

CCS Policy/Procedures
Staff Functions
DHS 36.10(2)(e)

Policy Statement: CCS staff functions are defined and minimum qualifications identified.

Discussion and Procedures:

DCHDS Staff Functions

1. The CCS Administrator shall have the qualifications listed under 1-14 of the Minimum Qualifications policy.
2. CCS Administrator responsibilities include:
 - a. overall responsibility for administration of the CCS program
 - b. compliance with Chapter DHS 36 and other applicable state and federal regulations
 - c. developing, implementing, and updating policies and procedures
 - d. review and monitoring of contracts for services
 - e. develop and facilitate staff orientation and training
3. CCS Service Directors shall have the qualifications listed under 1-8 of the Minimum Qualifications policy.
4. CCS Service Director responsibilities include:
 - a. overall responsibility for clinical oversight of the CCS program
 - b. quality assurance of services provided within the CCS program
 - c. regular and ongoing consultation with designated CCS agency staff

Service Facilitation Agency Staff Functions

5. CCS Service Facilitation Agency Service Directors shall have the qualifications listed under 1-8 of the Minimum Qualifications policy.
6. CCS Service Facilitation Agency Service Director responsibilities include:
 - a. overall responsibility for clinical oversight of their agency's CCS program
 - b. quality assurance of all CCS services for whom they provide Service Facilitation as well as quality oversight of other CCS services rendered by their agency
 - c. day-to-day consultation with agency CCS staff
 - d. ongoing consultation with DCDHS to ensure overall quality of service delivery

7. CCS Mental Health Professionals shall have the qualifications listed under 1-8 of the Minimum Qualifications policy.
8. CCS Mental Health Professional on recovery teams shall be responsible for:
 - a. participation in the assessment process
 - b. participation in the recovery planning process
 - c. participation on the recovery team
 - d. participation in discharge planning
 - e. authorization of services
 - f. immediate clinical supervision of Service Facilitators
9. CCS Substance Use Professionals shall meet the requirements of DHS 36.03(30) and the definition of a “substance abuse counselor” under s. DHS 75.03(85). Personnel able to serve as substance use professionals include individuals with the following credentials that are acting within their scope of practice: clinical substance abuse counselor; substance abuse counselor; substance abuse counselor-in-training; or an individual who holds a physician, psychologist, clinical social worker, marriage and family therapist, or professional counselor license; or an advanced practice social worker certificate or independent social worker certificate; or an individual who has the Substance Use Disorder specialty (MPSW 1.09) attached to their DSPS license.
10. CCS Substance Use Professionals shall be involved with clients who have or may have a substance use disorder. Responsibilities include:
 - a. establishing substance use disorder diagnoses
 - b. assessment of the client’s substance use, strengths, and treatment needs
 - c. participation on or consultation to the recovery team
 - d. participation in discharge planning
 - e. authorization of services, in conjunction with the CCS Mental Health Professional
11. CCS Service Facilitators shall have the qualifications listed under 1-21 of the Minimum Qualifications policy. In addition, CCS Service Facilitators must meet requirements outlined in the CCS Minimum Standards Policy.
12. CCS Service Facilitator responsibilities include:
 - a. participation in and coordination of the recovery team
 - b. facilitation of the assessment and recovery planning process
 - c. ensuring that the recovery plan and the service delivery flowing from it is integrated, coordinated, and monitored
 - d. helping clients make informed decisions, initiate recovery, build on strengths, and gain or regain control over their lives
 - e. ensuring that each client is being empowered and supported they can achieve the highest possible level of independence and functioning
 - f. educating clients about their rights and the options of using formal and informal grievance resolution processes
 - g. providing direct assistance and support to clients
 - h. maintaining regular communication with clients and services providers to make sure that the recovery plan is being followed and continues to be useful in meeting life goals

- i. screening CCS participants for risk of harm to self or others and referring to Emergency Services Unit at Journey Mental Health Center for appropriate assessment and safety planning as needed.
- j. coordinating with crisis intervention services, facilitating additional supports and diversion resources to avert emergency actions

Approved by CCS Coordination Committee on 9/17/2025.

3.5.2015, 4.30.2020, 5.20.2020