

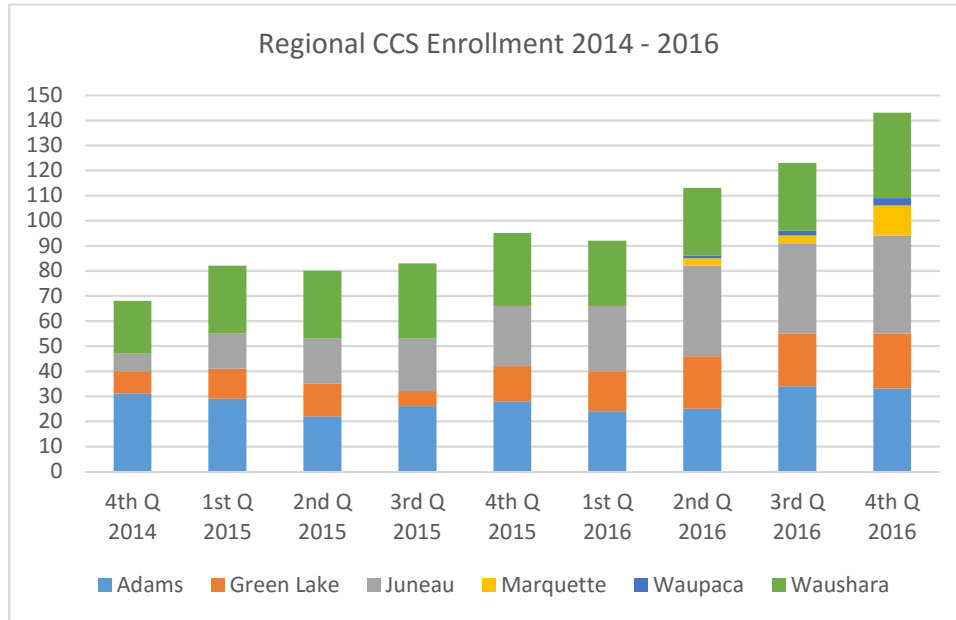
**Shared Services Regional Comprehensive Community Services (CCS) Report for
WI Department of Children and Families Secretary Anderson, and
WI Department of Health Services Secretary Seemeyer
Friday, March 3rd, 2017**

Brief History

Adams, Green Lake, Juneau, and Waushara Counties all received their individual CCS certifications between 2007 and 2014; and applied for and became a certified shared services region in May 2014.

Waupaca and Marquette Counties received their certifications and officially joined the CCS region on January 1st, 2016.

As depicted the graph that follows, at the end of 2014 the four certified counties served 68 CCS consumers; and by the end of 2016, the six certified counties were serving 143 CCS consumers (a 110% increase).



The 2015 CCS Program Survey Summary Data Report can be found online: <http://www.cwhpartnership.org/qi-subcommittee.html> (the 2016 report will also be posted upon completion).

Overview of Shared Services

Shared Services Model – each county maintains its own CCS certification and has its own local CCS Coordinating Committee. We then collaborate to share key elements such as training, quality improvement (QI), and services.

- **The Regional Coordinating Committee** meets every other month and is advisory to each local CCS Coordinating Committee, and oversees the work of the Regional Coordinators, Training, and Quality Improvement (QI) Committees.

- **Regional Coordination** is provided via a contractual relationship between White Pine Consulting and the Shared Services CCS Region, with Adams County acting as the fiscal agent, and Juneau County providing ongoing guidance and direction related to the coordinators' roles and responsibilities. Primary responsibilities include facilitation of the Training and QI committees, peer-to-peer forums, implementation of training and QI priorities, liaison with State and Regional staff as well as state and regional workgroups and committees, and development and expansion of the regional website.
- **Training Committee**
 - Identifies training and technical assistance priorities
 - Hosts regional workshops; 2016 topics included: CCS Documentation, Provider Orientation, Consumer-Centered Crisis Planning, First Episode Psychosis, Consumer-Centered Assessment, and Recovery-Oriented Concepts, and an Overview of Evidence Based Practices
 - Development of new CCS Providers, including but not limited to: Mentors, Psychotherapists, Equine Assisted Psychotherapy, Clinical Acupressure Practitioners, and a Reiki Master.
- **Quality Improvement (QI) Committee**
 - Identifies quality assurance and improvement needs
 - 2016 accomplishments included:
 - Coordination of consumer satisfaction survey process
 - Development of several regional forms, including a tool for internal consumer file reviews
 - Active involvement on regional and statewide quality improvement workgroups; including contribution of CWHP regional forms that are being adopted on a statewide basis
 - Involvement on the CCS Review Committee sanctioned by Secretary Seemeyer
- **Peer-to-Peer Forums** for Service Directors, Service Facilitators, and Fiscal Managers
- **Regional website** – www.cwhpartnership.org
 - Information related to the efforts of the CWHP
 - CCS resources related to the Regional Coordinating Committee, Training and QI Committee efforts, State and National CCS resources, and regional calendar of events.

2015 Consumer Satisfaction

- The four counties certified in 2015 participated.
- 18 adult consumers ranging in age from 20 – 66 years completed the Recovery Oriented System Indicator (ROSI) survey
 - Overall results show: 89% experienced a mostly recovery-oriented experience; 11% had a mixed experience, and 0% expressed a less recovery-oriented experience.
- 14 Mental Health Statistics Improvement (MHSIP) surveys were completed by youth or on behalf of youth by a primary caregiver.
 - Overall results show: 100% experienced a positive experience; with 0% indicating they had a mixed or less than positive experience.
- Results of the survey were used to guide the regional Quality Improvement plan.
- The full report can be downloaded from: <http://www.cwhpartnership.org/qi-subcommittee.html>. (The 2016 report will be posted when available.)

Overview of Strengths

- Regional relationships
- Strong history of collaboration that continues to grow
- Foundation of collaborative consumer-centered team practice (The Coordinated Services Team Initiative)
- Commitment at all levels to CCS (Agency Directors, Service Directors, Service Facilitators, Consumers)
- Active Consumer involvement on regional committees
- Consumer involvement in the development of:
 - Regional policies and procedures
 - “Consumer Participation on Committees and Sub-Committees” document
 - CCS Regional Coordinating Committee Handbook and local handbooks
 - A CCS Consumer Handbook (in progress)
- Regional Coordination
- Relationships with State and Regional staff, and other CCS regions
- Involvement on regional and state CCS workgroups

Overview of Challenges

- Several new staff have been added over the past 18 months
- Rural region – transportation, poverty, and need to expand formal and informal resources
- The State’s CCS Coordinator retired in April 2016, and two new staff have been added
- Multiple state agencies play significant roles in CCS (DCTS, DHCAA, DQA, and OIG), resulting in communication challenges at times
- Need for clarification on portions of DHS 36

The Future

- Continue to build on the strengths of the region
- Effectively respond to consumer feedback and help ensure opportunities for consumer voice
- Continue collaboration with State and Regional partners, and other CCS regions
- Work with Agency Directors, Service Directors, Service Facilitators, Consumers, and the community to expand and strengthen CCS in the region

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