer receives assessment services, service planning, service delivery and supportive activities in an appropriate and timely manner. Includes:</p> <ul style="list-style-type: none"> • Assisting the consumer in self-advocacy. • Helping the consumer obtain necessary medical, dental, legal and financial services and living accommodations. <p>Progress will be tracked toward goals and consumer satisfaction with the services rendered.</p> <p>Coordinating the provision of emergency services during crisis periods. This may be coordinating the actual provision or coordinating with the HFS 34 designated crisis intervention program.</p>
c, d, e, f, l, n	4. Communication and Interpersonal Skills Training	<p>Specific skill training in communication, interpersonal skills, problem solving, conflict resolution, assertiveness, and other specific needs identified within the consumer's functional assessment.</p> <p>Individual or group interventions, including supportive activities, to increase social connections and meaning, and to improve communication skills and comfort in interpersonal relationships.</p>

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a, b, c, d, h	5. Community Skills Development and Enhancement	<p>Problem solving, support, training, assistance, and cuing related to functional living skills living to assist the consumer to gain and utilize skills related to personal hygiene, shopping, laundry, benefit education, household tasks, money management, how to access transportation, medication adherence, parenting, independent living problem solving, self-management, connection to community resources, social skill development, and other day to day requirements of living.</p> <ul style="list-style-type: none"> • May be provided in a one-to-one or group intervention, including supportive activities. • May include one-to-one therapeutic support to ensure that a consumer acquires the skills needed to attain independence.
j, k, l, m	6. Diagnostic Evaluations and Assessments	<p>Diagnostic evaluations and assessments including the assessment process and summary to determine appropriate treatment and behavioral interventions, and the level of community support needed for an individual consumer.</p> <ul style="list-style-type: none"> • Diagnostic Evaluations determine diagnosis, medication to be prescribed, as well as how to address clinical symptomatology, and should be performed by a person who holds a Safety and Professional Services license as a physician, a psychiatrist, psychologist, a Licensed Marriage and Family Therapist, a Licensed Professional Counselor or a Licensed Clinical Social worker. An Advanced Practice Nurse Practitioner with certification in behavioral health may also assess medication-related symptoms and needs. • Diagnostic Evaluations and Assessments are conducted by Mental Health/ Substance Abuse providers with specific credentials and training in the administration of these assessments/tests. • Assessments performed by a provider with a Bachelor Degree, or less training, or other non-behavioral health specialists including, for example, Occupational and Physical Therapists should be recorded under Service Array #1 "Assessment".
a, b, d, f, g, i, m	7. Employment Related Skill Training	<p>Services that address the person's illness or symptom-related problems in order to secure and keep a job. Services to assist in gaining and utilizing skills necessary to undertake employment. May include:</p> <ul style="list-style-type: none"> • Initial employment and education assessment, • Ongoing, on-site employment assessment/evaluation/feedback sessions to identify

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	7. Employment Related Skill Training (continued)	<p>symptoms or behaviors and to develop interventions with the recipient and employer that affect work,</p> <ul style="list-style-type: none"> • Focus on work-related symptom management, anxiety reduction, and education about appropriate job-related behaviors, • On-the-job or work-related crises. (Does not include specific job seeking and placement activities.), • One-to-one therapeutic support, including peer support, • Activities related to preparation for seeking employment including assistance in appropriate personal hygiene and grooming, clothing choices, anxiety reduction, arranging transportation, and other issues related to symptoms or behaviors that hinder securing employment, and • Assistance in accessing or participating in educational and employment related services, and coaching/cuing in order to minimize the effects of the consumer's disabilities for a limited amount of time, to reach a higher level of independence.
i, j, k, m, n,	8. Medication Management	<p>Major activities may include:</p> <ul style="list-style-type: none"> • <i>Medication evaluation</i> – making an acute diagnosis and specifying target symptoms and initial severity, medication, • <i>Prescription</i> – prescribing the type and does of medication(s) designed to alleviate the symptoms identified above, • <i>Medication monitoring</i> – monitoring changes in symptoms, occurrence and tolerability of side effects as well as reviewing data used in making medication decisions, and • <i>Individual client education</i> – increasing consumer knowledge and understanding of the symptoms being treated, medication being prescribed, the expected benefits, impact on symptoms, and identification of side effects. Assistance in helping the consumer develop his/her own compliance in adhering to scheduled medications.
j, m	9. Physical Health and Monitoring	<p>All activities related to the consumer's physical health conditions, management of side effects and symptoms related to the consumer's mental illness or prescribed medications and assistance in helping the consumer to develop his/her own monitoring abilities, including supportive activities. Monitoring of weight and vitals.</p>

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i, k, l, m	10. Psychoeducation	A method of working in partnership to impart current information about mental illness and substance abuse, to assist with coping skills for supporting recovery, and to encourage problem solving strategies for managing issue posed by mental illness and substance abuse disorders. Family intervention geared toward coping strategies, support and problem solving skills to assist in fostering consumer's recovery. Activities must be performed for the direct benefit of the CCS consumer. Consultation to family members for treatment of their problems not related to the CCS consumer's is not part of this service. May include one-to-one therapeutic support, including supportive activities.
i, k, l, m	11. Psychotherapy	Individual or group psychotherapy performed by a psychiatrist, psychologist, or master's level psychotherapist only (In HFS 36, it is staff listed #1 through #8.).
c, i, l, n	12. Recovery Education and Illness Management	<p>Recovery education and Illness management are a broad set of strategies that promote hope, healing and empowerment. These strategies are designed to help individuals manage their illness, reduce their susceptibility to the illness, cope effectively with symptoms, identify supports that are effective, and advocate for receiving those supports. Major activities may include:</p> <ul style="list-style-type: none"> • <i>Individual skills/illness self-management training</i> – focus on recovery training where outcome is to give the consumer self-assessment skills, and includes interventions such as modeling, role-playing, practice, homework, shaping and reinforcement. Community activities which focus on decreasing the symptoms of mental illness through various wellness activities. May include one-to-one therapeutic support, including supportive activities. • <i>Counseling</i> – Oriented toward problem solving and supportive activities provided in individually and in groups for consumers and their families to engage in recovery-based activities at home and in the community. Teaching individuals how their thinking styles and beliefs influence their feelings, and helping them to evaluate and change thoughts the lead to depression, anxiety, and anger. Includes cognitive-behavioral strategies to reduce severity and distress of persistent symptoms and promote personal insight within a group dynamic. • <i>Support to develop a crisis plan</i> – includes identification of early warning signs of crisis and details about preferred supports.

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	13. Substance Abuse Treatment	Gender-based, strength based, and integrated treatment, including substance abuse assessments.
variable	14. Non-Traditional or Other Approved Services	<p>Non-traditional services are identified for specific individuals, and are expected to accomplish treatment ends that traditional behavioral health services have not.</p> <ul style="list-style-type: none"> • Non-traditional services billed to CCS must have a psychosocial rehabilitative purpose, are not merely recreational activities, and are not otherwise available to the individual. • Documentation: medical necessity of non-traditional services must be documented in the individual's record and through assessed needs in the treatment plan, including documenting the psychosocial rehabilitative benefits. The treatment plan must document the corresponding measurable objectives and goals of the non-traditional service. • These services will have specified, reasonable time limits (e.g. 3 months) and successful outcomes that are reviewed regularly by the service facilitator. Non-traditional services will be discontinued if measurable objectives and goals are not met in reasonable timeframe.
d, e, j, m	15. Psychosocial Rehabilitative Residential Supports	<p>For services of residential staff only. Alternative licensed community living situations only include adult family homes; community based residential facilities (CBRFs), child foster homes, and child group homes. Includes psychosocial rehabilitation services only, no room, board, and other staff services.</p> <p>May include the following services:</p> <ul style="list-style-type: none"> • communication and interpersonal skills training, • community skills development and enhancement, • diagnostic evaluations and specialized assessments, • employment related skill training, • medication management, • physical health and monitoring, • psycho education, psychotherapy, • recovery education and illness management, and • substance abuse treatment.