

**Brown Site**

700 SE Cross  
Mt. Sterling, Illinois 62353  
Phone: 217-773-3325  
Fax: 217-773-2425

*Psychosocial Rehabilitation*

210 Country Lane  
Mt. Sterling, Illinois 62353  
Phone: 217-773-3958  
Fax: 217-773-2339

*Sterling Apartments*

211 Country Lane  
Mt. Sterling, Illinois 62353  
Phone: 217-773-2903  
Fax: 217-773-2903

*Country Lane Apartments*

213 Country Lane  
Mt. Sterling, Illinois 62353  
Phone: 217-773-3926  
Fax: 217-773-3476

*Harvest House Apartments*

608 SE Cross  
Mt. Sterling, Illinois 62353  
Phone: 217-773-3515  
Fax: 217-773-9001

*Curry Lane Apartments*

510 Curry Street  
Mt. Sterling, Illinois 62353  
Phone: 217-773-4710  
Fax: 217-773-4049

**Hancock Site**

607 Buchanan Street  
Carthage, Illinois 62321  
Phone: 217-357-3176  
Fax: 217-357-6609

*Randolph Lane Apartments*

30 Randolph Lane  
Carthage, Illinois 62321  
Phone: 217-357-0590  
Fax: 217-357-0591

**Pike Site**

121 South Madison  
Pittsfield, Illinois 62363  
Phone: 217-285-4436  
Fax: 217-285-2804

*West Facility*

120 N. Williams Industrial Drive  
Pittsfield, Illinois 62363  
Phone: 217-285-4930  
Fax: 217-285-6223

# **Outpatient/ Substance Abuse/ Screening Assessment & Support Services (SASS) Program Manual**

**Revised: 09/09  
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# TABLE OF CONTENTS

## **I Program Description**

- A. Philosophy
- B. Hours/Days of Operation
- C. Admission/Re-Admission Criteria
- D. Ineligible Individuals/Alternative Services
- E. Access to Services/Screening Process
- F. Course of Treatment
- G. Client Satisfaction
- H. Discharge Criteria

## **II Program Services**

- A. Outpatient Counseling
- B. Psychiatric Consultation
- C. Crisis Intervention
- D. Case Management
- E. Substance Abuse Services
- F. Screening Assessment and Support Services - SASS

## **Emergency Plans (site specific)**

- Fire Plan
- Natural Disaster Plan
- Evacuation Route

# **I. Program Description**

## **A. Philosophy**

The Outpatient Program is designed to serve individuals who are experiencing difficulties and impaired functioning in coping with life's challenges. The Substance Abuse Program is designed to serve individuals who are experiencing difficulties with alcohol and/or other substances.

Services are provided to build resilience, and to support the recovery or well-being of individuals and the integration of individuals served into the community. Through service provision, symptoms or needs will be reduced and individuals will experience an improvement in level of functioning in their environment. The program strives to continually improve service provision in order that individuals served experience an enhanced quality of life.

## **B. Hours/Days of Operation**

The Outpatient Program, consisting of counseling/therapy, case management, community support and medication, crisis intervention, and psychiatric services, operates from 8:00 a.m. to 4:30 p.m. Monday, Tuesday, Thursday, and Friday; and 8:00 a.m. to 7:00 p.m. on Wednesday from each of the Center locations. The Crisis Hotline (see section C below) is available after the regular business hours for individuals requiring immediate assistance. Arrangements can also be made for services at alternate locations.

The Substance Abuse Program, consisting of counseling/therapy, case management, Early Intervention (group and individual services), DUI Evaluation and Driver Risk Education, operates from 8:00 a.m. to 4:30 p.m. Monday, Tuesday, Thursday, and Friday; and 8:00 a.m. to 7:00 p.m. on Wednesday from each of the Center locations.

The Center facilities have been designed to provide access to physically disabled individuals. The agency endeavors to accommodate individuals with special needs, or refers to providers equipped to meet their needs.

## **C. Admission/Re-Admission Criteria**

Individuals seeking Outpatient services from the Mental Health Centers of Western Illinois shall meet the following admission/re-admission criteria:

- age three and older
- meet criteria for DSM-IV diagnosis
- provide income, insurance, or payer information
- have mental health needs appropriate for treatment in an Outpatient setting
- be willing to cooperate with treatment recommendations and adhere to the rules which govern client behavior

Exclusionary or ineligibility criteria includes:

- under the age of three
- lack of criteria for a legitimate DSM-IV diagnosis
- refusal to provide income, insurance, or payer information
- needs services more intensive than can be provided in an Outpatient setting
- refusal to adhere to rules which govern client behavior

Individuals in crisis will be considered a priority for services. The Clinical Supervisor (site specific) is responsible for providing the final determination for eligibility.

Individuals seeking Substance Abuse services from the Mental Health Centers of Western Illinois shall meet the following admission/re-admission criteria:

- age 12 and older
- meet ASAM PPC-2R placement criteria for levels 0.5, I or II
- provide income, insurance, or payer information
- be willing to cooperate with treatment recommendations and adhere to the rules which govern client behavior

Exclusionary or ineligibility criteria includes:

- under the age of 12
- fail to meet the standards for treatment prescribed in the ASAM PPC-2R
- refusal to provide income, insurance, or payer information
- refusal to adhere to rules which govern client behavior

The Associate Director is responsible for providing the final determination for eligibility.

#### **D. Ineligible Individuals/Alternative Services**

Individuals determined ineligible will be provided with the reason(s) for ineligibility and a referral to alternative services. In addition, the referral source will be informed of the reason(s) for ineligibility with the consent of the individual. All documentation of ineligible individuals is maintained by the agency in various binders.

No provider of substance abuse services receiving Federal Funds from the U.S. Substance Abuse and Mental Health Services Administration, including this organization, may discriminate against you on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to actively participate in a religious practice.

Please be aware the Mental Health Centers of Western Illinois is a not-for-profit organization and is not of any religious affiliation. Federal law gives you the right to a referral to another provider of substance abuse services. The referral, and your receipt of alternative services, must occur within a reasonable period of time after you request them. The alternative provider must be accessible to you and have the capacity to provide substance abuse services. The services provided to you by the alternative provider must be of a value not less than the value of the service you would have received from this organization.

#### **E. Access to Services/Screening Process**

Individuals seeking outpatient services will make telephone contact with the receptionist. The receptionist will complete the Screening Form with the caller to inquire about individual's needs, review services and schedule an appointment. If the individual is determined to be in crisis, the Clinical Supervisor or available counselor will provide services over the telephone and document the interaction on the Initial Client Contact/Assessment Form.

Individuals seeking substance abuse services will make telephone contact with the receptionist. The receptionist will complete the Screening Form with the caller and schedule an appointment with the Substance Abuse Counselor. If the individual is determined to be in crisis, the Substance Abuse Counselor or available counselor will provide services over the telephone and document the interaction on the Initial Client Contact/Assessment Form. Individuals will be screened for the following priority for service criteria:

- pregnant injecting drug users
- pregnant and postpartum women
- injecting drug abusers & known HIV-infected persons
- DCFS referrals; persons eligible for TANF and other women and children; DOC releasees who have completed a prison treatment program; and TASC referrals

Individuals meeting criteria for priority for service will be oriented and provided treatment services or referred to the Substance Abuse Counselor for treatment services within 48 hours of the initial contact. Individuals determined to require medical, prenatal, childcare, or pediatric care will receive referral(s) to other providers.

#### **F. Course of Treatment**

Individuals found eligible for services must participate in a client orientation. The purpose of the orientation is to complete various agency documents and receive a Client Handbook, which provides information on agency policies, client information/education, and referral sources.

You will be required to complete an Application for Service and other forms that are used to determine the appropriate type or level of services based on your needs. You and your counselor will begin by developing an individualized treatment plan establishing goals and objectives to achieve during the treatment process. The length of treatment will be individualized to your needs depending upon the type and level of services you require.

In addition, the agency has an optional form for individuals in the Outpatient and Substance Abuse Programs to complete. For adults, the Behavior and Symptoms Identification Scale (BASIS-32) will be administered to assess your difficulty with symptoms and functioning experienced during the previous week. This measurement tool is administered at intake, during your sixth counseling session, yearly and upon discharge. For children the Ohio Youth Problem, Functioning and Satisfaction Scales & Columbia Impairment Scales (parent and youth versions) will be administered to assess your difficulty with symptoms and functioning experienced recently. This measurement tool is administered at intake, every 3 months throughout treatment and upon discharge. This self-reported information is utilized to provide the agency with clinical data to measure the effectiveness of our clinical staff and interventions utilized during the counseling process, as well as client outcome.

After six months of continuous service in the Outpatient Program, you and your counselor will review or revise your treatment plan. You will be requested to complete a Continuing Services Assessment form that is used to document new goals or objectives for continuing services. This will be an ongoing process until services are no longer required.

Ongoing assessment for individuals in the Substance Abuse Program is accomplished by the counselor's completion of the Continued Stay Review form with the client according to the timeframe indicated on the treatment plan (every 60 days, 10 hours or upon movement to another level of care).

It is important to the counseling process that you see your counselor on a regular basis. If circumstances arise that you cannot keep your scheduled appointment, please notify the agency/ counselor and reschedule for a more convenient time. Likewise, if the counselor will not be available for your appointment, you will be notified as soon as possible and provided with an alternative date and time.

Once you and your counselor have determined that you no longer require services from our agency, a Transition Plan/Discharge Summary will be completed, in addition to the BASIS-32 or Ohio Youth Problem, Functioning and Satisfaction Scales/Columbia Impairment Scales. The Transition Plan/Discharge Summary form describes the progress you achieved during service participation and includes referrals or recommendations for continuing services.

The agency prefers that the discharge forms be completed in person; however, if you are unable to participate in this process, the forms will be mailed to your home for completion. Once returned to the Center, these forms will become a part of your clinical record.

Requirements for follow-up for individuals mandated to participate in treatment will be indicated on the treatment plan (i.e. consulting with probation). Regardless of the discharge outcome, continuity of care is carried out as outlined on the treatment plan and documented in progress notes.

## **G. Client Satisfaction**

The Mental Health Centers of Western Illinois strives to provide individuals with quality services. Your satisfaction with services and suggestions for improvement are needed in order for the agency to continue meeting the needs of the individuals served. MHCWI solicits your input in several ways. (1) Initially, after receiving services for 60 days, you will be presented with a survey to measure your satisfaction with services received from the agency. (2) On an annual basis, the agency distributes a needs assessment to individuals currently receiving services to determine that the MHCWI is providing services that meet the needs of the individuals served and utilize suggestions for improvement to services. (3) As part of the discharge process, you will again be asked to complete a satisfaction survey.

## **H. Discharge Criteria**

An individual may be discharged from the Outpatient and Substance Abuse Programs when one or more of the following occur:

1. Individual request
2. Completion of treatment/intervention
3. Lack of individual participation
4. Individual requires level or type of service not provided
5. Non-compliance with agency policies

When an individual is discharged or removed from the program for aggressive and/or assaultive behavior, follow-up will occur within 72 hours to insure linkage to appropriate care.

Regardless of discharge status, any individual may reinitiate services by contacting his/her counselor at the appropriate Center location.

## **II. Program Services**

### **A. Outpatient Counseling**

Individual, family or group counseling sessions provide a supportive environment to cope with life's challenges. For more complex issues, therapy techniques are utilized to modify adaptive functioning.

### **B. Psychiatric Consultation**

Psychiatric services are provided to individuals diagnosed with a psychiatric disorder to evaluate symptoms and monitor prescribed psychotropic medications. Psychiatric consultations are provided by a licensed psychiatrist. In addition, clinical staff can provide monitoring and assistance between consultations.

For individuals experiencing a medication reaction or problem related to psychotropic medication prescribed by the Medical Director, please contact the Nurse or your counselor.

### **C. Crisis Intervention**

Crisis Intervention services are provided immediately upon contact to individuals experiencing a major life crisis and/or a rapid decrease in functioning. Individuals are evaluated by clinical staff to determine whether crisis counseling or a referral for psychiatric hospitalization is required. After-hour crisis intervention services may be accessed by calling the Crisis Hotline:

**Brown Site: 217-773-3977**

**Hancock Site: 217-357-3176**

**Pike Site: 217-285-6111**

### **D. Case Management**

Case Management services are designed to assist individuals in maintaining continuity with health and social services and are individualized according to your needs. The following services are available through Case Management:

- Support and monitoring of a psychiatric condition for recovery and continued stabilization
- Monitoring and education regarding prescribed medications and other treatment options to promote recovery and continued stabilization
- Referral, linkage, support & advocacy to access needed community resources and providers
- Representative payeeship to manage Social Security entitlements
- Integrated activities at agency facilities and in the community to promote socialization and recreational opportunities
- Nursing services consisting of administration/dispensation of physician orders, monitoring of medication compliance, and evaluation of medical or psychiatric issues

## **E. Substance Abuse Services**

The Substance Abuse Program offers the following services to individuals served in order to meet established goals and objectives:

- Individual, family or group counseling sessions are available to provide a supportive environment to cope with alcohol/substance abuse-related issues.
- Early Intervention individual or group services are available to educate individuals who are at risk for developing alcohol/substance abuse problems.
- DUI Evaluation services are available to persons who are charged with driving under the influence (DUI) offenses or violation of similar local ordinances. The purpose of the evaluation is to determine the extent of alcohol/drug use and determine the offender's risk to public safety. A subsequent corresponding recommendation for intervention is determined and recorded for the Illinois courts or the Office of the Secretary of State.
- Driver Risk Education services are available to persons who have been charged with DUI offenses or violation of similar local ordinances. The purpose of this service is to provide orientation to offenders regarding the impact of alcohol/drug use on behavior and driving skills. It also allows offenders to explore the personal ramifications of their own substance use.
- ATOD Prevention Education services are targeted towards both students and parents in the communities. The various programs focus on providing information and materials to increase knowledge and awareness of substances, helping develop refusal skills to substance use, and emphasizing parental involvement.
- Community Intervention services are provided by staff of the agency upon contact and on an ongoing basis. The MHCWI Substance Abuse Program recognizes the importance of educating the community (i.e. law enforcement, probation, schools, social service organizations, etc) regarding the services provided by the program, the effects of alcohol/substance use (particularly involving injecting drug users), education on the risks of HIV, and various treatment options.

## **F. Screening Assessment and Support Services - SASS**

This service offers screening, crisis intervention and assessment services so that youth at imminent risk of psychiatric hospitalization receive the least restrictive, most appropriate level of care. The SASS program is designed to provide up to 90 days of intensive services to children and their families with a careful transition to other less intensive services at the termination of SASS. Services may be provided in an array of settings including in-office, in-home and at school. SASS services will be provided in accordance with the following policies and procedures.

- SASS staff will respond immediately to calls/pages received from CARES within 30 minutes.
- SASS staff will arrive at the site where the crisis is occurring to provide a face-to-face screening and assessment within 90 minutes of receiving an emergency referral from CARES. Consent is not required for emergency response screenings.
- SASS staff will provide a face-to-face screening and assessment within 24 hours of receiving a non-emergency referral from CARES. Consent will be obtained from the parent/guardian prior to meeting with the child.
- Crisis intervention and stabilization services will be provided to the child/family to stabilize a child in a psychiatric crisis to avoid more restrictive levels of treatment.
- SASS staff will assist and facilitate a child's admission to a psychiatric hospital when necessary. SASS staff will provide consultation and advocacy services to the child/family throughout the child's hospital stay.
- Intensive outpatient services will be provided to a child/family when a child is discharged from the hospital and/or when ongoing community stabilization is needed. These services are provided to prevent a reoccurrence of the crisis and establish a plan for ongoing community based services.
- Throughout the child's SASS eligibility period SASS staff will manage and coordinate services with other key child serving systems involved with the child.

MHCWI shall ensure that psychiatric resources will provide the following:

1. Medication management services within 14 days of a client's discharge from an inpatient psychiatric hospital admission.
2. Consultation and medication management on a priority basis to those children for whom intensive community services were put into place in-lieu of hospitalization.
3. Make referrals for laboratory testing when appropriate and as needed.
4. Consultation on clinically complex cases and referrals for additional specialized assessments when necessary.
5. Consult with children and families regarding medication management concerns.

MHCWI will ensure training is provided in the following areas to all new and current SASS staff:

1. Crisis intervention.
2. Case management.
3. Child development.
4. Psychotropic medication.
5. Individual, family and group therapy treatment strategies and techniques.
6. Other approved treatment modalities specific to children.
7. Communication skills.
8. General knowledge of children's mental health issues.
9. Data systems.
10. The MHDD Code [405 ILCS 5].
11. The MHDD Confidentiality Act [740 ILCS 110].
12. The DCFS Confidentiality Rule 431.
13. The Health Insurance Portability Accountability Act (HIPAA).
14. How to use crisis stabilization and community resources to meet the immediate needs of the client.
15. To ensure cultural competence and sensitivity to cultural differences of children, their families and caregivers.
16. Child and Adolescent Service System Program (CASSP) principles are followed: The concept that the system of substitute care should be child-centered and family-focused, community based and culturally competent.

All SASS clients at the Brown site will be referred to a Family Resource Developer (FRD) located MHCWI in Mt. Sterling, IL or at Schuyler County Mental Health Center in Rushville, IL. The FRD will provide the child and family with peer/consumer support and assist them in achieving the best possible outcomes for the child.

SASS Clients at the Hancock and Pike sites receive services through Transitions of Western Illinois.