Policy Statement: So that each CCS client receives timely initial and subsequent in-depth assessments and evaluations on which to base service decisions, an initial assessment will be done at the time of admission to CCS, an in-depth assessment will be completed within 30 days of receipt of the application for services, and assessment updates will occur as needed.

Discussion and Procedures:

1. Assessments will:
   a. be clearly explained to the client, and parent/guardian if applicable, and family when feasible and desired by the client;
   b. include available family information as well as the client’s perspective on all assessment domains;
   c. ascertain the degree of English language proficiency spoken and understood; and,
   d. be incorporated into the development, reviews, and revisions of the client’s recovery plans.

2. The initial assessment, completed by the CCS Intake Staff, will include completion of the appropriate State of Wisconsin Functional Screen.

3. The in-depth assessment will be facilitated by the Service Facilitator, will include the Mental Health Professional, and will be completed in collaboration with the client and other members of the recovery team.

4. A Substance Abuse Professional will be part of the team if the client has, or is thought to possibly have, a substance use disorder. The Substance Abuse Professional who is certified under DHS 75 will establish substance use diagnoses. He/she will conduct the assessment of substance use, strengths and service or treatment needs.

5. Assessment shall incorporate, to the greatest extent possible, the following:
   a. the client’s own perspective and own words about his/her recovery, experience, challenges, strengths, resources, and needs,
   b. the client’s recovery goals and understanding of his/her treatment or service options,
   c. recent information and evaluations for coexisting mental health, substance use, physical and medical impairments,
   d. gathered facts and histories that are updated with new information when it is obtained,
   e. client strengths, recovery goals and personal characteristics,
   f. strengths of client’s family, social network, community, and natural supports,
g. age and developmental factors,
h. culture and environmental supports as they influence the client’s choices, goals and attitudes.

6. The assessment will address all domains of functioning including:
   a. life satisfaction
   b. basic needs
   c. social network and/or family involvement
   d. community living skills
   e. housing issues
   f. vocational history and functioning
   g. educational history and functioning
   h. finances and benefits
   i. psychiatric symptomatology and mental status, as determined by a psychiatrist currently or by history
   j. physical/medical health
   k. use of drugs and/or alcohol and history of use and treatment,
   l. trauma and life stressors
   m. medications, both for medical and psychiatric use,
   n. crisis prevention and management
   o. legal status
   p. other domains identified by the CCS

7. The Service Facilitator will strive to have the client and his/her recovery team complete a comprehensive assessment within DHS 36 required timelines. The assessment may only be abbreviated if one of the following applies:
   a. the client’s health or symptoms allows obtaining little or no information within the timeframe,
   b. the client will not/cannot provide information necessary for completion,
   c. the client is immediately interested in receiving only specified services that require limited information

8. If an assessment is abbreviated for a reason acceptable above, it must still meet the requirements of a comprehensive assessment insofar as is possible under the conditions. The assessment summary will specify the reason for the abbreviation of the assessment.

9. An abbreviated assessment can be in effect for no longer than 3 months from the application for services. At the expiration date, a comprehensive assessment must be completed. If the assessment cannot be completed, the client will be informed that psychosocial rehabilitation services through the CCS can no longer be offered and services will be discontinued according to DHS 36 regulations.

10. The Mental Health or Substance Abuse Professional will prepare the assessment summary.
a. Each meeting date will be included and the date when the assessment was completed will be specified.
b. A summary of the information that was used to develop the service recommendations and outcomes will be described.
c. Client desires for outcomes and goals will be identified.
d. The names of all individuals who participated in the assessment process will be listed.
e. Any significant differences of opinion that are not resolved among members of the recovery team will be noted.
f. Signatures of all participants at assessment meetings will be included.

11. The assessment summary will include narrative incorporating the perspectives of the client and the rest of the team about strengths and needs, about a course of services/treatment and factors might positively or negatively affect that course.

12. The assessment summary will establish the foundation for medical necessity and authorization of services.

13. The assessment summary will be updated with significant changes in services and otherwise as needed.

14. Assessments and all related documentation will be captured in the Mental Health Module of the DCDHS Information System.