

CCS Policies/Procedures
Receiving and Making Referrals
DHS 36.07(5)(g)

Policy Statement: It is the intent of the CCS program to offer services to eligible persons in a way so that the program is easy to access and welcoming from the beginning.

Discussion and Procedures:

1. How to refer to CCS will be widely disseminated to social service agencies, information & referral services, NAMI, peer support groups and others such as those referenced in the Outreach policy. These entities will offer a warm connection that provides information regarding the CCS program and helps direct the potential applicant to the centralized intake unit
2. Referrals can be informal, such as self-referral or family, or can come from other agencies, crisis services, physicians, etc. Referrals will not be processed without the consent of the applicant, and parent/guardian if applicable, either verbally or in writing.
3. Attention will be paid to cultural or linguistic factors that may need attention so the person can apply, or will feel comfortable in applying.
4. Staff will be available to provide assistance with the referral if needed or requested, including meeting the applicant in a place other than the office.
5. For those who apply but are not eligible or for whom CCS is not the best fit, CCS Intake staff help the person connect with services appropriate to her/his needs and wishes, making any necessary referrals and facilitating contact with other service providers via a warm transfer.
6. CCS Intake staff will be trained in mental health risk assessment and will know how to help those who need crisis services obtain them.
7. Records of referrals for CCS clients to outside resources will be recorded as part of the case notes in the Mental Health Module.

5.1.14, 9.3.14
Revised 4.6.15