

Dane County Comprehensive Community Services (CCS)

CCS Plan

DANE COUNTY

January 18, 2023

County of Dane Department of Human Services Comprehensive Community Services Plan

Table of Contents

A. CCS PLAN.....	3
CLIENT EXPERIENCE	3
ORGANIZATIONAL STRUCTURE.....	4
Organizational Plan – DHS 36.07(1)	4
Staff Responsibilities – DHS 36.07(1)(a).....	8
Quality Improvement Plan – DHS 36.07(1)(b)	9
Coordination Committee – DHS 36.07(1)(c)	9
Criteria for Recruiting and Contracting with Providers of Psychosocial Rehabilitation Services – DHS 36.07(1)(d)	9
Policies and Procedures for Updating and Revising the CCS Plan – DHS 36.07(1)(e)	10
COORDINATION COMMITTEE – DHS 36.07(2)	10
CURRENT COUNTY SYSTEM OF SERVICES – DHS 36.07(3)	13
Currently Available Services – DHS 36.07(3).....	13
Process to Include CCS in Discharge Planning – DHS 36.07(3)(a)	15
Role When Emergency Placements/Protective Services Are Involved – DHS 36.07(3)(b)	15
Role in Providing Services in Conjunction with Other Care Coordination – DHS 36.07(3)(c).....	15
Role When a Consumer is Under Ch 51, Stats., Commitment – DHS 36.07(3)(d)	16
Establishing Contracts and Agreements with Community Agencies – DHS 36.07(3)(e).....	16
Establishing Contracts When A Needed Service is Not Available – DHS 36.07(3)(f)	16
Crisis Services – DHS 36.07(3)(g).....	16
CCS PROCESSES AND SERVICES – DHS 36.07(4)(a).....	17
Psychosocial Rehabilitation Service Array – DHS 36.07(4)(a)	17
Anticipated Service Needs of Potential Consumers – DHS 36.07(4)(a)1.	23
Treatment Interventions to Address Needs – DHS 36.07(4)(a)2.	23
Methods to Identify and Contract with Service Providers – DHS 36.07(4)(b)	23
CCS CONSUMER POLICIES – DHS 36.07(5)	29

Consumer Records – DHS 36.07(5)(a).....	29
Confidentiality Requirements – DHS 36.07(5)(b).....	29
Timely Exchange of Information Between the CCS and Contracted Agencies – DHS 36.07(5)(c)	29
Consumer Rights – DHS 36.07(5)(d).....	29
Monitoring Compliance with DHS 36 and Applicable Federal/State Laws – DHS 36.07(5)(e).....	29
Receiving and Making Referrals – DHS 36.07(5)(f)	30
Communication to the Consumer – DHS 36.07(5)(g)	30
Cultural Heritage and Primary Language – DHS 36.07(5)(h).....	30
Orientation and Training – DHS 36.07(5)(i)	30
Outreach Services – DHS 36.07(5)(j)	30
Application and Screening – DHS 36.07(5)(k)	30
Recovery Team Development and Facilitation – DHS 36.07(5)(l).....	31
Assessment – DHS 36.07(5)(m).....	31
Service Planning – DHS 36.07(5)(n).....	31
Service Coordination, Referrals, and Collaboration – DHS 36.07(5)(o)	31
Advocacy for the Consumer – DHS 36.07(5)(p)	31
Support and Mentoring for the Consumer – DHS 36.07(5)(q).....	32
Discharge Planning and Facilitation – DHS 36.07(5)(r)	32
Monitoring and Documentation – DHS 36.07(5)(s)	32
B. ARRAY OF CCS SERVICES	33
C. CCS STAFF LISTING	37
D. QUALITY IMPROVEMENT PLAN - DHS 36.08.....	38
E. COORDINATION COMMITTEE REPORT - DHS 36.09.....	42
F. ORIENTATION AND TRAINING – DHS 36.12	58
G. CONSUMER APPLICATION – DHS 36.13(1)	62
H. SERVICE ADMISSION AGREEMENT – DHS 36.13(1m)	65
I. CRITERIA OF DETERMINATION – DHS 36.14	69
J. ASSESSMENT POLICIES & PROCEDURES – DHS 36.16.....	71
K. SERVICE PLANNING AND DELIVERY PROCESSES – DHS 36.17	75
C. CCS STAFF LISTING	78

County of Dane

Department of Human Services

Comprehensive Community Services Plan

A. CCS PLAN

CLIENT EXPERIENCE

The Dane County Comprehensive Community Services (CCS) Plan is focused on the client and working with the individual to support a life in recovery recognizing that this is unique to each individual. Some of the key features of the CCS Program from the client perspective include:

- a. Any Door Access: Potential applicants may knock on any “door” whether it be that of an existing service provider, the Aging and Disability Resource Center (ADRC), the Behavioral Health Resource Center (BHRC), or other avenue and have a warm connection to the CCS Program.
- b. Intake: The Intake Worker meets with the client, and if appropriate, the client’s family, guardian, or other persons they select to explain the CCS program and the application process. The Intake Process also includes:
 - i. Determining Any Immediate Needs: The Intake Worker determines with the client any needs that must be addressed immediately and makes arrangements for those needs to be met until such time as CCS services can begin.
 - ii. Assistance with Obtaining Physician’s Prescription: The CCS Intake Worker will assist the client with obtaining the requisite Physician’s Prescription, if help is needed or requested.
 - iii. Selecting a Service Facilitation Agency: Children and adults who are interested in receiving CCS services will select a Service Facilitation agency with which they would like to work. The Intake Worker provides information about options and guides them through the process.
 - iv. Completing an Application and Admission Agreement: Eligible persons who are interested in applying for CCS complete a brief application and an Admission Agreement that provides basic information on the program.
 - v. Determining Eligibility: The Intake Worker uses written information, a personal interview, the results of the State functional screen, and the physician prescription for services to determine eligibility. Children may be found to be eligible for programs besides CCS. If so, the Intake Worker explains the different programs and options. Persons who are ineligible for CCS services may be referred to other programs or services.
 - vi. Reviewing Client Rights and Grievance Procedures: Clients receive a Client Rights brochure and the rights and grievance procedures are explained to them.
- c. Recovery Team: Each CCS participant identifies a Recovery Team that provides ongoing assistance to identify strengths, needs, goals, desired outcomes, priorities, preferences, values, and steps to achieving goals. The Recovery Team minimally consists of the CCS participant; the Service Facilitator; a Mental Health Professional; a Substance Abuse Professional if the client has

or may have a substance use issue; and for minors or persons who have a guardian, the parent or legal or guardian. The Recovery Team also includes other persons who the CCS participant wants to be part of the team.

- d. Assessment: Each CCS participant, through the assessment process, talks about how they view recovery and their experiences, strengths, lifestyle, challenges, resources including cultural and environmental supports, needs, priorities, and preferences in each of the areas covered in the assessment process. The assessment is updated as new information becomes available.
- e. Recovery Plan: Each CCS participant is engaged in the development of a Recovery Plan to achieve their recovery goals, hopes, and dreams.
- f. Choice: CCS participants are provided options for treatment, services, and self-help programs to help them realize their goals.
- g. Change: The Recovery Plan changes over time as needed to reflect the CCS participant's desired outcomes, priorities, preferences, and values.
- h. Quality: CCS participants have many opportunities to provide input needed to assure a quality CCS program. There are numerous opportunities for input starting with the Recovery Team through membership on the CCS Coordination Committee. CCS participants will also be asked for their input through annual client satisfaction surveys.

ORGANIZATIONAL STRUCTURE

Organizational Plan – DHS 36.07(1)

As the holder of the CCS certificate, Dane County's Department of Human Services (DCDHS) is responsible for the CCS program and for fidelity to DHS 36 regulations and rules. The Comprehensive Community Services (CCS) program is incorporated into the Department of Human Services' Behavioral Health Division under the purview of the CCS Community Services Manager. This unit works closely with the Community Services Manager in the Justice Support and Clinical Services area, which is a provider of service facilitation for youth.

Potential applicants may knock on any "door" whether it be that of an existing service provider, the Aging and Disability Resource Center, the Behavioral Health Resource Center, or other avenue and have a warm connection that provides information regarding the CCS program and helps direct the potential applicant to CCS intake workers for completion of the application, functional screen, and determination of need. CCS intake workers are equipped with laptops to enable the intake process to occur wherever the client feels the most comfortable.

The DCDHS CCS offices are located at:

Northport Office
1202 Northport Drive
Madison WI 53704

Services are provided through a network of service providers where the County, in compliance with DHS 36, establishes the standards and qualifications for agencies and individual service providers who become part of the network. The County holds the contracts for and monitors the provision of services. The County's CCS Provider Network Coordinator assists with the recruitment, screening, background checks, and ongoing monitoring of credentials of service providers.

The web-based CCS Module of the DCDHS Information System creates a centralized service record for each CCS participant. It is expected that provider agencies use the on-line system.

Support services including accounting and information management are provided by units in the Fiscal and Management Services area under the direction of the Division Administrator of Fiscal and Management Services. Accountants are responsible for setting up contracts in the County’s MUNIS (accounting system), making payments to vendors, and assisting with the year-end reconciliation. Information Management, under the direction of the Systems Coordinator is responsible for assisting employees and outside vendors with technology-related problems associated with the use of and/or reporting into the CCS Module which houses the centralized consumer service and administrative records.

Planning and Evaluation staff, under the direction of the Deputy Director, assist with meeting the evaluation requirements, such as the administration of the annual MHSIP consumer surveys.

The organizational chart may be found on page 6.

The County structure requires that the Department work in conjunction with the Department of Administration and Corporation Counsel.

The Dane County Controller’s Office in the Department of Administration provides centralized accounting, financial management, and internal control services.

Information Management in the Department of Administration is responsible for building and maintaining the County’s network and information technology-related infrastructure, developing and purchasing computer programs to increase the openness and efficiency of county government, and assisting employees with technology-related problems when they arise. This Division is working with the Department of Human Services to make further enhancements to the existing CCS Module to accommodate the specific needs of the CCS program and streamline the workflow for service providers.

The Purchasing Division in the Department of Administration provides a central purchasing function for all Dane County Departments. This function includes issuing most bids and requests for proposals, as well as, maintaining a list of vendors interested in doing business with the County.

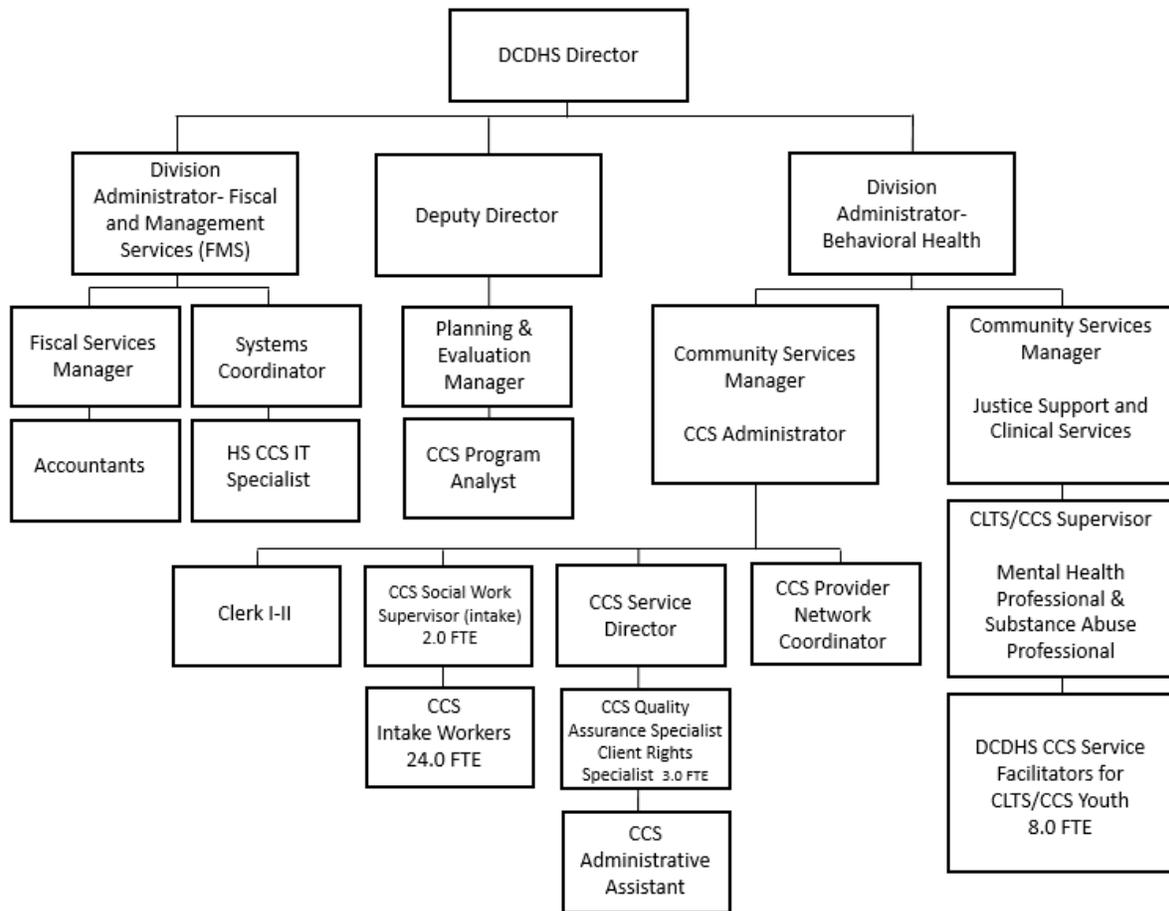
Dane County Corporation Counsel assists with the development and review of contracts with outside vendors. They also handle the mental health, alcohol, and drug dependence commitments.

Timeline

The projected timeline for activities to support the continued implementation of the CCS Program in Dane County is as follows:

Activity	Anticipated Timeline
Hire Intake staff necessary to maintain compliance with DHS 36 regarding ongoing enrollment and annual screening of existing participants.	This is an ongoing function.
Execute contracts with service providers.	This is an ongoing function.
Make needed enhancements to CCS Module of the DCDHS Information System.	This will be ongoing throughout 2023-2024.
Provide CCS orientation training.	This is an ongoing function.
DQA On-Site Visit.	June 2023
Provide training on CCS Module.	This is an ongoing function.

**CCS Organizational Chart
DHS 36.07(1)**



Staff Responsibilities – DHS 36.07(1)(a)

CCS Administrator

The CCS Administrator is seated within the DCDHS's Behavioral Health division. The Administrator has overall responsibility for the CCS program, including compliance with Chapter DHS 36 and other applicable state and federal regulations, and responsibility for developing and implementing policies and procedures. This individual is also responsible for the review and monitoring of contracts for services and the quality of services provided to consumers. The CCS Administrator and CCS Service Director are responsible for the orientation program for staff and volunteers so that a consistent message is delivered.

CCS Service Director -- DCDHS

The DCDHS CCS Service Director is responsible for the quality of services provided to consumers and day-to-day consultation to CCS staff. This position provides supervision to the CCS Quality Assurance Specialists and CCS Client Rights Specialists and will be backed up by the CCS Administrator.

Service Directors – Agency Based

CCS Service Directors are also employed with the agencies that contract with DCDHS to provide service facilitation services. They are responsible for the overall quality of the services provided to CCS participants and for day-to-day consultation to CCS staff within their respective agencies. Agency-based Service Directors meet with the DCDHS Service Directors on a monthly basis to review clinical issues, discuss programmatic needs, and ensure a consistent message throughout agencies.

Mental Health Professionals

Mental Health Professionals are included as members of all recovery teams. They participate in the assessment, service planning and authorization of services, and in discharge planning. In accordance with DHS 36.15, Mental Health Professionals are responsible for reviewing and attesting to the applicants' needs for psychosocial services and medical and supportive activities to address the desired recovery goals.

Substance Abuse Professionals

For persons who have or may have a substance use disorder, a Substance Abuse Professional participates in the assessment process, serves as a member of the recovery team, and participates in the service planning and discharge planning. They also are responsible, in conjunction with the Mental Health Professional, for authorizing services for persons with substance use disorders.

Service Facilitators

Service Facilitators ensure that the recovery plan and the service delivery flowing from it is integrated, coordinated, and monitored and is designed to support each CCS participant in a manner that helps them to make informed decisions, initiate recovery, build on their strengths, and gain or regain control over their lives. They work with CCS participants to optimize their autonomy and independence, to the greatest extent possible, by having them lead, control, and exercise choice over their life goals, and the services and supports that assist their recovery and resilience. The focus of the Service Facilitators is to ensure that each participant is being empowered and supported so they can achieve the highest possible level of independence and functioning. They serve as members of the recovery team and encourage the team to consider community resources that have appeal to the client before relying on professional services. The Service Facilitators explain and teach CCS participants about their rights and make sure they understand the options of using formal and informal grievance resolution processes. They provide direct assistance and support to CCS participants. They check in with participants on scheduled and emergent bases to make sure that service plans are being followed and continue to be useful in meeting their life goals.

The function of the Service Facilitator is to assist CCS participants in using their skills so they are truly directing their own service plans.

The CCS Staff Listing may be found in Section C. The electronic, on-site CCS Staff Listing will be continuously updated as additional staff are added and/or removed.

Quality Improvement Plan – DHS 36.07(1)(b)

The primary focus of the Quality Improvement Plan is to gauge the degree to which the CCS program is effective in helping clients progress toward recovery and achieve positive outcomes; a second focus is to assess satisfaction. Further, the Quality Improvement Plan is designed to aid in evaluating and improving program design and compliance, and to identify any issues that may be standing in the way of access, efficiency or efficacy. Measureable outcomes are identified for both program and client components, with data collected via the state-approved functional screen and the Program Participation System. Client satisfaction surveys are administered by DCDHS Planning and Evaluation Division and a written report is prepared annually summarizing client satisfaction results, as well as, program and system design outcomes. These reports are presented to the CCS Coordination Committee, which is responsible for updating the Quality Improvement Plan accordingly.

Of paramount importance in developing the plan was building in safeguards for confidentiality; procedures are explicit in assuring clients of their safety in expressing their opinions and evaluations of their services.

Dane County staff, with input and advice from the CCS Coordination Committee, design and update the Quality Improvement Plan. They will continue to receive outcome results and have ongoing input that is specified in policy and procedures.

Policies and procedures to implement a quality improvement plan may be found in Section D.

Coordination Committee – DHS 36.07(1)(c)

The Coordination Committee includes representatives from a cross-section of Dane County, particularly those who are recipients of services, advocates and service providers. The committee is comprised with an eye to different strengths and experiences, racial and ethnic diversity, and people who have different work and social circumstances; at least one-third of the members are consumers. This committee was formed specifically for the CCS program and did not exist as another committee. The committee has been meeting since October 16, 2013, concurrent with the initial writing of the Dane County CCS Application. Between August 2015 and October 2016, the committee held monthly meetings. In October 2016, the Committee voted to schedule meetings every-other-month and continues to meet at this frequency.

Criteria for Recruiting and Contracting with Providers of Psychosocial Rehabilitation Services – DHS 36.07(1)(d)

Dane County has an open provider network of services designed to meet the needs of CCS participants. CCS administrative staff continuously monitor the extent to which the CCS program maintains an adequate array and capacity of services to meet the needs of CCS clients.

The criteria for recruiting and contracting with providers of psychosocial rehabilitation services includes:

- a. Determination that a need exists for the service;
- b. Announcement of the need for services through the mental health and substance abuse systems with outreach conducted as needed;

- c. Application by service providers to become a part of the network including assurances of compliance with the relevant rules and regulations under DHS 36 and other applicable federal and state requirements, as well as, the ability to comply with the County reporting requirements to establish centralized administrative and service records;
- d. Ability to comply with the County's purchasing requirements;
- e. Screening of potential service providers for recovery focus; use of evidence-based practices; compliance with the applicable regulations of DHS 36 – Subchapter IV – Personnel. – including review and affirmation of compliance with: non-discrimination in employment practices, possession of appropriate credentials and licenses/certifications, successful completion of background checks, adequate supervision and clinical collaboration, orientation and training;
- f. Approval of the service provider by the CCS Administrator;
- g. Approval of the proposed contract by the County's administrative structure – i.e., risk management, Corporation Counsel, etc.

Policies and Procedures for Updating and Revising the CCS Plan – DHS 36.07(1)(e)

The CCS Plan is updated and revised as needed to ensure that it accurately identifies the services being provided, any significant changes within the systems of care, including those beyond CCS, and any changes or additions to policies and procedures. The CCS Coordinating Committee reviews all amendments and revisions to the Plan. The feedback of this group is documented and maintained with the updated Plan.

The full policies and procedures may be found in the *CCS Policies and Procedures Manual* located on-site at the Dane County Department of Human Services and on the Dane County Department of Human Services website at: <https://www.danecountyhumanservices.org/Behavioral-Health/Comprehensive-Community-Services/Policies-and-Procedures>.

COORDINATION COMMITTEE – DHS 36.07(2)

2023 Plan Update

CCS Coordination Committee Recommendation: At their January 18, 2023 meeting, the CCS Coordination Committee reviewed the changes to the CCS Plan recommended by the CCS Administrator. Changes consisted of updates to the organizational chart and structure, updates to dates where needed, changes to providers listed in the various categories of the Service Array, updates to policies, removal of Children Come First as a county program due to upcoming sunset in the first half of 2023, and revision of language from client to participant. All proposed changes were approved by the CCS Coordination Committee.

Response to CCS Coordination Committee: No response needed.

2021 Plan Update

CCS Coordination Committee Recommendation: At their January 20, 2021 meeting, the CCS Coordination Committee reviewed the changes to the CCS Plan recommended by the CCS Administrator and the CCS Analyst. Changes consisted of update of organizational chart, changes to providers listed in the various categories of the Service Array, updated policies, removal of contracted Provider Network Coordinator, update to gender-neutral language, and addition of Behavioral Health Resource Center as potential referral source/access point to CCS. All proposed changes were approved by the CCS Coordination Committee.

Response to CCS Coordination Committee: No response needed.

2019 Plan Update

CCS Coordination Committee Recommendation: At their March 20, 2019 meeting, the CCS Coordination Committee reviewed the changes to the CCS Plan recommended by the CCS Administrator and the CCS Analyst. Changes consisted of job title changes, grammar corrections, update of staff listing, update of organizational chart, and changes to providers listed in the various categories of the Service Array. All proposed changes were approved by the CCS Coordination Committee.

Response to CCS Coordination Committee: No response needed.

2017 Plan Update

CCS Coordination Committee Recommendation: At their March 15, 2017 meeting, the CCS Coordination Committee recommended the elimination staff names in the organizational chart and in the narrative of staff responsibilities.

Response to CCS Coordination Committee: The recommendation of the CCS Coordination Committee has been incorporated into the CCS Plan.

2016 Plan Update

CCS Coordination Committee Recommendations: At their May 15, 2016 meeting, the CCS Coordination Committee recommended that the staff listing in the CCS Plan not be placed online.

Response to CCS Coordination Committee: At this point it appears to be necessary to continue to include the staff listing in the CCS Plan as noted in DHS 36.07(1)(a).

2015 Plan

Summary

Over the course of a number of meetings, members of the CCS Coordination Committee gave feedback to the Dane County Mental Health Program Specialist who is heading up the CCS Application project. Members received packets of information to be reviewed at least two weeks prior to each meeting and came prepared with suggestions and recommendations. Some suggestions were wording or grammar edits and were quickly agreed to and incorporated. Other recommendations were substantive and often generated discussion. Even where there may have been differences of opinion in detail, there was consensus that the recommendations are included in the listing for County staff to consider and respond to.

A general theme was to make the CCS Plan and its policies clear and usable, both to providers who will be part of the Dane County CCS program and to potential users of CCS services. A second major theme was to convey through the plan and policies the vision of CCS--i.e. that services are recovery-oriented, consumer-driven, and clinically and culturally competent and sensitive.

Significant changes were made to the CCS Plan in July of 2014, subsequent to DHS training and initial feedback from DQA. These changes were reviewed by the CCS Coordination Committee at their August

meeting. This summary includes both recommendations made on the initial plan, and additional recommendations/observations made on the revised plan.

Response to CCS Coordination Committee

We have read your thoughtful recommendations to our drafts of the CCS Plan and the operating and personnel policies and procedures. Your well-conceived comments are very useful as we fine-tune our CCS application for submission to the State. As you will note when you receive the revised copies, most of your recommendations have been adopted. In the few instances where we did not take a recommendation, we will explain our reasoning below.

As you know, we had considered starting with a smaller, more focused consumer satisfaction survey whereby persons served could experiment with the process and take some time to observe how the CCS program would receive and use feedback. You gave us valuable ideas and information about ways to devise questions and a process to build trust and validity. Although we have since learned that the State will require the use of the ROSI from the outset, and so we will do that, we will still use your thoughts about process in places where we can.

We took under serious consideration the recommendation that we use a title other than “peer specialist” for the CCS position listed under DHS 36.10 (2)(e) 20. We agree with the committee that the title may be confusing in that it is too similar to certified peer specialists, and certified peer specialists are not required by the regulations. But we decided to keep the same title that is in the code for consistency so as to be clear when the program surveyors audit for certification. Updated information from the State has defined the expectation that peer support be provided by a certified peer specialist.

Recommendations regarding the staffing of an intake unit will be taken into consideration, however we may be limited initially by the ability to obtain immediate hiring authority. Over time, the intent is to grow the intake unit along with the CCS program and to incorporate peers whenever possible.

Aside from these points, all of your recommendations have been adopted and incorporated into the application.

We appreciate your thoughtful comments regarding outreach to special populations and new providers. We have incorporated these ideas in an Request for Proposal for a Provider Network Administrator and will expect that entity to present a detailed plan regarding outreach to providers.

You have our extreme gratitude and admiration for the work and energy you have put into this review. Our application will be better and stronger for your efforts. We are grateful that you will be continuing with us as we become certified and begin the exciting work of implementing a CCS program in Dane County.

The Coordinating Committee Report may be found in Section E.

CURRENT COUNTY SYSTEM OF SERVICES – DHS 36.07(3)

Currently Available Services – DHS 36.07(3)

Publicly-funded services currently available to adult Dane County residents for their mental health and/or substance use disorder needs include:

- Outreach
- Information and Referral
- Peer Support
- Crisis Intervention – including crisis intervention and stabilization services along with the Care Centers.
- Detoxification
- Case Management
- Outpatient – including counseling/therapeutic resources, day treatment, and medication management.
- Benefits – assisting clients with accessing benefits, such as social security and other benefits.
- Employment – including work related services and supported employment.
- Community Support Programs
- Residential – a range of services are offered including adult family homes, community-based residential facilities, group homes, and Recovery House.
- Inpatient

These services are purchased from outside entities through contracts with the County and are administered by the DCDHS Behavioral Health Community Services Managers.

Publicly-funded services currently available to Dane County youth for their mental health and/or substance use disorder needs include:

- Outreach
- Information and Referral
- Prevention and early intervention
- Crisis Intervention – including crisis intervention and stabilization services
- Case Management
- Outpatient – including counseling/therapeutic resources, in-home family counseling, day treatment, and medication management.
- Employment – including work related services and supported employment.
- Residential – a range of services are offered including foster homes, community-based residential facilities, and group homes.
- Inpatient
- Children’s Long Term Support Waiver—a Medicaid program that offers a range of services including respite, day services, and specialized therapeutic supplies.

The CCS Program relies on many of the same services that are already a part of the County’s mental health and substance use disorder services. In addition, new providers have joined the CCS Provider Network, thus increasing the range of options available to CCS participants. Dane County hopes to further develop additional needed supports, expand the CCS provider network and increase the number of persons served through the CCS program.

The CCS model represents a significant change in the approach in Dane County to contracting for services. Some of those differences are outlined in Table 1.

Table 1: Select Differences Between General DCDHS Contracts for Mental Health and AODA Services and CCS Program Contracts

Feature	General DCDHS Contracts	CCS Program
Application to be a Service Provider	<p>Done in response to a request for proposal (RFP). RFPs are released every 5 years or whenever there is a need for or a significant change in a service. The majority of RFPs are released in April and due in May of each year.</p> <p>Typically one contract to a single provider is awarded per RFP.</p>	<p>All willing and qualified providers may apply at any time to the County's Provider Network Coordinator.</p>
Contract Term	<p>Typically 1 year.</p>	<p>CCS contracts are for a two year term limit provided that CCS funding continues as currently proposed at the State level and that the service provider continues to be credentialed by the County. Contracts may be amended as needed.</p>
Contract Payment	<p>Typically based on 1/12th of contract amount paid each month that requisite reports are submitted as required. Contracts may also include provisions for generating and/or sharing Medicaid or other revenue.</p>	<p>CCS contracts are paid on the basis of unit times unit rate (unit x unit rate) based on the credentials of the performing service provider, i.e., Masters, Bachelors, etc. Service providers bill based on their usual and customary costs as identified and approved in their CCS contract with the County. County pays the lesser of the usual and customary charge or the CCS interim rates published in the ForwardHealth Handbook.</p> <p>There will be an annual reconciliation process in compliance with State procedures. Once the process is completed with the State, additional payment up to the usual and customary charges may be passed on to the service provider as approved by the State and County.</p> <p>Rates must be supported by the agency audit and other documentation.</p> <p>Providers are required to submit claims through the County's on-line web-based application.</p>

Table 1: Select Differences Between General DCDHS Contracts for Mental Health and AODA Services and CCS Program Contracts

Feature	General DCDHS Contracts	CCS Program
Orientation and Training	Providers are expected to independently provide staff training and orientation.	<p>County provides some, but not all, of the orientation and training required under DHS 36.12 (1).</p> <p>Providers are required to provide documentation to the County's Provider Network Coordinator that each staff member receives the required number of hours of initial and ongoing training each year.</p>
Service Authorizations	Process varies from contract to contract.	Services are selected based on the needs, goals, and preferences of the client and identified in the recovery plan. Services must be authorized by the Mental Health Professional, and for clients who have or are suspected of having a substance use disorder, by the Substance Abuse Professional.

Process to Include CCS in Discharge Planning – DHS 36.07(3)(a)

When a CCS participant is being discharged from a non-CCS program or facility, CCS service facilitation staff play an active role in planning and facilitating services and supports needed to ensure a smooth transition. The CCS staff consult with discharge planning staff and attend discharge related meetings when possible to ensure that appropriate follow up care is provided. The CCS recovery plan will be updated as needed if new or different psychosocial rehabilitation services are needed. CCS will serve as an advocate for other participant needs not covered by the CCS service array. CCS's role includes ensuring the discharging agency has put an adequate discharge plan in place before its services are discontinued. Discharge planning staff in non-CCS programs and facilities will continue to be informed about the CCS program, apprised of the process for referring to CCS, encouraged to educate clients about CCS, and include CCS in discharge planning as a service option available to clients in the community.

Role When Emergency Placements/Protective Services Are Involved – DHS 36.07(3)(b)

CCS will make every effort to prevent the need for protective services by coordinating services and facilitating additional supports as needed. When an emergency protective placement is being sought or when protective services or an elder abuse investigation is under way, CCS will be notified before action is taken whenever possible. The Adult Protective Services staff will coordinate legal responsibilities. The CCS worker's role is to support the person and explain what is happening, and to use a non-directive approach to educate the person about options they may want to or be able to pursue. CCS will also play its role as service facilitator and advocate.

Role in Providing Services in Conjunction with Other Care Coordination – DHS 36.07(3)(c)

CCS maintains the responsibility for continuity of services and assurance that service is provided according to CCS standards, even when other care coordination services are involved. Based upon the domains

addressed in the assessment, the CCS and the care coordination entity staffs agree to deliver specific services or treatment defined in the recovery plan that is written or updated to assure coordination. The person served and their recovery team are involved in decisions. Teams work together to fully integrate services.

Role When a Consumer is Under Ch 51, Stats., Commitment – DHS 36.07(3)(d)

When CCS is providing services to a client under a ch. 51, Stats. commitment, CCS's role is to continue to focus on the treatment and service needs of the client, providing the client as much autonomy and ability to direct his/her treatment and services as possible. CCS will comply with the requirements under both Chapter 51 and Chapter 36. The conditions of the commitment may be incorporated into the recovery plan, if the client so desires. The client will be informed that the CCS Service Facilitator will comply with any reporting required by the Ch.51 monitoring entity regarding adherence to the commitment order.

Establishing Contracts and Agreements with Community Agencies – DHS 36.07(3)(e)

The CCS Program has an open network meaning that qualified agencies/service providers may be added at any time. Contracts, and when permissible, Agreements with providers will be established to ensure there is a rich variety of treatment options available to CCS clients. Providers must be recovery-focused; able and willing to comply with the vision, values, rules and regulations of CCS; meet the qualifications under DHS 36 Subchapter IV-Personnel; be willing to comply with the County's purchasing requirements; meet additional standards established by the CCS Program, such as use of or reporting into the centralized information system (CCS Module); and be approved through the appropriate County processes.

Establishing Contracts When A Needed Service is Not Available – DHS 36.07(3)(f)

The Provider Network Coordinator will monitor the provider network to ensure that all CCS services are available and accessible. In situations where a needed service is not available or does not exist, the Provider Network Coordinator will be responsible for recruiting new providers to meet that need and expediting certification as a CCS provider. Contracts will be established in the same manner as those with other community agencies.

Crisis Services – DHS 36.07(3)(g)

CCS staff provide crisis planning services but not crisis intervention services. CCS works closely with the DHS 34 crisis intervention services operated by the Emergency Services Unit (ESU) of Journey Mental Health Center (JMHC). CCS participants are given clear and understandable information about how to contact crisis services at any time. CCS screens participants for risk of harm and makes referrals to ESU as appropriate for assessment and planning. CCS staff coordinate with ESU when crisis services are needed and offer to assist with crisis planning.

CCS PROCESSES AND SERVICES – DHS 36.07(4)(a)

Psychosocial Rehabilitation Service Array – DHS 36.07(4)(a)

Dane County intends to provide a full array of psychosocial rehabilitation services across the life cycle. The service array was based on the anticipated service needs of and viable treatment interventions for potential CCS participants, including minors and the elderly. The service array along with potential service providers with which DCDHS already contracts and who may be interested in being considered as service providers under the CCS Program are described in the following narrative, in the on-line Forward Health *Provider Handbook for Comprehensive Community Services* under covered services found at: <https://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Display.aspx>, and in the CCS Psychosocial Rehabilitation (PSR) Service Array table found in Section B.

1. *Screening and assessment services* include: completion of initial and annual functional screens, determination of need for psychosocial rehabilitation services, and completion of the initial comprehensive assessment, assessment summary and ongoing assessments as needed.

Current service providers for the initial screening and determination of need include: DCDHS staff in the Behavioral Health Division.

Current service providers for the completion of the assessment, assessment summary, and ongoing assessments include: Anesis Center for Marriage and Family Therapy; Catalyst for Change (adults only), Common Threads Family Resource Center; Community Counseling Center; Community Living Alliance (adults only); Forward Learning Youth and Young Adults; Grand Journey; HealthyMinds; Hope Inspired; Insight Counseling & Wellness; Journey Mental Health Center; Kabba Recovery Services; Keeping Families Together; Lutheran Social Services; Madison Trauma Therapy; Manifest Wellness, LLC; Monarch Addiction Recovery Clinics; Neu K; Open Door Center for Change; Orchestra X; Orion Family Services; Rape Crisis Center; RISE Wisconsin; Sankofa Educational Leadership United Company; SOAR Case Management Services (adults only); Tellurian (adults only); The Hmong Institute; The Psychology Clinic; Triquestrian; True Believers; and DCDHS (CCS/CLTS only)..

2. *Recovery planning* includes the initial and ongoing development and review of a written plan of the psychosocial rehabilitation services that will be provided or arranged for the member that is based on the individualized assessment of the individual.

Current service providers include: Anesis Center for Marriage and Family Therapy; Catalyst for Change (adults only), Common Threads Family Resource Center; Community Counseling Center; Community Living Alliance (adults only); Forward Learning Youth and Young Adults; Grand Journey; HealthyMinds; Hope Inspired; Insight Counseling & Wellness; Journey Mental Health Center; Kabba Recovery Services; Keeping Families Together; Lutheran Social Services; Madison Trauma Therapy; Manifest Wellness, LLC; Monarch Addiction Recovery Clinics; Neu K; Open Door Center for Change; Orchestra X; Orion Family Services; Rape Crisis Center; RISE Wisconsin; Sankofa Educational Leadership United Company; SOAR Case Management Services (adults only); Tellurian (adults only); The Hmong Institute; The Psychology Clinic; Triquestrian; True Believers; and DCDHS (CCS/CLTS only).

3. *Service facilitation* includes activities that ensures the member, (and where appropriate for minors, the member's family), receives assessment, service planning, service delivery, and supportive activities in an appropriate and timely manner. It also includes ensuring the service plan and service delivery for each member is coordinated, monitored, and designed to support the individual in a manner that helps the individual achieve the highest possible level of independent functioning. Includes assisting the member in self-advocacy and helping the member obtain other necessary services such as medical, dental, legal, financial, and housing services.

Current service providers include: Anesis Center for Marriage and Family Therapy; Catalyst for Change (adults only), Common Threads Family Resource Center; Community Counseling Center; Community Living Alliance (adults only); Forward Learning Youth and Young Adults; Grand Journey; HealthyMinds; Hope Inspired; Insight Counseling & Wellness; Journey Mental Health Center; Kabba Recovery Services; Keeping Families Together; Lutheran Social Services; Madison Trauma Therapy; Manifest Wellness, LLC; Monarch Addiction Recovery Clinics; Neu K; Open Door Center for Change; Orchestra X; Orion Family Services; Rape Crisis Center; RISE Wisconsin; Sankofa Educational Leadership United Company; SOAR Case Management Services (adults only); Tellurian (adults only); The Hmong Institute; The Psychology Clinic; Triquestrian; True Believers; and DCDHS (CCS/CLTS only).

4. *Diagnostic evaluations* include specialized evaluations needed by the member, including, but not limited to: neuropsychological, geropsychiatric, specialized trauma, eating disorder, adolescent behavioral and adolescent alcohol/drug assessment intervention program evaluations in order to determine the appropriate treatment and behavioral interventions and the level of community support needed by the member.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services, Inc; Badger Care LLC; Children's Service Society of Wisconsin; Children's Therapy Network; Common Threads Family Resource Center, LTD; Community Care Programs, Inc.; Community Counseling Center of Madison WI, Inc.; Connections Counseling LLC; Deeper Insights LLC; Ease-of-Mind Mental Health Solutions, LLC; Edelweiss Behavioral Health LLC; Elite Cognition, LLC; Family Service Madison, Inc.; Four Winds Counseling, LLC; HealthyMinds, LLC; Hope Inspired LLC; Imagine a Child's Capacity LLC; Insight Counseling & Wellness, LLC; Journey Mental Health Center, Inc.; Kabba Recovery Services; Madison Trauma Therapy; Maleck Therapy LLC; Mercyland Psychiatry, Inc.; Monarch Addiction Recovery Clinics, S.C.; Neu K; Open Door Center for Change, LLC; Orchestra X; RISE Wisconsin, Inc.; Samaritan Counseling Center of Southern Wisconsin; Sankofa Educational Leadership United Company; SOAR Case Management Services, Inc.; Tellurian, Inc.; The Psychology Clinic, Inc.; The Rainbow Project, Inc.; Thomas & Associates Services; Triplett 360 Counseling, LLC; Triquestrian, LLC; True Believers, LLC.

5. *Medication management* activities include: medication evaluation to diagnosis and specify target symptoms; prescribing medication to alleviate the identified symptoms; medication monitoring for changes in the member's symptoms and tolerability of side effects; individual client education to increase the member's understanding of the benefits of the medication and symptoms being treated and supporting the member in taking his or her medication. This also includes reviewing data, including other medications used to make medication decisions.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services, Inc; ASPIRES247, LLC; Badger Care LLC; Better Bee, Inc.; Community Living Alliance, Inc.; Deeper Insights LLC; Ease-of-Mind Mental Health Solutions, LLC; Edelweiss Behavioral Health LLC; Elite Cognition, LLC; Essence Realized LLC; Forward Learning Youth and Young Adults LLC; Golden Mend Wellness and Consulting LLC; HealthyMinds, LLC; Hope Inspired LLC; Horizon High School of Madison, Inc.; Journey Mental Health Center, Inc.; Kabba Recovery Services; Mercyland Psychiatry, Inc.; Monarch Addiction Recovery Clinics, S.C.; Natures Ark Behavioral Health Services LLC; Neu K; Orchestra X; Our Generations LLC; Pecku Anchored AFC LLC; RISE Wisconsin, Inc.; Sankofa Educational Leadership United Company; SOAR Case Management Services, Inc.; Stay Focused Counseling LLC; Tellurian, Inc.; The Hmong Institute; The Psychology Clinic, Inc.; Triquestrian, LLC; True Believers, LLC; Wisconsin Family Mental Balance LLC.

6. *Physical health monitoring* services include activities related to the monitoring and management of a member's physical health. This may include assisting and training the member and the member's family to identify symptoms of physical health conditions, monitoring physical health medications and treatments, and developing health monitoring and management skills.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services, Inc; ASPIRES247, LLC; Badger Care LLC; Better Bee, Inc.; Capital Minds, LLC; Catalyst for Change; Community Counseling Center of Madison WI, Inc.; Community Living Alliance, Inc.; Cornucopia, Inc; Deeper Insights LLC; Ease-of-Mind Mental Health Solutions, LLC; Elite Cognition, LLC; Forward Learning Youth and Young Adults LLC; Golden Mend Wellness and Consulting LLC; HealthyMinds, LLC; Hope Inspired LLC; Horizon High School of Madison, Inc.; Housing Initiatives, Inc; Insight Counseling & Wellness, LLC; Journey Mental Health Center, Inc.; Mercyland Psychiatry, Inc.; Monarch Addiction Recovery Clinics, S.C.; Natures Ark Behavioral Health Services LLC; Neu K; New Growth Mental Health Counseling, LLC; Orchestra X; Our Generations LLC; Pecku Anchored AFC LLC; RISE Wisconsin, Inc.; Sankofa Educational Leadership United Company; SOAR Case Management Services, Inc.; Tellurian, Inc.; The Hmong Institute; The Psychology Clinic, Inc.; Triplett 360 Counseling, LLC; Triquestrian, LLC; True Believers, LLC; Venus Inspires LLC (prev. R U Fit).

7. *Peer supports* services include a wide range of supports to assist the member and the member's family with mental health and/or substance abuse issues in the recovery process. These services promote wellness, self-direction, and recovery by enhancing the skills and abilities of members to meet their chosen goals.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services, Inc; Chrysalis Inc.; Connections Counseling LLC; Cornucopia, Inc.; EmployAbility: Employment and Housing Solutions, LLC; Employment Resources, Inc.; Grand Journey, LLC; HealthyMinds, LLC; Hope Inspired LLC; Horizon High School of Madison, Inc.; Housing Initiatives, Inc; Journey Mental Health Center, Inc.; Keeping Families Together LLC; Lutheran Social Services; Madison Trauma Therapy; Monarch Addiction Recovery Clinics, S.C.; Orchestra X; Our Generations LLC; RISE Wisconsin, Inc.; Safe Communities; Sankofa Educational Leadership United Company; SOAR Case Management Services, Inc.; Tellurian, Inc.; The Hmong Institute; Thomas & Associates Services; Triquestrian, LLC.

8. *Individual skill development and enhancement* services include training in communication, interpersonal skills, problem solving, decision-making, self-regulation, conflict resolution, and other specific needs identified in the member's service plan. Services also include training in daily living skills related to personal care, household tasks, financial management, transportation, shopping, parenting, accessing and connecting to community resources and services (including health care services), and other specific daily living needs identified in the member's service plan.

Services provided to minors also focus on improving integration into and interaction with the minor's family, school, community, and other social networks. Services include assisting the minor's family in gaining skills to assist the minor with individual skill development and enhancement.

Current service providers include: Anesis Center for Marriage and Family Therapy; Anu Family Services, Inc.; ARC Community Services, Inc; ASPIRES247, LLC; Badger Care LLC; Better Bee, Inc.; Capital Minds, LLC; Cascading Waters LLC; Catalyst for Change; Children's Therapy Network; Chrysalis Inc.; Collective Voices; Common Threads Family Resource Center, LTD; Community Care Programs, Inc.; Community Counseling Center of Madison WI, Inc.; Community Living Alliance, Inc.; Cornucopia, Inc; Creative Forces Therapy, LLC; Driftless Counseling, LLC dba Trailhead Therapy and Mentoring; Dyer Multisensory Approach, LLC; Ease-of-Mind Mental Health Solutions, LLC; Elite Cognition, LLC; EmployAbility: Employment and Housing Solutions, LLC; Employment Resources, Inc.; Essence Realized LLC; Family Service Madison, Inc.; Forward

Counseling and Consultation, LLC; Forward Learning Youth and Young Adults LLC; Foundations Counseling Center, Inc.; Four Winds Counseling, LLC; Golden Mend Wellness and Consulting LLC; Goodwill Industries of South Central Wisconsin, Inc.; Grand Journey, LLC; Greenroot Yoga LLC; Hancock Center for Creative Arts Therapies, Inc.; HealthyMinds, LLC; Hope Inspired LLC; Horizon High School of Madison, Inc.; Housing Initiatives, Inc.; Imagine a Child's Capacity LLC; Insight Counseling & Wellness, LLC; Jason C Smith MA LMFT LLC; Journey Mental Health Center, Inc.; Kabba Recovery Services; Keeping Families Together LLC; Lutheran Social Services; Madison Trauma Therapy; Manifest Wellness, LLC; Mosaic Consulting, LLC; Natures Ark Behavioral Health Services LLC; Neu K; New Growth Mental Health Counseling, LLC; Open Door Center for Change, LLC; Orchestra X; Orion Family Services; Our Generations LLC; Pecku Anchored AFC LLC; Rape Crisis Center, Inc.; RISE Wisconsin, Inc.; Sankofa Educational Leadership United Company; SOAR Case Management Services, Inc.; Stay Focused Counseling LLC; Tellurian, Inc.; The Hmong Institute; The Psychology Clinic, Inc.; The Rainbow Project, Inc.; Thomas & Associates Services; Trailways LLC; Triplett 360 Counseling, LLC; Triquestrian, LLC; True Believers, LLC; Venus Inspires LLC (prev. R U Fit); Wildflower Expressive Arts Therapies; Winding Path Psychotherapy, LLC; Wisconsin Family Mental Balance LLC.

9. *Employment-related skill training* services address the member's illness or symptom-related problems in finding, securing, and keeping a job. Services may include, but are not limited to: employment and education assessments; assistance in accessing or participating in educational and employment-related services; education about appropriate job-related behaviors; assistance with job preparation activities such as personal hygiene, clothing, and transportation; on-site employment evaluation and feedback sessions to identify and manage work-related symptoms; assistance with work-related crises; and individual therapeutic support.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services, Inc; ASPIRES247, LLC; Better Bee, Inc.; Catalyst for Change; Chrysalis Inc.; Common Threads Family Resource Center, LTD; Community Care Programs, Inc.; Community Counseling Center of Madison WI, Inc.; Community Living Alliance, Inc.; Cornucopia, Inc; Driftless Counseling, LLC dba Trailhead Therapy and Mentoring; Elite Cognition, LLC; EmployAbility; Employment and Housing Solutions, LLC; Employment Resources, Inc.; Essence Realized LLC; Family Service Madison, Inc.; Forward Counseling and Consultation, LLC; Forward Learning Youth and Young Adults LLC; Goodwill Industries of South Central Wisconsin, Inc.; Grand Journey, LLC; HealthyMinds, LLC; Hope Inspired LLC; Horizon High School of Madison, Inc.; Housing Initiatives, Inc; Journey Mental Health Center, Inc.; Keeping Families Together LLC; Natures Ark Behavioral Health Services LLC; Neu K; New Growth Mental Health Counseling, LLC; Orchestra X; Our Generations LLC; Pecku Anchored AFC LLC; RISE Wisconsin, Inc.; Sankofa Educational Leadership United Company; SOAR Case Management Services, Inc.; Stay Focused Counseling LLC; Tellurian, Inc.; The Hmong Institute; Thomas & Associates Services; Triquestrian, LLC; True Believers, LLC; Wisconsin Family Mental Balance LLC.

10. *Individual and/or Family Psychoeducation* services include:

- Providing education and information resources about the member's mental health and/or substance abuse issues.
- Skills training.
- Problem solving.
- Ongoing guidance about managing and coping with mental health and/or substance abuse issues.
- Social and emotional support for dealing with mental health and/or substance abuse issues.

Current service providers include: Anesis Center for Marriage and Family Therapy; Anu Family Services, Inc.; ARC Community Services, Inc; ASPIRES247, LLC; Badger Care LLC; Better Bee,

Inc.; Capital Minds, LLC; Cascading Waters LLC; Catalyst for Change; Children's Service Society of Wisconsin; Children's Therapy Network; Collective Roots Psychotherapy LLC; Collective Voices; Common Threads Family Resource Center, LTD; Community Care Programs, Inc.; Community Counseling Center of Madison WI, Inc.; Community Living Alliance, Inc.; Creative Forces Therapy, LLC; Deeper Insights LLC; Driftless Counseling, LLC dba Trailhead Therapy and Mentoring; Ease-of-Mind Mental Health Solutions, LLC; Edelweiss Behavioral Health LLC; Elite Cognition, LLC; EmployAbility: Employment and Housing Solutions, LLC; Essence Realized LLC; Family Service Madison, Inc.; Forward Counseling and Consultation, LLC; Forward Learning Youth and Young Adults LLC; Foundations Counseling Center, Inc.; Four Winds Counseling, LLC; Golden Mend Wellness and Consulting LLC; Goodwill Industries of South Central Wisconsin, Inc.; Grand Journey, LLC; Greenroot Yoga LLC; Hancock Center for Creative Arts Therapies, Inc.; HealthyMinds, LLC; Hope Inspired LLC; Horizon High School of Madison, Inc.; Imagine a Child's Capacity LLC; Insight Counseling & Wellness, LLC; Jason C Smith MA LMFT LLC; Journey Mental Health Center, Inc.; Kabba Recovery Services; Keeping Families Together LLC; Lutheran Social Services; Madison Trauma Therapy; Maleck Therapy LLC; Manifest Wellness, LLC; Mercyland Psychiatry, Inc.; Michelle Ayres LLC; Monarch Addiction Recovery Clinics, S.C.; Moontree Psychotherapy Center LLC; Mosaic Consulting, LLC; Natures Ark Behavioral Health Services LLC; Neu K; New Growth Mental Health Counseling, LLC; Open Door Center for Change, LLC; Orchestra X; Orion Family Services; Our Generations LLC; Pecku Anchored AFC LLC; Rainbow Marifrog, LLC; Rape Crisis Center, Inc.; RISE Wisconsin, Inc.; Samaritan Counseling Center of Southern Wisconsin; Sankofa Educational Leadership United Company; SOAR Case Management Services, Inc.; Stay Focused Counseling LLC; Tellurian, Inc.; The Hmong Institute; The Psychology Clinic, Inc.; The Rainbow Project, Inc.; Think & Grow LLC; Thomas & Associates Services; Trailways LLC; Triplett 360 Counseling, LLC; Triquestrian, LLC; True Believers, LLC; Venus Inspires LLC (prev. R U Fit); Wildflower Expressive Arts Therapies; Winding Path Psychotherapy, LLC; Wisconsin Family Mental Balance LLC.

11. *Wellness management and recovery* services, which are generally provided as mental health services, include empowering members to manage their mental health and/or substance abuse issues, helping them develop their own goals, and teaching them the knowledge and skills necessary to help them make informed treatment decisions. These services include: psychoeducation; behavioral tailoring; relapse prevention; development of a recovery action plan; recovery and/or resilience training; treatment strategies; social support building; and coping skills.

Recovery support services include: assisting the member in increasing engagement in treatment, developing appropriate coping strategies, and providing aftercare and assertive continuing care. Continuing care includes relapse prevention support and periodic follow-ups and is designed to provide less intensive services as the member progresses in recovery.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services, Inc; ASPIRES247, LLC; Badger Care LLC; Better Bee, Inc.; Capital Minds, LLC; Catalyst for Change; Community Care Programs, Inc.; Community Counseling Center of Madison WI, Inc.; Community Living Alliance, Inc.; Cornucopia, Inc.; Driftless Counseling, LLC dba Trailhead Therapy and Mentoring; Ease-of-Mind Mental Health Solutions, LLC; Elite Cognition, LLC; Essence Realized LLC; Family Service Madison, Inc.; Forward Counseling and Consultation, LLC; Forward Learning Youth and Young Adults LLC; Golden Mend Wellness and Consulting LLC; Greenroot Yoga LLC; HealthyMinds, LLC; Hope Inspired LLC; Horizon High School of Madison, Inc.; Imagine a Child's Capacity LLC; Insight Counseling & Wellness, LLC; Journey Mental Health Center, Inc.; Kabba Recovery Services; Lutheran Social Services; Manifest Wellness, LLC; Mercyland Psychiatry, Inc.; Monarch Addiction Recovery Clinics, S.C.; Moontree Psychotherapy Center LLC; Natures Ark Behavioral Health Services LLC; Neu K; New Growth Mental Health Counseling, LLC; Orchestra X; Our Generations LLC; RISE Wisconsin, Inc.; Safe Communities; Sankofa Educational Leadership United Company; SOAR Case Management Services, Inc.; Stay Focused Counseling LLC; Tellurian, Inc.; The Hmong Institute; The Rainbow Project, Inc.; Thomas

& Associates Services; Trailways LLC; Triplett 360 Counseling, LLC; Triquestrian, LLC; True Believers, LLC; Venus Inspires LLC (prev. R U Fit); Winding Path Psychotherapy, LLC.

12. *Psychotherapy* includes the diagnosis and treatment of mental, emotional, or behavioral disorders, conditions, or addictions through the application of methods derived from established psychological or systemic principles for the purpose of assisting people in modifying their behaviors, cognitions, emotions, and other personal characteristics, which may include the purpose of understanding unconscious processes or intrapersonal, interpersonal, or psychosocial dynamics.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services, Inc; Cascading Waters LLC; Children's Service Society of Wisconsin; Children's Therapy Network; Collective Roots Psychotherapy LLC; Common Threads Family Resource Center, LTD; Community Care Programs, Inc.; Community Counseling Center of Madison WI, Inc.; Community Living Alliance, Inc.; Connections Counseling LLC; Creative Forces Therapy, LLC; Deeper Insights LLC; Driftless Counseling, LLC dba Trailhead Therapy and Mentoring; Ease-of-Mind Mental Health Solutions, LLC; Edelweiss Behavioral Health LLC; Elite Cognition, LLC; Family Service Madison, Inc.; Forward Counseling and Consultation, LLC; Forward Learning Youth and Young Adults LLC; Foundations Counseling Center, Inc.; Four Winds Counseling, LLC; Ginko Counseling Services, LLC; Golden Mend Wellness and Consulting LLC; Grand Journey, LLC; Hancock Center for Creative Arts Therapies, Inc.; HealthyMinds, LLC; Hope Inspired LLC; Housing Initiatives, Inc; Imagine a Childs Capacity LLC; Insight Counseling & Wellness, LLC; Jason C Smith MA LMFT LLC; Journey Mental Health Center, Inc.; Kabba Recovery Services; Keeping Families Together LLC; Lutheran Social Services; Madison Trauma Therapy; Maleck Therapy LLC; Manifest Wellness, LLC; Mercyland Psychiatry, Inc.; Michelle Ayres LLC; Monarch Addiction Recovery Clinics, S.C.; Moontree Psychotherapy Center LLC; Neu K; New Growth Mental Health Counseling, LLC; Open Door Center for Change, LLC; Orchestra X; Orion Family Services; Our Generations LLC; Rainbow Marifrog, LLC; Rape Crisis Center, Inc.; RISE Wisconsin, Inc.; Samaritan Counseling Center of Southern Wisconsin; Sankofa Educational Leadership United Company; SOAR Case Management Services, Inc.; Stay Focused Counseling LLC; Tellurian, Inc.; The Hmong Institute; The Psychology Clinic, Inc.; The Rainbow Project, Inc.; Think & Grow LLC; Thomas & Associates Services; Trailways LLC; Triplett 360 Counseling, LLC; Triquestrian, LLC; Wildflower Expressive Arts Therapies; Winding Path Psychotherapy, LLC.

13. *Substance abuse treatment* services include day treatment (DHS 75.12, Wis. Admin. Code) and outpatient substance abuse counseling (DHS 75.13, Wis. Admin. Code). Substance abuse treatment services can be in an individual or group setting. The other categories in the service array also include psychosocial rehabilitation substance abuse services that support members in their recovery.

Current service providers include: Anesis Center for Marriage and Family Therapy; ARC Community Services, Inc; Badger Care LLC; Catalyst for Change; Community Counseling Center of Madison WI, Inc.; Connections Counseling LLC; Edelweiss Behavioral Health LLC; Forward Counseling and Consultation, LLC; Four Winds Counseling, LLC; HealthyMinds, LLC; Hope Inspired LLC; Insight Counseling & Wellness, LLC; Journey Mental Health Center, Inc.; Kabba Recovery Services; Keeping Families Together LLC; Madison Trauma Therapy; Maleck Therapy LLC; Manifest Wellness, LLC; Mercyland Psychiatry, Inc.; Monarch Addiction Recovery Clinics, S.C.; Moontree Psychotherapy Center LLC; New Growth Mental Health Counseling, LLC; Open Door Center for Change, LLC; Orchestra X; Our Generations LLC; Rape Crisis Center, Inc.; Sankofa Educational Leadership United Company; SOAR Case Management Services, Inc.; Stay Focused Counseling LLC; Tellurian, Inc.; The Hmong Institute; The Psychology Clinic, Inc.; Thomas & Associates Services; Triquestrian, LLC; True Believers, LLC; Winding Path Psychotherapy, LLC.

Anticipated Service Needs of Potential Consumers – DHS 36.07(4)(a)1.

The anticipated service needs of potential CCS members, including minors and the elderly, based upon the assessment domains identified in s. DHS 36.16(4) are delineated in Table 2.

Treatment Interventions to Address Needs – DHS 36.07(4)(a)2.

The anticipated treatment interventions to address the needs of potential CCS members, including minors and the elderly, based up based upon the assessment domains identified in s. DHS 36.16(4) are delineated in Table 2.

Methods to Identify and Contract with Service Providers – DHS 36.07(4)(b)

Dane County has an open provider network of services designed to meet the needs of CCS enrollees. CCS administrative staff continuously monitor the extent to which the CCS program maintains an adequate array and capacity of services to meet the needs of CCS members.

The criteria for recruiting and contracting with providers of psychosocial rehabilitation services include:

- a. Determination that a need exists for the service;
- b. Announcement of the need for services through the mental health system;
- c. Application by service providers to become a part of the network including assurances of compliance with the relevant rules and regulations under DHS 36 and other applicable federal and state requirements, as well as, the ability to comply with the County reporting requirements to establish centralized administrative and service records;
- d. Ability to comply with the County's purchasing requirements;
- e. Screening of potential service providers for recovery focus; use of evidence-based practices; knowledge and expertise in the relevant service categories; compliance with the applicable regulations of DHS 36 – Subchapter IV – Personnel. – including review and affirmation of compliance with non-discrimination in employment practices, possession of appropriate credentials and licenses/certifications, completion of background checks, adequate supervision and clinical collaboration, orientation and training;
- f. Approval of the service provider by the CCS Administrator;
- g. Approval of the proposed contract by the County's administrative structure – i.e., risk management, Corporation Counsel, etc.

Table 2: Anticipated Service Needs and Treatment Interventions – DHS 36.07(4)(a)1.& 2.

Evidence-based practices will be used to the extent possible.

Assessment Domain	Anticipated Service Needs			Treatment Interventions		
	General	Minors	Elderly	General	Minors	Elderly
Life Satisfaction	Assistance to identify and achieve or make progress toward life goals.	Assistance to identify and achieve or make progress toward life goals.	Assistance to identify and achieve or make progress toward life goals.	Person-centered planning and service facilitation.	Person-centered planning and service facilitation.	Person-centered planning and service facilitation.
Basic Needs	Assistance with meeting basic needs for food, clothing, utility payments, etc. Note: Housing and transportation are addressed in separate sections.	Assistance to the family with meeting basic needs for food, clothing, utility payments, etc. Note: Housing and transportation are addressed in separate sections.	Assistance with meeting basic needs for food, clothing, utility payments, etc. Note: Housing and transportation are addressed in separate sections.	Screening and assessment, person centered planning, and service facilitation to help the member obtain necessary services.	Screening and assessment, person centered planning, and service facilitation to help the minor, and/or the minor's family to obtain necessary services.	Screening and assessment, person centered planning, and service facilitation to help the member obtain necessary services.
Social Network and Family Involvement	Assistance with becoming involved in the community, having positive relationships with family members, having friends and intimate relationships.	Assistance with becoming involved in the community, having positive relationships with family members, having friends and intimate relationships.	Assistance with becoming involved in the community, having positive relationships with family members, having friends and intimate relationships.	Peer supports and individual skill development.	Peer supports, psychotherapy, family psychoeducation, and individual skill development and enhancement. This may include referral and linkages to other DCDHS funded services, such as youth centers, the Neighborhood Intervention Program (NIP), etc.	Peer supports and individual skill development. This may include referral and linkages with senior centers.

Assessment Domain	Anticipated Service Needs			Treatment Interventions		
	General	Minors	Elderly	General	Minors	Elderly
Community Living Skills	Assistance with obtaining the skills and supports necessary to live safely and independently in the community.	Assistance with obtaining the skills necessary to live safely in their home and community.	Assistance with obtaining the skills and supports necessary to live safely in their home and community.	Individual skill development	Individual skill development, parent skill training	Individual skill development and referral and linkages with services for persons who are elderly and/or disabled, such as personal care and/or home chore assistance, meals on wheels, etc.
Housing Issues	Assistance with obtaining and maintaining safe and affordable housing.	Assistance with obtaining and maintaining safe and affordable housing.	Assistance with obtaining and maintaining safe and affordable housing, including obtaining residential supports necessary to maintain the individual in his/her own home for as long as desired.	<p>Person centered planning, service facilitation, and individual skill development and enhancement funded through CCS.</p> <p>Other residential supports such as adult family homes, group homes, and community-based residential facilities may be funded outside of CCS.</p>	<p>Person centered planning, service facilitation, and individual skill development and enhancement funded through CCS.</p> <p>Other residential supports such as foster homes, treatment foster homes, group homes, and residential treatment centers may be funded outside of CCS.</p>	<p>Person centered planning and service facilitation funded through CCS.</p> <p>Other residential supports such as adult family homes, group homes, and community-based residential facilities may be funded outside of CCS.</p>
Employment	Assistance with qualifying for, finding, securing, and retaining a job. Assistance with coordination of benefits so that	Assistance with preparing for and finding a job.	To have meaningful, constructive daily activities.	Employment and education assessments; education about appropriate job related behaviors; job preparation	Employment and education assessments; education about appropriate job related behaviors;	Person centered planning, service facilitation, with referral and linkages to other services as needed.

Assessment Domain	Anticipated Service Needs			Treatment Interventions		
	General	Minors	Elderly	General	Minors	Elderly
	health/medical/ and/or SSI or other benefits are not lost.			activities; employment related skill training to find, secure, and retain a job; on-the-job support; assistance with work related crises; IPS supported employment.	job preparation activities.	
Education	Assistance to identify and achieve educational goals.	Assistance to identify and achieve educational goals.	To have meaningful, constructive daily activities.	Individual skill development and enhancement.	Individual skill development and enhancement.	Individual skill development and enhancement.
Finances and Benefits	Having an income sufficient to meet one's daily needs for food, clothing, shelter, and transportation.	Having an income sufficient to meet one's daily needs for food, clothing, shelter, and transportation.	Having an income sufficient to meet one's daily needs for food, clothing, shelter, and transportation.	Education of and assistance with obtaining needed benefits.	Education of and assistance with obtaining needed benefits.	Education of and assistance with obtaining needed benefits.
Mental Health	Symptom identification and management. To develop coping skills to manage one's mental health. To maintain mental health stability.	Symptom identification and management. To develop coping skills on an individual and family basis to manage and support the individual's mental health. To maintain mental health stability.	Symptom identification and management. To develop coping skills to manage one's mental health. To maintain mental health stability.	Diagnostic evaluations, illness management and recovery, psychotherapy	Diagnostic evaluations, illness management and recovery, psychotherapy	Diagnostic evaluations, illness management and recovery, psychotherapy
Physical Health	Need to address and monitor physical health issues and to receive adequate	Need to address and monitor physical health issues and to receive adequate	Need to address and monitor physical health issues and to receive adequate	Physical health monitoring and referrals to needed services.	Physical health monitoring and referrals to needed services.	Physical health monitoring and referrals to needed services.

Assessment Domain	Anticipated Service Needs			Treatment Interventions		
	General	Minors	Elderly	General	Minors	Elderly
	routine health and dental care.	routine health and dental care.	routine health and dental care.			
Substance Use	To maintain sobriety. Identification, intervention, and treatment of substance use disorder issues.	Identification, intervention, and treatment of substance use disorder issues.	To maintain sobriety. Identification, intervention, and treatment of substance use disorder issues.	Diagnostic evaluations, individual psychoeducation, psychotherapy, day treatment, and outpatient substance counseling.	Diagnostic evaluations, individual and/or family psychoeducation, psychotherapy, day treatment, and outpatient substance counseling.	Diagnostic evaluations, individual psychoeducation, psychotherapy, day treatment, and outpatient substance counseling.
Trauma and significant life stressors	Persons are free from abuse in their daily living and treatment environments and relationships and are able to address trauma and life stressors which continue to impact their lives.	Persons are free from abuse in their daily living and treatment environments and relationships and are able to address trauma and life stressors which continue to impact their lives.	Persons are free from abuse in their daily living and treatment environments and relationships and are able to address trauma and life stressors which continue to impact their lives.	Recovery planning; service facilitation, illness management and recovery/ recovery support services; psychotherapy; individual and/or family psychoeducation;	Recovery planning; service facilitation, illness management and recovery/ recovery support services; psychotherapy; individual and/or family psychoeducation;	Recovery planning; service facilitation, illness management and recovery/ recovery support services; psychotherapy; individual and/or family psychoeducation;
Medications	Reduce the troublesome symptoms of the mental illness and/or behavior.	Reduce the troublesome symptoms of the mental illness and/or behavior.	Reduce the troublesome symptoms of the mental illness and/or behavior.	Medication management	Medication management	Medication management
Crisis prevention and management	Developing crisis prevention strategies and coordination of crisis services. To reduce stress.	Developing crisis prevention strategies and coordination of crisis services. To reduce stress.	Developing crisis prevention strategies and coordination of crisis services. To reduce stress.	Recovery planning; service facilitation, illness management and recovery/recovery support services; psychotherapy; individual and/or family	Recovery planning; service facilitation, illness management and recovery/ recovery support services; psychotherapy; individual and/or family	Recovery planning; service facilitation, illness management and recovery/ recovery support services; psychotherapy; individual and/or family

Assessment Domain	Anticipated Service Needs			Treatment Interventions		
	General	Minors	Elderly	General	Minors	Elderly
				psychoeducation; medication monitoring	psychoeducation; medication monitoring	psychoeducation; medication monitoring
Legal Status	To address outstanding legal issues and to ensure the safety and well-being of the individual and community.	To address outstanding legal issues and to ensure the safety and well-being of the individual and community.	To address outstanding legal issues and to ensure the safety and well-being of the individual and community.	Individual skill development and enhancement; psychotherapy; substance abuse treatment	Individual skill development and enhancement; psychotherapy; substance abuse treatment	Individual skill development and enhancement; psychotherapy; substance abuse treatment

CCS CONSUMER POLICIES – DHS 36.07(5)

The following is a synopsis of the CCS consumer policies found in the *CCS Policies and Procedures Manual* located on-site at the Dane County Department of Human Services and on the Dane County Department of Human Services website.

Consumer Records – DHS 36.07(5)(a)

Client records will be maintained in accordance with DHS 36.18. Records will be maintained by the Dane County Department of Human Services. Service providers will be required to use, and in the case of large organizations, to electronically submit data to, the County's Mental Health Module. Information to be collected includes the results of the assessment and assessment summary; initial and updated service (recovery) plans, including attendance rosters from service planning sessions; authorization of services; requests by the consumer for changes in services or service provider and the response by the CCS to such a request; service delivery information, discharge summaries and related information, and any other information appropriate for the consumer record.

Confidentiality Requirements – DHS 36.07(5)(b)

Client service records will be maintained pursuant to the confidentiality requirements under HIPAA, s. 51.30 Stats., ch DHS 92 and, if applicable, 42 CFR Part 2.

Timely Exchange of Information Between the CCS and Contracted Agencies – DHS 36.07(5)(c)

All CCS staff will be expected to share information on a timely basis and in accordance with required CCS deadlines. Delivery of information and responses will vary depending on the situation and the type of information but it will happen as quickly as possible. The County's Mental Health Module will facilitate the timely exchange of information between the CCS and contracted agencies.

Consumer Rights – DHS 36.07(5)(d)

The provision of client rights and the monitoring thereof is extremely important in CCS. The additional rights afforded by DHS 36, and explained in CCS policies and procedures, will be highlighted. Those are a) choice in the selection of recovery team members, services and service providers; b) the right to specific, complete and accurate information about proposed services; and, c) for Medical Assistance recipients, the fair hearing process under DHS 104.01 (5), and for others, how to request a review of a CCS determination by the department. Brochures explaining rights and grievance policies are distributed often and displayed in areas where persons/families will see and take them. Requirements for individual providers' adherence to client rights are specified in the Dane County contract and in the CCS Policy & Procedures Manual.

Monitoring Compliance with DHS 36 and Applicable Federal/State Laws – DHS 36.07(5)(e)

Monitoring compliance is the overall responsibility of the CCS Administrator. Compliance will be measured in accordance with DHS 36, 94, and 92 and other applicable administrative codes and state and federal laws. The Mental Health Module of the DCDHS Information System will be used to facilitate that process. The Administrator will maintain oversight and monitoring according to the monitoring plan. Information about compliance reports will be shared with the Coordination Committee at least annually.

Receiving and Making Referrals – DHS 36.07(5)(f)

There are two aspects of referrals: a) receiving referrals for potential applicants and then b) making referrals for services to outside resources. It is planned to have a system whereby potential applicants may knock on any “door” whether it be that of an existing service provider, the Aging and Disability Resource Center (ADRC), the Behavioral Health Resource Center, or other avenue and have a warm connection that provides information regarding the CCS program and helps direct the potential applicant to the centralized intake unit. Records of referrals of the consumer to outside resources will be recorded as part of the case notes in the Mental Health Module.

Communication to the Consumer – DHS 36.07(5)(g)

Communication with applicants and clients about the services offered by CCS will be accommodating to all. An initial communication tool will be the Service Admission Agreement – found in Section H – which explains the nature and purpose of the CCS Program, including the hours of operation, how to obtain crisis services during the hours in which CCS does not operate, staff member titles and responsibilities, consumer rights, and program costs. Every effort will be made to share information with clients.

Cultural Heritage and Primary Language – DHS 36.07(5)(h)

It is the intent of the CCS program to offer services that are person-driven and individually resonant. By definition, this means that services offered must acknowledge and take into account each individual's beliefs, customs and practices. CCS clients and their Service Facilitators will explore culture and language requirements, so that recovery plans reflect their values as well as their needs. Cultural competence of staff and accessibility to services based upon linguistic needs will be assured.

All CCS staff will be expected to discuss, document and provide services in ways that are relevant and understandable to the person from their perspective. Information about the topics of cultural competence and of linguistic accessibility is included on the orientation and training checklists, including an introduction to Title VI federal legislation. Each provider will adhere to a plan for providing interpreters when the client or others in their support system have limited English proficiency, as specified in the Dane County contract and the policy contained in the CCS Policy & Procedures Manual.

Orientation and Training – DHS 36.07(5)(i)

Dane County will develop and provide some, but not all, of the orientation and training required under DHS 36.12 (1)(b) for all staff and volunteers working or billing under CCS. In addition, the County will require documentation from its service providers that each member receives the required number of hours of initial and ongoing training under DHS 36.12

Outreach Services – DHS 36.07(5)(j)

The CCS will assertively reach out to individuals who have mental health or substance use disorders and are in need of comprehensive community services and will provide information about the program and guidelines for eligibility.

Application and Screening – DHS 36.07(5)(k)

Policies and procedures have been developed for Application and Screening in accordance with DHS 36.13, DHS 36.14, and DHS 36.15. The County's CCS Intake Workers will work with applicants to complete

the application and admission agreement, identify any immediate needs, and determine the need for psychosocial rehabilitation services.

Recovery Team Development and Facilitation – DHS 36.07(5)(l)

Following the application, screening, and determination of need for psychosocial rehabilitation services processes, the client will be able to select his/her service facilitation agency from among those that are part of the CCS Program and who have availability.

Per DHS 36.16(7), the recovery team will include the CCS participant; a service facilitator; a mental health professional; and for or persons who have or are suspected of having a substance use issue, a substance abuse professional or a professional who meets the qualification for both a mental health and substance abuse professional; a parent or legal guardian as applicable; and others, such as service providers, family members, natural supports, and advocates as desired by the consumer. The service facilitator will convene the recovery team at least once every six months to review progress and update the recovery plan as needed.

Assessment – DHS 36.07(5)(m)

Assessments and assessment summaries will be developed in compliance with DHS 36.16. Assessments will incorporate the CCS participant's own perspective, in their own words, as well as collateral information. The Mental Health Module of the DCDHS Information System is being modified to capture the required information.

Service Planning – DHS 36.07(5)(n)

Service plans, or Recovery Plans as they are known at the County level, will be developed in accordance with DHS 36.17 and reflected in the consumer service records per DHS 36.18. Plans will flow from the results of the assessment and recognize the needs, hopes, and dreams of the client while taking into consideration each individual's culture, background, and language. To the extent possible, recovery plans will be directed by the CCS participant who will be offered choices in the services and supports that will assist with their recovery and resilience.

Service Coordination, Referrals, and Collaboration – DHS 36.07(5)(o)

The CCS Module of the DCDHS Information System will help facilitate service coordination and collaboration with the network of CCS providers. As services are identified on the recovery plan (service plan) and authorized by the Mental Health Professional and Substance Abuse Professional (as applicable), the service provider identified in the recovery plan will be notified. The Service Facilitator will be responsible for coordinating services and making needed referrals.

Advocacy for the Consumer – DHS 36.07(5)(p)

CCS participants will be encouraged and helped to understand their rights, benefits and services, and to be treated with the respect and dignity they should be afforded. CCS staff will assist persons served in redressing their grievances to the extent they cannot do so for themselves. Peer support specialists may assist the member and his/her family to negotiate the mental health and/or substance abuse systems with dignity, and without trauma.

Support and Mentoring for the Consumer – DHS 36.07(5)(q)

Support and mentoring for CCS participants is built into all aspects of staff/ participant relationships and interactions. Recovery team members will teach and prepare people to work, play and live more independently. Mentoring services per se will not be billed to the CCS, as they are not a covered service.

Discharge Planning and Facilitation – DHS 36.07(5)(r)

Policies and procedures for discharge planning and facilitation have been developed in accordance with DHS 36.17(5). These take into consideration establishing discharge criteria as part of the recovery plan, involuntary and planned discharges, and discharge summaries.

The CCS Module of the DCDHS Information System is being modified to capture this information and provide written discharge summary information. Until the CCS Module is modified, a written Discharge Summary will be completed and shared with the client.

Monitoring and Documentation – DHS 36.07(5)(s)

Program monitoring will be the responsibility of the Service Director. Records will be maintained electronically as part of the CCS Module of the DCDHS Information System which will assist in the monitoring of the CCS Program by the CCS Administrator and Service Director. Records and documentation will be maintained in accordance with DHS 36.18 and DHS 36.12(d).

B. ARRAY OF CCS SERVICES

Name – Program: County of Dane

CCS PSYCHOSOCIAL REHABILITATION (PSR) SERVICE ARRAY – DHS 36.07(4)(a) Chapter DHS 36

Follows the service array and incorporates definitions from ForwardHealth Provider Update, June 2014 No. 2014-42, as well as, definitions from DHS 36.

Assessment Domains	Service Title	Description	Date Developed
All domains	Screening and Assessment	Screening and assessment services include: completion of initial and annual functional screens, determination of need for psychosocial rehabilitation services, and completion of the initial comprehensive assessment, assessment summary and ongoing assessments as needed.	2014-2015
All domains	Recovery Planning (Service Planning)	Recovery planning includes the initial and ongoing development and review of a written plan of the psychosocial rehabilitation services that will be provided or arranged for the member that is based on the individualized assessment of the individual.	2014-2015
All domains	Service Facilitation	Service facilitation includes activities that ensures the member, (and where appropriate for minors, the member's family), receives assessment, service planning, service delivery, and supportive activities in an appropriate and timely manner. It also includes ensuring the service plan and service delivery for each member is coordinated, monitored, and designed to support the individual in a manner that helps the individual achieve the highest possible level of independent functioning. Includes assisting the member in self-advocacy and helping the member obtain other necessary services such as medical, dental, legal, financial, and housing services.	2014-2015
All domains	Diagnostic Evaluations	Diagnostic evaluations include specialized evaluations needed by the member, including, but not limited to: neuropsychological, geropsychiatric, specialized trauma, eating disorder, adolescent behavioral and adolescent alcohol/drug assessment intervention program evaluations in order to determine the appropriate treatment and behavioral interventions and the level of community support needed by the member.	2014-2015

Assessment Domains	Service Title	Description	Date Developed
i, j, k, m, n	Medication Management	Medication management activities will include: medication evaluation to diagnosis and specify target symptoms; prescribing medication to alleviate the identified symptoms; medication monitoring for changes in the member's symptoms and tolerability of side effects; individual client education to increase the member's understanding of the benefits of the medication and symptoms being treated and supporting the member in taking his or her medication. This will also include reviewing data, including other medications used to make medication decisions.	2014-2015
i, j, k, m	Physical Health Monitoring	Physical health monitoring services include activities related to the monitoring and management of a member's physical health. This may include assisting and training the member and the member's family to identify symptoms of physical health conditions, monitoring physical health medications and treatments, and developing health monitoring and management skills.	2014-2015
a, c, d, g, i, k, l, n	Peer Support	Peer supports services include a wide range of supports to assist the member and the member's family with mental health and/or substance abuse issues in the recovery process. These services promote wellness, self-direction, and recovery by enhancing the skills and abilities of members to meet their chosen goals.	2014-2015
a, c, d	Individual Skill Development and Enhancement	<p>Individual skill development and enhancement services include training in communication, interpersonal skills, problem solving, decision-making, self-regulation, conflict resolution, and other specific needs identified in the member's service plan. Services also include training in daily living skills related to personal care, household tasks, financial management, transportation, shopping, parenting, accessing and connecting to community resources and services (including health care services), and other specific daily living needs identified in the member's service plan.</p> <p>Services provided to minors will also focus on improving integration into and interaction with the minor's family, school, community, and other social networks. Services include assisting the minor's family in gaining skills to assist the minor with</p>	2014-2015

Assessment Domains	Service Title	Description	Date Developed
a, f	Employment Related Skill Training	<p>individual skill development and enhancement.</p> <p>Employment-related skill training services address the member's illness or symptom-related problems in finding, securing, and keeping a job. Services may include, but are not limited to: employment and education assessments; assistance in accessing or participating in educational and employment-related services; education about appropriate job-related behaviors; assistance with job preparation activities such as personal hygiene, clothing, and transportation; on-site employment evaluation and feedback sessions to identify and manage work-related symptoms; assistance with work-related crises; and individual therapeutic support.</p>	2014-2015
c, d, i, k	Individual and/or Family Psychoeducation	<p>Psychoeducation services include:</p> <ul style="list-style-type: none"> • Providing education and information resources about the member's mental health and/or substance abuse issues; • Skills training; • Problem solving; • Ongoing guidance about managing and coping with mental health and/or substance abuse issues; • Social and emotional support for dealing with mental health and/or substance abuse issues. 	2014-2015
i, k	Wellness Management and Recovery / Recovery Support Services	<p>Wellness management and recovery services, which are generally provided as mental health services, include empowering members to manage their mental health and/or substance abuse issues, helping them develop their own goals, and teaching them the knowledge and skills necessary to help them make informed treatment decisions. These services include: psychoeducation; behavioral tailoring; relapse prevention; development of a recovery action plan; recovery and/or resilience training; treatment strategies; social support building; and coping skills.</p> <p>Recovery support services include: assisting the member in increasing engagement in treatment, developing appropriate coping strategies, and providing aftercare and assertive continuing care. Continuing care includes relapse prevention</p>	2014-2015

Assessment Domains	Service Title	Description	Date Developed
		support and periodic follow-ups and is designed to provide less intensive services as the member progresses in recovery.	
i, k, l, n	Psychotherapy	Psychotherapy includes the diagnosis and treatment of mental, emotional, or behavioral disorders, conditions, or addictions through the application of methods derived from established psychological or systemic principles for the purpose of assisting people in modifying their behaviors, cognitions, emotions, and other personal characteristics, which may include the purpose of understanding unconscious processes or intrapersonal, interpersonal, or psychosocial dynamics.	2014-2015
k	Substance Abuse Treatment	Substance abuse treatment services include day treatment (DHS 75.12, Wis. Admin. Code) and outpatient substance abuse counseling (DHS 75.13, Wis. Admin. Code). Substance abuse treatment services can be in an individual or group setting. The other categories in the service array also include psychosocial rehabilitation substance abuse services that support members in their recovery.	2014-2015

Assessment Domains Chapter 36.16(4) Identify all domains applicable to each service described in the array.			
(a) Life satisfaction	(e) Housing issues	(i) Mental health	(m) Medications
(b) Basic Needs	(f) Employment	(j) Physical health	(n) Crisis prevention management
(c) Social network, family involvement	(g) Education	(k) Substance use	(o) Legal status
(d) Community living skills	(h) Finances and benefits	(l) Trauma / life stressors	(p) Other identified domains

C. CCS STAFF LISTING

This is a placeholder to retain the layout of this document in accordance with the State's Initial Certification Application. Due to the size of the staff listing, it has been moved to the end of the document and may be found beginning on page 78.

D. QUALITY IMPROVEMENT PLAN - DHS 36.08

CCS Policy/Procedures
Quality Improvement Plan
DHS 36.08

Policy Statement: So that CCS clients and Dane County policy planners have information about compliance with CCS vision and regulations, and individuals' progress toward goals, as well as, overall transformation, a robust and continuous quality improvement plan and review process will be followed.

Discussion

QI indicators will measure:

- a. client satisfaction;
- b. progress toward desired outcomes identified through the assessment process;
and
- c. programmatic compliance and improvement.

Procedures

Confidentiality Procedures

Each client service record will be maintained pursuant to the confidentiality requirements under HIPAA, s. 51.30, Stats., ch DHS 92, and if applicable, 42 CFR Part 2. Information obtained for the purposes of program evaluation shall remain confidential and shall not be used in any way that discloses the names or other identifying information about the individual whose records are being reviewed.

The CCS evaluation requirements dictate that certain client data be provided to the State of Wisconsin through secure means. The same confidentiality requirements listed above apply to the use of that data.

Reports developed by the County regarding client satisfaction, outcomes, and program compliance and improvement will be released in aggregate form only.

Client Satisfaction Surveys:

1. The DCDHS Planning and Evaluation Division will be responsible for conducting client surveys at least annually using the instruments required by the State. These include the Recovery –Oriented Systems Indicators (ROSI), the Youth Satisfaction Survey (YSS) for youth ages 13-17, and the Youth Satisfaction Survey – Families (YSS-F) for families of children 12 and under.

2. Surveys will be administered according to the State guidelines which currently call for

sending out surveys in mid-September to all current CCS clients who have been in CCS for at least 6 months and to clients discharged in the past 6 months who have spent at least 6 months in CCS.

3. Clients will be informed that all responses are confidential, completion of the survey is voluntary, that their opinions are important to improving services, and that strong rules protect them from retaliation, no matter what they wish to say about their services.
4. Surveys will be conducted by mail using discreet unmarked envelopes.
5. Postage paid return envelopes will be provided.
6. If there are sufficient funds, a nominal incentive will be offered to persons completing a survey.
7. To the extent possible, surveys will be made available in alternate languages for persons who speak a language other than English. For clients who do not read or write, attempts will be made to have a neutral person (non-staff) read the questions and write the responses.
8. Data is to be submitted to the State by November 1.
9. DCDHS Planning and Evaluation staff will conduct an analysis of the data and provide a written report to the CCS Administrator, Service Director, and CCS Coordination Committee.

CCS Program Compliance and Improvement:

1. Quality improvement measures will be collected and analyzed to understand progress of CCS toward more fully achieving the goals and outcomes possible through CCS.
2. The CCS Administrator will complete a CCS Program Survey annually, to be submitted to WI DHS in February/March of each year, and presented to the CCS Coordination Committee thereafter.
3. Program measures will include:
 - a. Number of people served
 - b. Use of evidence-based practices
 - c. Use of wait list
 - d. Use of non-traditional services
 - e. Discharge reason and destination
 - f. Consumer grievances
 - g. Compliance with regulations and standards (through state and random

audits conducted by Administrator/designee)

4. Client outcome measures will include:
 - a. Community living skills
 - b. Living situation
 - c. Employment status (>age 15)
 - d. Educational functioning (for children/young adults)
 - e. Hospitalizations, emergency detentions, and ER visits
 - f. Institutionalization
 - g. Commitment status
 - h. Criminal justice involvement (> age 11)
 - i. Substance use
 - j. Co-occurring medical conditions

For All QI Components:

1. DCDHS Planning and Evaluation Division will prepare outcome reports for program and system design improvement measurements annually. All reports will be submitted to the Coordination Committee for its review and recommendations. The Administrator and Service Director will attend the Coordination Committee meeting where feedback and recommendations are given.
2. The Administrator and Service Director will design subsequent quality improvement plans, based on the outcomes and recommendations, designating point persons to carry out tasks and analyze ongoing results.
3. The Chair of the Coordination Committee will have the review of the QI plan progress as an agenda item at least annually at a Coordination Committee meeting.

/QI Policy.doc
Developed: 5.1.2014
Revised: 8.18.2014. Formatting only revised: 8.25.2014
Reviewed by CCS Coordination Committee: 8.20.2014

E. COORDINATION COMMITTEE REPORT - DHS 36.09

Summary: Over the course of a number of meetings, members of the CCS Coordination Committee gave feedback to the Dane County Mental Health Program Specialist who is heading up the CCS Application project. Members received packets of information to be reviewed at least two weeks prior to each meeting and came prepared with suggestions and recommendations. Some suggestions were wording or grammar edits and were quickly agreed to and incorporated. Other recommendations were substantive and often generated discussion. Even where there may have been differences of opinion in detail, there was consensus that the recommendations are included in the listing for County staff to consider and respond to.

A general theme was to make the CCS Plan and its policies clear and usable, both to providers who will be part of the Dane County CCS program and to potential users of CCS services. A second major theme was to convey through the plan and policies the vision of CCS--i.e. that services are recovery-oriented, consumer-driven, and clinically and culturally competent and sensitive.

Significant changes were made to the CCS Plan in July of 2014, subsequent to DHS training and initial feedback from the Division of Quality Assurance (DQA). These changes were reviewed by the CCS Coordination Committee at their August meeting. This summary includes both recommendations made on the initial plan, and additional recommendations/observations made on the revised plan.

The specific recommendations follow.

From 11.13.13 meeting:

Quality Improvement Plan

Consumer Satisfaction Surveys

Look for a way to incorporate a sentence or two about how CCS consumers can have access to the Coordination Committee, especially during consumer satisfaction surveys (might have comments about results or action plans based on the results).

Committee generally liked the idea of gradually introducing and building up to more direct and pointed feedback when introducing consumer satisfaction surveys. However, some also thought there might be benefits to starting with the longer, more specific ROSI. They requested copies of the ROSI so they can make an informed decision about shorter versus longer consumer satisfaction surveys.

Need to build in ways to get responses and for persons served to understand that the CCS will give their responses. Some persons served need motivation to go to the trouble of filling out a survey; all need to trust that their time is valued and their input will be genuinely considered. Ideas included distributing to persons served a summary of the responses received thus closing the feedback loop, assertive outreach to persons served, sharing the action steps that are developed to address issues or concerns raised. One idea that had traction was to create a person-to-person "hook"; i.e., making survey time an event. Consider having tables available in the lobby or "survey drives", maybe with involvement of Coordination Committee members.

There was some feeling that consumers should be encouraged to give feedback or return surveys by giving a token reward (candy bar, free ticket, etc.).

Since the Dane County CCS program is one whole, surveys should be administered at the same time for all clients, possibly allowing staff from one program to help out consumers of another and thus avoiding conflict of interest or the appearance of it.

Need to state how the satisfaction survey questions will be chosen, and persons served should be involved in that choice. The questions need to be used across the CCS program. Not just content but also the language choice will be important.

Might make sense to develop the first set of questions soon, and start asking them as part of the requirements of the quarterly reports at the beginning of the year. Then will have some basis for comparison by the end of the year when we hope CCS has been operating for a while.

Other feedback about the narrative of the Quality Improvement Plan:

Do not use “WRAP” in the narrative unless actually purchasing that tool; instead use the generic term “recovery action plans”.

Change wording to be clear about who will be making final decisions about what issues to address and how. “The management group” is confusing and nonspecific, i.e., say who in the structure actually will make decisions.

Members liked the 3-pronged approach to QI (consumer satisfaction, programmatic compliance and improvement, and system transformation).

The system transformation is vague and needs to be more specific about what programs and areas will be brought in, in what order, and what change is being sought or expected.

Quality Improvement Policy & Procedures:

Under CCS program compliance and improvement, add “number of Releases of Information signed”. This will also give a way to measure if services are collaborating in providing services for participants.

Correction: “advance directives”, not “advanced directives”.

Discussion about how to measure certain indicators such as participants’ own words being used or increased number of diverse providers/natural supports. Determined this could be done by random chart audits by supervisors and/or the CCS Administrator.

Admission Materials

Service (Admission) Packet and Agreement sheet was good. No changes suggested, other than to format like the other P&Ps.

Receipt of Service/Admission Agreement Documents: The sentence about consequences is too harsh and negative. Suggestion is to turn most of the points into positives and list under “benefits” and then say for consequences that if services are not received, the benefits listed may not happen. Also, could list a consequence as not having the array of choice of services or flexibility in another program possibly. Another recommendation was to look at State or SAMHSA outcome data and use it to state benefits that have occurred due to being part of CCS. The “alternatives to CCS” statement needs to be rewritten so as to convey that there are other services that may be as good, more appropriate, or might meet someone’s taste or preferences better.

Overall: be careful of acronyms especially in documents that are given out to consumers/families especially in the early stages of involvement. People won’t necessarily understand CCS, CSP, etc.

For another time: committee would like to discuss the use of the term “consumer”. *

From 12.11.13 Meeting:

Operating Policies and Procedures

Advocacy for and with Persons Served—suggest that it be made explicit that the persons served should be advised that he/she could request a peer specialist be added to his/her team.

Communications with Persons Served—Need to expand: good communication skills are required for *all* staff, not just service facilitators.

Confidentiality—no concerns with the policy itself, but a discussion that exceptions to keeping confidentiality should be highlighted to persons served. Decision of the group was that it is covered in the policy but should also be looked at in admission and informed consent for treatment/services documents.

Cultural Competence and Linguistic Services—suggestion to add gender pronoun/being addressed by name of choice to areas to be explored with the person.

Records of Persons Served—clarify when records room needs to be locked.

Rights and Grievance Procedure-- we need to spell out where and how grievance records are kept and who can access them. In addition to consumer bill or rights being displayed, also should display Grievance Officer's name and phone number.

Item #6 should be the last item in the policy.

Review of ROSI—although the committee understands that it is not within our prevue to change this tool, the request is to give feedback that the gender choices on the demographic section are limiting.

From 1.08.14 Meeting:

Continuation of Policies and Procedures Review

Minimum Qualifications for Staff Positions—discussion about if we wish to have peer specialists be *certified peer specialists*; if not, should we change the title of this position to something else? Also suggested adding, same training requirements for #21 (rehabilitation workers) as for #20 (peer specialists).

Staff Functions and Credentials—Difficult to understand when mental health professionals and/or substance use disorder professionals are required to be present at the team meeting, and what/when signatures are required. Suggested that #1 be reworked. Suggestion that these functions be defined or if defined elsewhere in policies then be referenced.

Supervision and Clinical Collaboration—suggestion that “recovery-oriented” be added to descriptions in two places. Rather than listing various ways the regulations say supervision/collaboration may be documented, say instead “The method of documentation will be the master supervision log maintained by the CCS Administrator” since that will be Dane County’s requirement.

Support and Mentoring for Persons Served—Specify that it is the responsibility of service facilitators to check with persons served about their desire for assistance for particular actions. #2 needs to be clarified. #6 can be deleted.

Strong suggestion that reviewing and keeping current about core competencies should be highlighted somewhere in policies or in the plan; i.e., in training or as a piece of supervision.

Final review of CCS Plan—

Addition of “recovery-oriented” in several places

Strike “normal” from “natural and normal workplaces”

“Peer-run agencies” is adequate, as opposed to “consumer- and peer-run agencies”.

When considering how to ensure that recovery concepts are being consistently applied, consider buying the Common Ground program as a way to evaluate. It is understood that this tool is expensive.

Contract addenda are the county’s mechanism for contracting and paying for services. Strike “MOUs” as they will not be used.

Be careful not to overpromise what agencies can do. E.g., while we want best practice (cultural competence, linguistic services), we also want to make sure that we are not closing smaller agencies with fewer resources out of the process.

* Over the course of January 2014, committee members discussed over the list serve, the use of the term “consumer”. On January 22, 2014 Carrie Simon, as Coordination Committee Chair, called the question. There was unanimous agreement by committee members to use terms other than “consumer” where possible. The preferred alternative was determined to be “client.” A decision was made to change the term in most contexts.

From 8.20.14 meeting:

Revised CCS Plan

The Committee was pleased that the new plan is more broad based, rollout is faster.

Where did the list of possible providers come from? The list is speculative, based on existing POS agencies who provide services that would fit into CCS, definitely does not capture all who might be interested. Recommend outreach to providers outside of existing system.

Recommend that a peer support person be involved in the intake process.

Recommend 2 intake specialists at start-up, to accommodate initial influx

Positive feedback regarding centralized training.

Discussion of incorporating younger people and how to reach out and educate about services

Revised QI Plan

Recommend including Care Center data as an outcome measure

Recommend utilizing the peer network to get the word out about satisfaction surveys.

From 10.22.14 meeting:

Review/Recommendations on Revised CCS Plan, Policies

Discussion of role of MH/SA Professional – immediate supervisory entity above Service Facilitator.

Staff Functions Policy

Recommend putting qualifications before responsibilities. (This change was then made.)

Recommend wording change from “consultation to” to “consultation with” (This change was made).

Discussion of Recruitment to CCS Coordination Committee

Discussed recruiting people with specific expertise, i.e., AODA, kids. (This was done in March/April, 2015).

From 2.18.2015 meeting:

Completed payroll paperwork, introduction of new CCS Administrator, Julie Meister.

Updated on Provider Network Development and upcoming Provider Information Sessions.

Dialogue with consumers of what they would like providers to know.

No new policy/plans reviewed.

From 5.20.2015 meeting:

Reviewed Revised CCS Plan

Overall, easy to read and follow.

Recommend wording change from No Wrong Door – to Any Door Access in section under Client Experience. (Revision made 5.22.2015).

Need to sync language in the Coordination Committee summary sections on pages 11 and 56. (Revision made 5.22.2015).

Application For CCS Services – the footer appears to have decreased the amount of space for the Applicant Signature. This will be checked on the actual application and extra space allotted if needed.

Reviewed Client Handbook

Overall, easy to read and consumer-friendly. Glad to see the section on recovery.

Recommend revising the opening language in the CCS description (p. 4) to be in the first person. (Revision made 5.22.2015)

Recommend adding in a synopsis of the items under the service array. Also add in section to discuss what is not covered under the service array. (Revision made 5.22.2015).

Recommend having less jargon in the section under Intake on determining eligibility. (Revision made 5.22.2015).

Recommend simplifying language in the grievance resolution policy section. (Revision made 5.22.2015).

From 8.18.15 meeting:

Reviewed Coordination Committee Schedule

Recommend increasing meeting frequency now that Dane County CCS has received certification and enrolling clients. Recommend keeping time and place for meetings the same. (Response: Began monthly meetings effective immediately.)

Reviewed Brochure and Client Handbook

Recommend using computer program to assess reading level of handbook, may still be too high. (Response: Assessed reading level September 2015, reading level was 11th grade.)

Other Issues

Recommend Intake Worker come to CCS Coordination Committee meeting to discuss process, functional screen, etc. (Response: Intake worker attended 9.16.15 CCS Coordination Committee meeting.)

From 9.16.15 Meeting:

Reviewed Reading level of Client Handbook

Recommend entire committee look through the client handbook and identify specific words/concepts that should be changed, report back next month. (Response: Reading level calculated, County staff provided copies of handbook for review.)

From 10.21.15 Meeting:

Reviewed and Edited Client Handbook

Recommend specific word changes, format changes, and organization changes. (Response: Changes incorporated into handbook and updated handbook emailed to Coordination Committee for review prior to November meeting.)

From 11.18.15 Meeting:

Reviewed and Edited Client Handbook

Recommend moving "Your Life" section to page 6 and moving program eligibility to beginning of handbook. (Response: Changes incorporated into handbook and updated handbook emailed to Coordination Committee for review prior to December meeting.)

Recommend reducing jargon. (Response: Continue edits as a group in Committee meetings.)

From 12.16.15 Meeting:

Reviewed and Edited Client Handbook

All recommended changes were incorporated during the meeting and updated copies of handbook emailed to Committee members prior to the January meeting.)

From 1.20.16 Meeting:

Reviewed and Edited Client Handbook

All recommended changes were incorporated during the meeting. Recommend handling further edits in a smaller committee due to length of time it is taking to review entire document. (Response: Dorothy, Julie, Anna, and Todd volunteered to meet to revise remainder of handbook. The smaller group met on several occasions to complete edits of handbook and edited handbook was provided to committee at February meeting.)

From 2.17.16 Meeting:

Reviewed edited Client Handbook

Recommend re-checking reading level with computer program. (Rechecked reading level and it remained too high, ~10th grade level.

Recommend translate handbook into Spanish and Hmong. (Will work on this once handbook is finalized.)

Recommend qualitative survey to gauge CCS intake and service experience. (Response: Dane County Planning and Evaluation developed draft survey for committee to review in March meeting.)

From 3.16.16 Meeting:

Final review of Client Handbook before printing

Recommend sending back to work group due to reading level remaining too high. Recommend examining sentence structure. (Response: Dane County staff are working with Committee volunteers to seek input directly from consumers.)

Review of Survey Drafts

Recommended wording changes that were incorporated into draft surveys.

Review of Quality Improvement Plan

Recommend addressing capacity concerns, addressing wait time, increasing availability of psychiatry, and increasing the availability of challenging employment opportunities available to CCS participants. (Response: These recommendations were added to the QI plan.)

From 4.20.16 Meeting:

Due to not having quorum, Committee was unable to conduct business.

From 5.18.16 Meeting:

Review of Meeting Location

Recommend that parking information be sent out to Committee members due to congested area around meeting location and limited parking availability. (Response: Julie compiled map with parking options and sent to Committee members.)

Review of CCS Plan

Plan was approved with one recommendation of not putting staff listing in plan online. (Response: At this point it appears to be necessary to continue to include staff listing as noted in DHS 36.07 (1) (a).)

Review of Quality Improvement Plan

Recommend fix typo of “CCF” to “CCS”. (Response: Error corrected.)

Recommend extension of staff survey deadline to March 2017. (Response: This deadline was changed.)

With aforementioned changes, QI Plan was approved.

From 6.15.16 Meeting:

Did not have quorum at the meeting.

From 9.21.16 Meeting:

Updated on current CCS census. Discussion about reaching out to AODA agencies to attempt to obtain AODA specific service facilitation agency. Discussion of Medication Assisted Treatment and CCS. (Response: Todd Campbell will obtain further clarification from the State on this issue.)

Updated on DQA site visit. 1-year provisional certification to allow for changes to intake processes and for DQA to verify changes made. Coordination committee emphasized their opinion that intake needs to allow consumers time for decision making at their own pace and to preserve consumer choice with regards to SF agency selection. Dane County seeking variance and will update committee when we obtain information on the variance.

Discussion regarding CCS Participant Handbook. New version printed in September 2016 based on listening session feedback from Yahara House members. Discussion regarding modifying the graphic on the CCS Participant Handbook. Committee member volunteered family member to work on this project.

From 10.19.16 Meeting:

Updated on current CCS Census. Discussed reasons for discharge of CCS participants (death, transition to more intensive services, move out of county, didn't want CCS services).

Discussion of denial of variance. Requested Coordination Committee thoughts on what County Staff should keep in mind when redesigning the CCS Intake process. Committee cited the following considerations: intake can be overwhelming and time consuming, some consumers may want the intake process spread over time, important to work at a pace that is comfortable for consumers, make sure that everyone is well informed about CCS with regard to risks and benefits of being in the program, make sure consumers have as much control as possible over which agency they go to, keep the locus of control with the consumer, changing providers is hard, look into hiring a peer support specialist to help with outreach. (Response:

CCS Coordination Committee feedback will be incorporated into new Intake procedures to the greatest extent possible.)

Updated committee on Medication Assisted Treatment and CCS. CCS participants can receive MAT (medications are covered outside of CCS). Therapy component must be provided by CCS providers. This may limit the MAT options for CCS participants. Currently CCS providers that provide MAT are: Connections Counseling, Journey Mental Health Center, and Tellurian.

Updated committee on Certified Peer Specialist training. There are currently no date scheduled for the Peer Specialist training. Provided information regarding mailing list through Access to Independence to committee members.

Committee suggested transitioning to every-other-month meetings and all voted in favor. (Response: Changed meetings to every-other-month.)

From 1.18.17 Meeting:

Updated committee on CCS Participant census. Discussed wait times for CCS services, which vary based on consumer pace and desire for assistance with obtaining Physician's Prescription and selecting an agency. If consumers don't have agency preference, wait time is very short—couple weeks to schedule.

Updated committee on new CCS intake process fully implemented on 1/1/17 to comply with State expectations. Feedback from staff and consumers has been positive. This is seen as an improvement. Continue to value consumer choice and honor consumer pace. (Response: Committee's input from 10.19.16 meeting incorporated into new procedures.)

Reaffirmed Coordination Committee member's interest in continued participation in 2017. All expressed interest in remaining on committee.

Lori Basteau from DCDHS Planning and Evaluation presented results of CCS Client Surveys (ROSI & MHSIP) to the committee and there was discussion of results.

Discussion of QA/QI plan and Coordination Committee provided feedback to add to the current QA/QI plan increasing outreach to schools along with increasing services in outlying areas (outside the City of Madison). (Response: CCS Coordination Committee input incorporated into updated QA/QI plan.)

From 3.15.17 Meeting:

Updated committee on CCS Participant census. Discussed reasons for discharge from CCS services including client moving out of Dane County, client needing higher level of service, client no longer wanting services, client death.

Updated committee on Provider Network and training of new CCS staff.

Spent time reviewing QA/QI Plan. Committee requested to add outlying areas (outside of Madison) to #7. (Response: added content.) Discussion of availability of substance abuse services and added increasing SUD services to QI plan. (Response: added content to QA/QI plan.) Discussion of when it is determined that SUD is primary. At this time there is no designation of which is primary, MH or substance abuse, both are included diagnoses. There is, however, designation of need for Substance Abuse Professional. Committee questioned whether most of the people in CCS are not identifying SUD as an issue they want to work on. (Response: County staff will obtain numbers and report back at May meeting.) #10, County staff will be responsible for this, ensuring that CCS materials are available in settings where people will see them. (Response: Detail regarding #10 will be added to capture discussion of issues of access and awareness of CCS in the community.) Committee would like to find out where people are finding out about CCS. Recommendation to add #11, increasing service options for people that have primary SUD.

(Response: added.) After discussion of addition, committee moved to approve QA/QI plan. Plan with changes specified above was approved by the committee.

Spent time reviewing CCS Plan. Reviewed all changes made to the CCS Plan since the last update with the committee. It was suggested to add an alphabetical index by subject, however committee ultimately decided against this idea due to there being other, more efficient, means for clients and providers to access the same information. After discussion, committee moved to approve CCS Plan. CCS Plan was approved by coordination committee.

From 5.17.17 Meeting:

Updated committee on CCS Participant census and number of CCS participants and percentage with substance use disorders. Updated committee on CCS Provider Network, ongoing training of new CCS personnel. CCS Administrative Assistant started in April and CCS Program Analyst is being hired. Dane County CCS DQA site visit scheduled for June 6, 2017.

Peer specialist trainings have been posted, includes new curriculum.

Discussion of QA/QI Plan. CCS Administrator received education system contact information from committee member. Discussed service facilitation for individuals with primary substance use disorder. Committee requested exploring reasons for discharge and reasons potential participants don't follow through with Intake Unit beyond initial call. Intake Social Worker will attend upcoming meeting. (Response: Once analyst starts will obtain discharge data to provide to coordination committee. Intake worker will come to next meeting to discuss reasons individuals don't enroll in CCS.)

From 7.19.17 Meeting:

Updated committee on CCS Participant census. Discussed specialty trainings provided to CCS Provider Network: Case Management Best Practices, Grief, Loss & Trauma for Children in Out-of-Home Care.

Committee asked questions of CCS Intake Worker, Intake worker explained process. Committee inquired about how intake process works for homeless individuals. Committee interested in data on people of color served by CCS. Committee interested in reviewing the mailing potential participants receive from CCS Intake at initial call. Reviewed with Committee the Intake survey and committee decided to have survey be anonymous and given to CCS participants at time of enrollment. Guest at meeting brought up concern regarding nursing rates in CCS and requested Committee advocate with the State. (Response: Will bring demographic data to committee to review at next meeting. Will bring materials that get mailed out to potential CCS participants for committee to provide feedback at next meeting. Will begin administration of CCS Intake survey. Committee will discuss nursing reimbursement issue at next meeting and decide course of action.)

From 9.20.17 Meeting:

Updated committee on CCS participant census and reviewed CCS statistics by age, sex, race, and ethnicity with Committee. Committee noted low enrollment of individuals of Hispanic background. Reviewed Intake mailing with Committee and answered questions. Committee did not recommend changes. Committee voted not to take up nursing rate issue with State. Informed Committee that Intake survey distribution started 9/1/17.

From 11.15.17 Meeting:

Updated committee on CCS participant census, onboarding of new agencies and new staff. Updated Committee on trainings provided to network since last meeting: Mandated Youth Services and Mandated Reporter. Updated Committee on forms being translated into Spanish. Updated Committee on annual consumer satisfaction survey process, received 20.4% response rate.

Reviewed and revised CCS Coordination Committee Policy/Procedure. Committee recommended no more than two 2-year terms per member, CCS Administrator standing member of committee, Administrator informed Committee that State recommended each member only fulfil one role on committee. Committee recommended reserving last 15 minutes of the meeting for public comment and add guest sign-in to roster to allow adequate time for comment. (Response: All suggestions incorporated.)

From 1.17.18 Meeting:

Updated Committee on CCS participant census, addition of Intake staff in 2018 to accommodate need. Administrator answered Committee questions. CCS Analyst provided synopsis of 2017 consumer satisfaction surveys. Reviewed updated CCS Coordination Committee policy. Committee recommended moving public comment to the beginning of meeting, changing “client” to “consumer”. Reviewed QA/QI Plan with Committee and Committee provided recommended updates to #1-8. Will continue progress at next meeting. (Response: All recommended updates incorporated into the updated plan.)

From 3.21.18 Meeting:

Updated Committee on CCS participant census and training of CCS staff. Provided Committee with copy of updated CCS Coordination Committee policy. Completed review of QA/QI plan with Committee. Committee suggested adding #11, increased outreach efforts to groups identified as being underrepresented in CCS. Committee reviewed QA/QI plan in its entirety and approved. (Response: All Committee recommendations incorporated into updated QA/QI Plan.)

From 5.15.18 Meeting:

Updated Committee on CCS participant census and onboarding/training of new CCS staff. Updated Committee on increased number of DCDHS CCS Intake Workers—now at 8. Committee discussed Provider Survey and identified themes they would like to survey. Administrator and Analysis will bring draft to next meeting for review. (Response: All Committee recommendations were incorporated into the survey.)

From 7.18.18 Meeting:

Updated committee on CCS participant census, increased quality assurance efforts, addition of Cultural Competence to initial orientation and training, and onboarding of Intake Supervisor. Updated Committee on new data being tracked in the CCS Module regarding discharge reasons. Analyst reviewed results of CCS Intake Survey. Analyst reviewed draft of CCS Provider Survey. Committee eliminated duplicate questions. Analyst and Administrator will bring updated draft to next meeting for review. Committee voted to add an August meeting due to survey project. (Response: All suggestions from Committee incorporated into the survey. Scheduled additional August 2018 Coordination Committee Meeting.)

From 8.22.18 Meeting:

Updated Committee on CCS participant census and recruitment of Bilingual Hmong CCS Intake Worker. Reviewed templates for CCS Assessment and Assessment Summary with Committee. Committee was split on which version of the Assessment Summary they preferred. 0 members preferred the longest version with every domain, 4 members preferred the long version with only applicable domains, and 2 members preferred the short version. Administrator will share Committee preferences with the IT team and Assessment workgroup. Reviewed updated Provider Survey with Committee and incorporated feedback. Analyst will load survey into Survey Monkey for Committee to test prior to next meeting. (Response: All Committee suggestions were incorporated.)

From 9.19.18 Meeting:

Updated Committee on CCS participant census, staff training, and recruitment of Bilingual Hmong CCS Intake Worker. Analyst reviewed updated Provider Survey and obtained additional feedback on wording. Committee recommended adding Certified Peer Specialist as an education level for survey. Committee recommended ensuring that staff can't be individually identified based on results. Analyst reviewed data on reasons for client discharge with Committee. Committee requested additional data on length of time participants are in CCS and length in time sorted by diagnosis.

Continued work on QA/QI plan goals. Administrator updated that agencies have maintained sufficient capacity to accept referrals, so this is not a barrier to enrollment. Committee would like to work on Housing Instability goal next (#9). Committee would like to have more information on housing challenges in Dane County and understand percentage of homeless population that experiences challenges with mental health/substance use. Administrator will attempt to arrange guest speaker from Homeless Services Consortium for next meeting. (Response: Committee suggestion to work on goal #9 next pursued.)

From 11.14.18 Meeting:

Updated Committee on CCS participant census. Analyst reviewed the following data with Committee: housing arrangements of participants, employment status of participants, length of time enrolled in CCS, diagnosis of individuals discharged. (Response: No response needed.)

From 1.16.19 Meeting:

Updated Committee on CCS participant census and hiring of Bilingual Hmong CCS Intake worker. Presentation from Homeless Services Consortium. Committee reviewed QA/QI plan for updates and made changes to plan. Committee recommended adding goal to increase collaboration among CCS provider agencies. Committee removed #4 and added goal involving CCS Residential Treatment for Substance Use Disorders. (Response: All Committee suggestions that achieved agreement were incorporated.)

From 3.20.19 Meeting:

Updated Committee on CCS participant census, introduced CCS intern. Final review of 2019 CCS QI Plan and approval by CCS Coordination Committee.

From 5.15.19 Meeting:

Updated Committee on CCS participant census. Discussion of discharges from CCS program. Reviewed QI plan and determined next goal of Committee. Committee elected to develop survey and administer to youth service facilitators to obtain more information about role of CCS in schools.

From 7.17.19 Meeting:

Updated Committee on CCS participant census. Updated Committee on DHS/DQA site visit—2 year certification with no citations. Results of 2018 CCS Consumer Satisfaction Surveys were reviewed with the Committee. Committee expressed concern with ROSI questions and that they are easily misunderstood. Demographic distribution of consumers discussed including age, race/ethnicity, gender, and urban/rural. Committee worked on development of the youth service facilitator survey.

From 9.18.2019 Meeting:

Updated Committee on CCS participant census and plan to hire additional QA Specialist in 2020. Youth service facilitator survey was discussed and edited. Committee discussed goal for survey is to inform training needs.

From 11.20.19 Meeting:

Updated Committee on CCS participant census and new positions in 2020 budget which will allow CCS intake to keep pace with community interest. CCS Analyst reviewed outcomes for individuals that enroll in CCS while homeless. Discussed Youth Service Facilitator Survey—it has been disseminated and closes soon. Consumer Satisfaction Surveys have been mailed out to eligible CCS participants (late October). Began review of QI plan for update. Did not have quorum for voting purposes.

From 1.15.20 Meeting:

Did not have quorum for voting purposes. Reviewed CCS participant census. Reviewed results of Youth Service Facilitator Survey. Work on QI Plan.

From 4.15.20 Meeting:

Meetings moved to virtual format due to COVID-19 pandemic. Updated Committee on CCS participant census and DCDHS hiring freeze as a result of COVID-19. Committee reviewed and approved the following policies which were updated: Conduct Policy and Timely Exchange of Information. Reviewed updates to the QI Plan for 2020 and Committee approved.

From 5.20.20 Meeting:

Reviewed census with Committee. Committee requested information regarding re-enrollments after discharge. Hiring freeze continues to impact 1.0 FTE CCS intake position. Committee reviewed and approved the following updated policies: Communication with Clients; Minimum Standards; Orientation and Training of Staff; Service Coordination, Referrals, and Collaboration; Staff Functions; Supervision and Clinical Collaboration; and Systems Development. All policies updated to gender-neutral language. CCS Analyst reviewed results of 2019 Consumer Satisfaction Surveys.

From 7.15.20 Meeting:

Reviewed CCS census with Committee. Discussed slowing of discharges due to pandemic. Committee reviewed and approved the updated Confidentiality, Security, and Privacy policy. Discussed administration of 2020 Consumer Satisfaction Surveys. Committee approved changes to administration of surveys to include the following: code to collect service facilitation agency, ask language preference, ask COVID questions, and administer survey electronically when possible via email. Committee reviewed and approved the Dane County CCS Monitoring Plan. CCS Service Director reviewed CCS quality assurance practices with the Committee.

From 9.16.20 Meeting:

Reviewed CCS census and statistics/demographics with Committee. Reviewed QI plan for next steps Committee would like to take.

From 11.18.20 Meeting:

Reviewed CCS census and DCDHS CCS personnel changes. Discussed impact of COVID-19 on provision of services and how agencies have adapted. Lead CCS Intake Worker fielded questions from Committee.

From 1.20.2021 Meeting:

Reviewed CCS census. Reviewed proposed edits to the CCS Plan with Committee. Proposed changes to CCS Plan included: updates to DCDHS CCS Organizational Chart, addition of Behavioral Health Resource Center as a referral source, removal of language describing contracting of Provider Network Coordinator (this position is now housed at Dane County), updating to gender-neutral language, updating language from client to CCS Participant. Committee approved CCS Plan as proposed.

From 3.17.21 Meeting:

Reviewed CCS census data, provided hiring update, reviewed confidentiality guidelines with committee. CCS Analyst reviewed results of 2020 CCS Consumer Satisfaction Survey. Began update of Quality Improvement Plan based on the satisfaction survey results.

From 5.19.2021 Meeting:

Reviewed census data and providing hiring update. Completed review and update of QI Plan.

From 7.21.2021 Meeting:

Reviewed CCS census data and provided hiring update. Review of DQA site visit with Committee. Reviewed proposed update to Recovery Team Development and Facilitation policy. Updated policy approved by Committee. Obtained feedback for the CCS Wait Time for Services survey. Reviewed turnover data.

From 9.15.2021 Meeting:

Presentation from BHRC supervisor, Molly Kloehn. Reviewed CCS census data and 2022 budget proposal as it impacts CCS. Proposal to add 6 positions in CCS in 2022. Updated Committee on MTM. Presented proposed revision to Assessment policy, Committee approved revisions. Completed development of Wait Time for Services survey.

From 11.17.2021 Meeting:

Presentation from CCS Quality Assurance Team. CCS census and hiring update. Difficulty recruiting Bilingual Spanish Case Manager. Reviewed proposed revisions to Conduct policy. Committee approved revised Conduct policy. Reviewed results of Wait Times for Services survey with Committee. Reviewed CCS Provider Directory with Committee for feedback. Committee did not recommend any changes.

From 1.19.2022 Meeting:

Reviewed census and hiring update. CCS Analyst reviewed results of 2021 Consumer Satisfaction Surveys. Began work on update of QI plan based on results of satisfaction surveys.

From 3.16.2022 Meeting:

Reviewed census data and hiring update. Completed revision of QI plan. Engaged in dialogue about how best to measure outcomes of the CCS program. Committee will consider adding 1-2 questions to the 2022 consumer satisfaction surveys to gauge outcomes.

From 5.18.2022 Meeting:

Reviewed census data and hiring update. Reviewed final edits to QI plan and Committee approved. Updated Committee on State proposal to administer satisfaction surveys on a rolling basis. Committee recommended re-administration of wait time survey with additional telehealth questions. Reviewed CCS disenrollment data with committee.

From 7.20.2022 Meeting:

Meeting did not have quorum. Updates provided to those in attendance, no action taken.

From 9.21.2022 Meeting:

Reviewed census data and providing hiring update. Dialogue regarding potential reclassification of social work positions to case manager positions. Committee in support of recruitment of case managers. Reviewed proposed revisions to Minimum Standards Policy. Committee approved updated Minimum Standards policy. Reviewed new Electronic Records and Signatures policy. Committee approved updated policy. Discussed update to satisfaction survey administration timeline. Reviewed Wait Time Survey results.

From 11.16.2022 Meeting:

Reviewed census data and hiring update. Began discussion of Bilingual Services & Accommodations Survey with Committee.

CCS Coordination Committee Membership Roster January 2023

Laura Abilene
Teri Barman
Kim Disch-French
Michelle Hicks
Corri Kohn
Amy Laughnan
Nikyra McCann
Veronica McMurray
Julie Meister (chair)
Kristi Nelson
Mary Rauwolf
Margaret Rubio
Vanessa Statam
Heidi Stringer
Mai Zong Vue
Nichole Wright

F. ORIENTATION AND TRAINING – DHS 36.12

CCS Policy/Procedures

Orientation and Training of Staff

DHS 36.07(5)(i)

Policy Statement: Adequate training will be provided to ensure that all new staff, students, and regularly scheduled volunteers have the knowledge base to work with CCS participants according to Comprehensive Community Services principles, both initially and ongoing.

Discussion and Procedures:

CCS orientation for new staff will include:

1. Review of DHS 36, with special attention to the sections referring to the services the staff person provides;
2. Review of CCS policies and procedures;
3. Review of job responsibilities as specified in the job description;
4. Review of Wis. Stats. Chaps. 48, 51, 55 Stats.;
5. Review of DHS 94, patient's rights;
6. Review of DHS 92, HIPAA, and confidentiality of records;
7. Review of DHS 75 and 42 CFR Part 2;
8. Basic provisions of civil rights laws including ADA of 1990, Civil Rights Act of 1964, and pertinent parts of Title VI, i.e., the Limit English Proficiency guidelines;
9. Discussion about CCS guidelines, beliefs, philosophy including recovery concepts such as hope, empowerment and connection to others;
10. Information about the mental health service delivery system, the substance use disorder system and other social/human service resources;
11. Pertinent information and updates to knowledge about mental health/illnesses, substance use disorders, co-occurring disabilities, service needs and treatment methods;
12. Non-violent crisis management including verbal de-escalation;
13. Risk assessment for suicide, homicide and non-suicidal self-injury.

Minimum Orientation and Training Hours

1. Staff members with less than 6 months experience providing psychosocial rehabilitation services to those with mental health/SUD disorders will receive 40 hours of documented orientation and training within 3 months of starting their employment.

2. Staff members with more than 6 months experience providing psychosocial rehabilitation services to those with mental health/SUD disorders will receive 20 hours of documented orientation and training within 3 months of starting their employment.
3. Each regularly scheduled volunteer or student will receive 40 hours of orientation training before he/she can work independently with consumers or family members.
4. Orientation training shall be documented on the *CCS Service Provider Orientation Checklist*. Both the completed *CCS Service Provider Orientation Checklist* and verification of trainings received and documented on the checklist shall be submitted to DCDHS within three months of initiating employment with the CCS.
5. If a CCS staff has received portions of the required CCS orientation training within 24 months of becoming a Dane County CCS staff, verification of training can be submitted to the CCS Provider Network Coordinator to be evaluated for meeting the relevant categorical training requirement. Approval will be granted by the CCS Provider Network Coordinator on a case-by-case basis following a review of the verification and content of the training received, as well as the individual's background and role within the CCS Program. The CCS Provider Network Coordinator will provide written notification of approval or denial. Past trainings accepted as meeting a categorical training requirement will not be counted among the 20 or 40 hours of total orientation and training required, as specified above, unless completed within three months of becoming a Dane County CCS staff.

Ongoing Training Program

Each staff member will receive 8 hours of training each year designed to build upon and enhance the orientation training. Training methods for all staff, students and volunteers will include:

1. Staff meeting time set aside for training;
2. Presentations by community resource staff from other agencies;
3. Individual staff attendance at conferences/workshops;
4. Discussion and presentations of current and new principles or methods for delivering culturally competent, recovery oriented services more efficiently and effectively. Any staff or consumers, especially those who have attended outside training, may deliver such education, as well as other experts within or outside the agency;
5. Cultural diversity/competence trainings;
6. The Provider Network Coordinator will maintain in a central administrative file appropriate documentation to demonstrate that all staff have met training requirements.

Orientation and Training Records

1. CCS Staff are required to provide DCDHS with verification of all trainings completed to satisfy the requirements of DHS 36.
2. Verification of all orientation and training hours completed by CCS staff to satisfy the requirements of DHS 36 will be retained in the CCS staff file at DCDHS.

Approved by CCS Coordination Committee on 5/20/2020.

5.1.14, 8.18.14, 5.6.15, 5.21.15
revised 6.8.15, 5.1.20

G. CONSUMER APPLICATION – DHS 36.13(1)

Dane County Comprehensive Community Services

Application for CCS Services

Name of Applicant: _____ Date Received: _____

Address: _____ Phone: _____

_____ Insurance #: _____

Parent/Guardian Name: _____ Phone: _____

(If applicable)

Address: _____ Phone: _____

(If different)

For Youth, Is applicant in an Out of Home Placement: Yes No N/A

Provider Name & Contact Information: _____

SSN: _____ Date of Birth: _____ Gender: _____

Marital Status: Single Married Other: _____ Veteran: Yes No

Race: (any applicable) _____ Latinx or Hispanic Decent? Yes No

Involvement with legal system or any mandated services (Check all that apply)

CPS Juvenile Justice Chapter 51 Probation Parole

Worker's Name & Contact Information (Optional): _____

Reason for applying for CCS services: (Check up to 5)

- | | | |
|--|--|---|
| <input type="checkbox"/> Full time paid work | <input type="checkbox"/> Part time paid work | <input type="checkbox"/> Education |
| <input type="checkbox"/> Help with finances | <input type="checkbox"/> Help with family | <input type="checkbox"/> Place to live |
| <input type="checkbox"/> Better self-worth | <input type="checkbox"/> Social activities | <input type="checkbox"/> Counseling |
| <input type="checkbox"/> Daily structure | <input type="checkbox"/> Help with stress/symptoms | <input type="checkbox"/> Medications |
| <input type="checkbox"/> Case management | <input type="checkbox"/> Support of peers | <input type="checkbox"/> Sobriety Support |
| <input type="checkbox"/> A way to contribute & be needed | <input type="checkbox"/> Physical Health/Wellness | <input type="checkbox"/> Other: _____ |

Medical Conditions:

- | | |
|--|---|
| <input type="checkbox"/> High Blood Pressure/Hypertension | <input type="checkbox"/> High Cholesterol |
| <input type="checkbox"/> Type I Diabetes (childhood onset) | <input type="checkbox"/> COPD |
| <input type="checkbox"/> Type II Diabetes (adult onset) | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Cardiovascular (angina, coronary disease, heart attack or stroke) | <input type="checkbox"/> Asthma |

Concerns/Use in the last year: Tobacco use Alcohol Abuse Drug Abuse None apply

By signing below, I certify that all information provided as part of this application is true and correct to the best of my knowledge. I understand that in addition to the information provided, a functional screen must be completed in order to determine functional eligibility for CCS.

- For Adults: I hereby give my consent to Dane County Department of Human Services to complete the Wisconsin Functional Screen for Mental Health and Substance Use Services. I understand the information I give today combined with my medical records and collected information will be used to determine my eligibility for Dane County Programming. I understand I am not required to answer any of the questions. I understand I may receive a copy of this assessment and that it becomes protected health information, which is covered under HIPPA.
- For Youth: I understand the signature below is for application purposes only. I understand that a separate consent is necessary in order to complete the functional screen to determine functional eligibility for CCS.

Applicant signature

Date

Guardian signature

Date

Dane County Comprehensive Community Services

General Description of CCS:

CCS is a community-based program that can meet many mental health and substance use disorder needs. It is offered in a way that the client takes joint responsibility with professionals, peers and support persons in determining what his/her goals will be and how to achieve them. CCS instills hope and believes that people can and will recover the person they know themselves to be. Discharge planning is built in from the beginning because it is expected that CCS will not need to be a life long program for most.

Eligibility:

CCS is an entitlement program for individuals, adults and children, who receive Medical Assistance and who have a mental and/or substance use disorder. They must be in need of ongoing psychosocial services to minimize the effects of the disorder and to maximize independent functioning. Need for services can be low- or high-intensity, and this need may vary over time. Further, the person must have at least one functional impairment that interferes with or limits one or more life activities, as determined by the State of WI Functional Screen that will be administered by CCS Intake staff.

Complete the reverse side of this document.

Please provide contact information for any Emergency Contact(s) you wish us to have on record:

Name: _____

Relationship to Applicant: _____

Address: _____

Phone Number: _____

Name: _____

Relationship to Applicant: _____

Address: _____

Phone Number: _____

CCS Intake Services
Dane County Human Services
1202 Northport Drive
Madison, WI 53704
(608) 242-6415 (Adult/Youth Intake)
(608) 283-1470 (Fax)
www.danecountyhumanservices.org

H. SERVICE ADMISSION AGREEMENT – DHS 36.13(1m)

Admission Agreement (DHS 36.13 (1m))
Comprehensive Community Services (CCS)
Dane County Department of Human Services

Name: _____

Date: _____

Nature and Purpose of CCS

The Comprehensive Community Services (CCS) Program is a voluntary, community-based program for MA eligible children and adults with mental illness and/or drug and alcohol related problems. It is operated by Dane County Department of Human Services in compliance with rules under Chapter DHS 36 of the Wisconsin Administrative Code.

Once enrolled in the CCS Program, you will:

- Work with a Service Facilitator, who will be a member of your Recovery Team and help arrange and coordinate the services you desire;
- Identify other people, who might be family, friends or professionals, to be members of your Recovery Team;
- Together with your Recovery Team, develop a recovery plan that outlines your goals and the services you desire;
- Receive the psychosocial rehabilitation services as outlined in your recovery plan; and
- Take steps, at your pace, to achieve your goals and desired level of stability, independence, and recovery.

You will choose services available through a network of providers. Most services are provided during the agency operational hours (Monday through Friday) from 8:30 a.m. to 4:30 p.m., but some providers may have hours that are a little different. Information about your care and progress may be shared between the members of your team and your service providers even though the team members and service providers may be from different agencies.

Crisis Services are available during and after hours by phoning the 24-hour crisis line of Journey Mental Health Center at (608) 280-2600.

If you have problems with this program you may contact the CCS Administrator, Julie Meister at (608) 242-6413.

Client Rights

As a client of the CCS Program, you have the right to:

- a. Choose the members of your recovery team, your services, and your service providers from the CCS Program network.
- b. Receive specific, complete, and accurate information about proposed services.
- c. Consent to treatment and to withdraw from the CCS Program at any time.

- d. File formal and informal grievance procedures in s. 51.61, WI Stats., and ch. DHS 94, and for Medical Assistance clients, the rights to a fair hearing. These are explained in the *CCS Client Rights* handout.

Notice of Confidentiality Regarding Drug and Alcohol Treatment Records

The confidentiality of your treatment records maintained by this program is protected by Federal law and regulations. Generally, the program may not say to a person outside the program that you are enrolled in the program or receive services from the program or disclose any information, where applicable, identifying you as a drug or alcohol abuser, unless:

1. You consent in writing;
2. The disclosure is allowed by a court order; or
3. The disclosure is made to medical personnel in a medical emergency or to qualified personnel for research, audit or program evaluation.

Violation of federal confidentiality laws is enforced by criminal penalties. Federal law and regulations do not protect any information about a crime committed at the program or against any person who works for the program, or about any threat to commit such a crime. Federal laws and regulations also do not protect any information about suspected child abuse or neglect from being reported as authorized under Wisconsin law.

See 42 USC 290dd-3 and 42 USC 290ee-3 and the regulations relating to drug and alcohol treatment records located at 42 CFR Part 2 for information about the confidentiality of drug and alcohol patient records.

Follow-Up After Discharge

Your records will be maintained by the Dane County Department of Human Services and will remain confidential within the network of providers unless you consent to their release to other organizations or persons, or the law permits such disclosure without your consent. At the time of discharge your discharge summary will be shared with providers who will be providing subsequent services with your consent.

Cost of Services

There is no cost for CCS services for clients who are Medicaid eligible.

Acknowledgement

- a. I acknowledge that I have read this Admission Agreement and understand the nature and purpose of the Comprehensive Community Services Program.
- b. I have received a copy of the grievance procedures and it has been explained to me.
- c. I have been provided with information on the costs of services, as well as, my financial responsibility for the services I receive.

I HEREBY APPLY FOR ADMISSION TO THE COMPREHENSIVE COMMUNITY SERVICES PROGRAM:

Signature of Applicant

Date

Signature of Parent/Guardian

Date

/CCS – Admission Agreement.docx
8.18.2014, 8.25.2014, 4.6.15, 4.27.15
Updated: 5.6.15

I. CRITERIA OF DETERMINATION – DHS 36.14

CCS Policy/Procedures
Criteria for Determining Need for Psychosocial Rehabilitation Services
DHS 36.14

Policy Statement: The CCS program will be available to persons who need more services than those offered through outpatient counseling or other non-intensive programs but less than what is standard for community support programs. Eligibility is restricted to adults and children with mental health and/or substance use disorders.

Discussion and Procedures:

1. CCS Intake staff who have been certified as screeners will administer the State's Functional Screen to determine CCS eligibility. These screeners will assess and document initial service needs.
2. Eligibility criteria will include:
 - a. a diagnosis of a mental health or substance use disorder
 - b. a functional impairment that interferes with one or more major life activities
 - c. a need for services that is described as ongoing and comprehensive but can be either low- or high-intensity.
3. In addition to the functional screen; subjective professional clinical evaluations of the screeners, the Service Director, and in consultation with other professionals listed in DHS 36.10 (2) (e) 1. through 14. will be taken into account.
4. The applicant for services must meet one of the following descriptions:
 - a. Group 1: persons in need of ongoing, high-intensity comprehensive services and who have diagnoses of a major mental disorder or substance use disorder. They have substantial needs for psychiatric, substance use and/or medical treatment.
 - b. Group 2: Persons in need of ongoing, low-intensity comprehensive services who have a mental or substance use disorder. They can function independently and be stable much of the time but occasionally have acute psychiatric crises.
5. If the applicant meets eligibility criteria, a Mental Health Professional will attest to the need for CCS and psychosocial rehabilitation services and will sign an authorization for services.
6. After the applicant becomes a CCS client, there will be an annual functional screen review and update. Updated information will be used in the development of future service plans or to consider if the person served is reaching his/her discharge goals.

5.1.14, 8.22.14
Revised 4.7.15

J. ASSESSMENT POLICIES & PROCEDURES – DHS 36.16

CCS Policy/Procedures
Assessment
DHS 36.07(5)(m)

Policy Statement: So that each CCS participant receives timely assessments and evaluations on which to base service decisions, a State of Wisconsin Functional Screen will be completed at the time of application to CCS, a comprehensive assessment will be completed within 30 days of receipt of the application for services, and updates to the comprehensive assessment will occur at least once per year, or more frequently as needed.

Discussion and Procedures:

1. Assessments will:
 - a. be clearly explained to the participant, and parent/guardian if applicable, and family when feasible and desired by the participant;
 - b. include available family information as well as the participant'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 participant's recovery plans.
2. CCS Intake Staff will verify CCS program eligibility annually through the appropriate State of Wisconsin Functional Screen.
3. The comprehensive assessment will be facilitated by the Service Facilitator, will include consult and collaboration with the Mental Health Professional and Substance Abuse Professional, and will be completed in collaboration with the client and other members of the recovery team. The comprehensive assessment will be updated annually, or more frequently if needed as new information becomes available.
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 and will conduct the assessment of substance use, strengths and service or treatment needs.
5. Assessments shall incorporate, to the greatest extent possible, the following:
 - a. the participant's own perspective and own words about their recovery, experience, challenges, strengths, resources, and needs,
 - b. the participant's recovery goals and understanding of their 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. strengths, needs, recovery goals, priorities, preferences, values and lifestyle of the participant,
 - f. strengths of client's family, social network, community, and natural supports,
 - g. age and developmental factors,
 - h. cultural and environmental supports as they affect the participant's goals, desired outcomes, and preferred methods for achieving goals.
6. The assessment will address all domains of functioning including:
- a. life satisfaction
 - b. basic needs
 - c. social network and family involvement
 - d. community living skills
 - e. housing
 - f. employment
 - g. education
 - h. finances and benefits
 - i. mental health
 - j. physical health
 - k. substance use
 - l. trauma and significant life stressors
 - m. medications
 - n. crisis prevention and management
 - o. legal status
 - p. other domains identified by the CCS
7. The Service Facilitator will complete a comprehensive assessment with the participant and their recovery team within 30 days of the date of application for CCS services. The assessment may only be abbreviated if one of the following applies:
- a. the participant's health or symptoms allows obtaining little or no information within the timeframe,
 - b. the participant chooses not to provide information necessary for completion,
 - c. the participant 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. An assessment summary will be completed by the Service Facilitator or team designee that includes:
 - a. Each meeting date that occurred to gather information for the comprehensive assessment and the date when the assessment was completed.
 - b. A summary of the information that was used to develop the service recommendations and outcomes.
 - c. The participant's desired outcomes and goals.
 - d. The names and relationship to the participant of all individuals who participated in the assessment process.
 - e. Any significant differences of opinion that are not resolved among members of the recovery team.
 - f. Signatures of all persons present at assessment meetings.
11. The comprehensive assessment and assessment summary will establish the foundation for medical necessity and authorization of services.
12. The assessment summary will be updated concurrently with any update to the comprehensive assessment.
13. Screening and Assessment services provided to a participant will be documented in progress notes in the DCDHS CCS Module.
14. Assessment and assessment summary documents will be kept in the participant's central record at DCDHS. All assessment documents will reflect the dates the screening and assessment services took place and the dates the assessments were completed.

Approved by CCS Coordination Committee on September 15, 2021.

5.1.14, 8.25.14, 4.7.15, 4.28.15

Revised 9.14.21

K. SERVICE PLANNING AND DELIVERY PROCESSES – DHS 36.17

Service Planning and Delivery
DHS 36.07(5)(n)

Policy Statement: Each client will have a comprehensive recovery plan developed and written within 30 days of admission, and a review and update of the plan in writing at least once every six months thereafter. CCS services will be delivered according to the plan.

Discussion and Procedures:

Facilitation of Recovery Planning:

1. The written recovery plan will be based on the assessment and completed within 30 days of application for services.
2. The recovery planning process will be explained to the person served, guardian or family member if applicable, in detail with ample examples of how he/she can be involved in constructing the team and the plan.
3. The client, service facilitator, mental health professional/SUD professional, guardian and service providers, family, and other individuals of the client's choosing will develop the plan. The client's participation in the development of the plan and goals will be documented in the record and evidenced by the client's signature on the plan.
4. Recovery plans will flow from the results of the assessment and recognize the needs, hopes, and dreams of the client while taking into consideration each individual's culture, background, and language.
5. Discharge planning will be built into the recovery plan from the outset to instill hope and convey the belief that clients will achieve independence.

Recovery Plan Documentation:

1. The plan will specify recovery goals and the treatment, rehabilitation, and support service actions necessary to accomplish the goals. The goals will be written in measurable terms. The plan will include schedules and frequency of services.
2. Recovery goals will be elicited from the client and reflected on the plan in the client's own words.
3. Expected outcomes and the staff, person or agencies responsible for providing the services will be identified in the plan. Payment source for each service will be explained.

4. The type and frequency of data collection that will be used to measure progress toward goals will be written into the plan.
5. The plan will be reviewed, approved, and signed by the client, licensed mental health or SUD professional and the service facilitator. The names of participants in the recovery planning meeting will be recorded on an attendance roster and will include the date of the meeting and the name, address, and telephone number of each person.
6. Each original, updated and partially completed service plan will be included in the service record contained within the Mental Health Module of the DCDHS Information System.
7. An electronic or hard copy of the plan will be available to all members of the recovery team.
8. The review of the recovery plan will be scheduled every six months and may occur more often. Progress and current status in meeting the goals set forth in the plan will be reviewed with the client. Goals that have been met will be upgraded, intensified, or deleted, as appropriate. Goals that have not been met will be modified, continued, or deleted, as explained by the review narrative.

Service Delivery:

1. Services, both psychosocial rehabilitation and treatment, will be provided in congruence with the client's wishes and style.
2. To the extent possible, services will be provided in natural and integrated settings preferred by the client, and will use the natural supports of the client and his/her community when possible.
3. Interventions and actions will be designed to assist the client to do for themselves to achieve their desired outcomes, rather than those actions that "do for" or "do to".
4. Services will be provided with reasonable promptness and with appropriate frequency to achieve the goals set out in the recovery plan.
5. If services are needed or desired that are not delineated in the recovery plan, the service facilitator will convene the recovery team to modify the plan.

5.1.14, 8.22.14
Revised 4.7.15

C. CCS STAFF LISTING

Agency Name: Anesis Center for Marriage and Family Therapy

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Abrajan, Cindy	Bilingual Psychotherapist		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		8/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ballweg, Nicholas	Psychotherapist	APSW 132396 SAC-IT 19314	5	9,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Beyler, Yeng	Service Facilitator		4, 5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		2/2019	2/2019	2/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Bonaparte, Andrea	Psychotherapist	APSW 130397	5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Bravo, Kimberly	Service Facilitator		4, 5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Briggs, Bobbie	Psychotherapist	LMFT-IT 826	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		4/2021	6/2020	6/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Brown, Shavone	Child Parent Advocate		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Catlin, Zakiya	Crisis Stabilization Provider		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Cerda, Manuel	Clinical Student/ Intern		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Clay, Stacy	Peer Support Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Clay, Vilitha	In-Home Program Manager/ Supervisor	LCSW 9913	5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		1/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Davidson, Chyanne	Service Facilitator		4, 5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Doss, Kevin	Rehabilitation Worker	CSAC 16481	4, 5 (SAP)	16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Dunlap, Chakita	Child Parent Advocate		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2020	12/2020	12/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Evans, Debie	Assistant Director/ Supervisor	LCSW 7681 (SAP)	1, 5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2020	6/2020	6/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Foster, Alwyn	Service Facilitator	SAC-IT 19087	4, 5	16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
George-Copeland, Brandy	Psychotherapist/ Supervisor	LMFT 1369	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2020	2/2020	2/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gladney, Danielle	Clinical Student/ Intern		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gomez, Nancy	Psychotherapist/ SF/ Supervisor	LMFT 1405	4, 5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Goodwin, Kianna	Psychotherapist/ Supervisor	LCSW 9831	5	5	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gutierrez, Gilberto	Rehabilitation Worker	LMFT-IT 511	4, 5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2019	10/2019	10/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Herringa, Ryan	MD- Psychiatrist	MD 55651	5	1		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hodges, Relayia	Clinical Student/ Intern		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jackson, Lisa D.	Service Facilitator		4, 5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jackson, Lisa M.	Psychotherapist	LMFT-IT 249	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jamison, Rubiarbriana	Clinical Student/ intern		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jewett, Christina	Parent Child Advocate		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kim, Jessica	Clinical Student/ Intern		5	22		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	8/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lindall, Erica	Psychotherapist	LMFT-IT 798	5	14		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	3/2021	6/2020	6/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Martinez, Bethsaida	Child and Family Advocate		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
McNair, Myra	Owner/ Psychotherapist	LMFT 1091	1, 3, 5 (SAP)	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Molina Hernandez, Manuela	Crisis Stabilization Worker		5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2021	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Neal, Brittany	Psychotherapist	LCSW 9865	5	5	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ng, Ze Tsuen (Zach)	Clinical Student/ Intern		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Orozco, Valerie	Clinical Student/ Intern		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Perez, Alexandra (Alej)	Clinical Student/ Intern		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ramsey, Pamela	Psychotherapist/ Service Facilitator	LPC 8301	4, 5	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Riza, Fjolla	Psychotherapist/ Service Facilitator	APSW 132137	4, 5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Soward, Pamela	Therapist	LPC (1.09) 6155	1, 5	6, 16	70%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2019	10/2019	10/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Statam, Vanessa	Supervisor/ Service Facilitator	LCSW 9892	1, 3, 4, 5 (SAP)	5	100%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	9/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Steele, Alexander	Psychotherapist	LPC 8486	5	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Villa-Galvez, Jennifer	Clinical Student/ Intern		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Walker, Deandra (Bobby)	Psychotherapist	APSW 132490	5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Walls, Aiyanna	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Williams, Demarcus	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Yang, Pazee	Bilingual Psychotherapist	LCSW 9891	5	5	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Young, Devon	Service Facilitator		4, 5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Yu, Serena	Mental Health Specialist	LPC-IT 5185	5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Anu Family Services

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Allen, Ellie	Parent Coach		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2019	2/2019	2/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Andermann, Aaron (Luke)	Parent Coach		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
McElroy, Hilary	Clinical Supervisor	LPC 4283-125	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Scanlan, Cara	Parent Coach		5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wagner, Jenny	Parent Coach		5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2019	11/2019	11/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wilmot, Julie	Parent Coach		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: ARC Community Services Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Boughman, Laura (Skye)	Clinical Supervisor	LPC 5352 CSAC 15459	5	6,16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		10/2020	1/2021	1/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Crandall, Rebecka	HOPE Project Coordinator/ Counselor	SAC-IT 19082	5	16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		9/2019	9/2019	9/2019	<input type="checkbox"/> Y <input type="checkbox"/> N
Holt, Kathleen	Counselor	CSAC 17006	5	16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		8/2020	6/2021	6/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Johnson, Itina	AODA Counselor	SAC-IT 19618	5	14,16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		8/2020	4/2022	4/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Jump, Gabriela	Mental Health Therapist	LPC 8116	5	6	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		4/2022	4/2022	4/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Niesen, Rachel	Counselor	LCSW 9799 SAC-IT 18974)	5	5,16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		4/2021	5/2021	5/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Peters, Nikara	Counselor		5	14	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		1/2022	2/2022	2/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Peterson, Kailey	AODA Counselor	APSW 132464 SAC-IT 19452	5	9,16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		11/2020	4/2022	4/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Shelton, Caroline	Care Coordinator		5	15,20	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		12/2021	5/2022	5/2022	<input type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: ASPIRES247, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Spires, Anne M.	Owner/ Service Provider	N/A	5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2019	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Sweazy, Jessica	CCS Supervisor	LCSW 9433	N/A	5	5%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	7/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Anne Spires
Privacy Officer – Anne Spires

Agency Name: Badger Care LL

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Erhardt, Anne	Clinical Supervisor	LMFT 1209	N/A	6	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	12/2020	12/2020	12/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Syed, Salam	MD/ Owner	MD 53833	5	2	<input type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Privacy Officer – Saadia Syed
Security Officer – Saadia Syed

Agency Name: Better Bee, Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Barrett, Emily	CCS Supervisor	LCSW 9080	N/A	5	<input type="checkbox"/> E <input type="checkbox"/> C	6/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Zaidi, Reba	Executive Director	RN 151730	5	12	<input type="checkbox"/> E <input type="checkbox"/> C	7/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Privacy Officer – Reba Zaidi
Security Officer – Reba Zaidi

Agency Name: Capital Minds, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Bohlman, Ann	CCS Supervisor	LCSW 7018	N/A	5	5%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	1/2020	1/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ginko, Amy	CCS Supervisor	LPC 4697-125	N/A	6	5%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jahraus, Lindsey	Mental Health Specialist	APSW 131399-121	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2020	2/2020	2/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lindner, Sara	Mental Health Specialist	LPC-IT 4328-226	5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2019	2/2019	2/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Olson, Chelsea	Mental Health Specialist	APSW 131203-121	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2020	7/2020	7/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Chelsea Olson
Privacy Officer – Chelsea Olson

Agency Name: Cascading Waters LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Heemstra, Dylan	Owner/ Provider	LMFT 1289	5	6	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Rozeske, Jordan	Clinical Supervisor	LCSW 8018	N/A	5	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	8/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Privacy Officer – Dylan Heemstra
Security Officer – Dylan Heemstra

Agency Name: Catalyst for Change Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Adams, John	President	SAC-IT 19544	4,5 (SAP)	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Carr, Makayla	CCS Provider		4,5	21	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Easland, Kayla	Case Manager		4,5	15	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
El-Omari, Hana	CCS Provider		4,5	15	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Ervin, Ruchita	CCS Supervisor	LPC 6487 CSAC 16072	1,3 (SAP)	6, 16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2020	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Fink, Sarah	APSW	APSW 132351	4,5	9	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Fitzgerald, Rebecca	Service Facilitator		4,5	14	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Fontaine, Hannah	ISD/ Service Facilitator		5	21	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Lewis, Marjorie	Service Facilitator		4,5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Moody, Michael	CEO		4,5	14	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Stoehr, Emma	Case Manager		4,5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Weiss, Linnea	Psychosocial Rehab Provider		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
---------------	--------------------------------	--	---	----	--	---	--------	--------	--------	---

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Burch, Morgan	Child and Family Therapist	LCSW 9316	5	5	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2019	9/2019	9/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Brochman, Kate	Child and Family Therapist	LPC 7078	5	6	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Carroll, Thomas	Child and Family Therapist	LPC 5969	5	6	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hanson, Elizabeth	Child and Family Therapist	LMFT 950	5	6	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	11/2020	11/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Harris, Aimee	Child and Family Therapist	LPC 2429	5	6	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kolb, Colleen	Child and Family Therapist	LMFT 1023	5	6	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Luebke, Brooke	Direct Services Manager	835 LMFT	5	6	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lukes, Anna	Child and Family Therapist	LMFT 1414	5	6	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mosling, Dana	Child and Family Therapist	LMFT 889-124 LPC 4579-125	5	6	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Richgels, Cindy	Child and Family Therapist	7083 LCSW	5	5	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Solomon Schwabe, Madison	Child and Family Therapist	LMFT 1250	5	6	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Sterling, Michelle	Child and Family Therapist	LCSW 8392	5	5	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Bluske, Jennifer	Occupational Therapist	OT 3248-26	5	13	8%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2019	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hall, Amber	Clinical Psychologist	Psychologist 3617	5	4	8%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2020	6/2020	6/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hewitt, Laura	Occupational Therapist	OT 5306-26	5	13	12%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2019	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Laird, Emily	Occupational Therapist	OT 5479-26	5	13	16%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lathrop, Karina	Occupational Therapist	OT 6051-26	5	13		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mao, Jenna	Mental Health Therapist	LPC 7672	5	6	16%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2020	1/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Muckenhirn, Kayla	Occupational Therapist	OT 6545-26	5	13	16%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
St. John, Brittany	Occupational Therapist	OT 6003-26	5	13	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Stiles, Olivia	LPC-IT	LPC-IT 7010	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Stuckey, Shannon	Occupational Therapist	OT 7195-26	5	13		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Walsh, Jessica	Occupational Therapist	OT 5149-26	5	13	12%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wodrich, Meredith	Parent Coach		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Jennifer Bluske
Privacy Officer – Jennifer Bluske

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Baldwin, Sarah	Employment Specialist	APSW 131803	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	6/2020	6/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Bissell, Jean	Peer Specialist		5	20	15%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	4/2020	4/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Clark, Alysha	Peer Specialist		5	20	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2019	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Edwards, Michael	Employment and Education Specialist		5	15		<input type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jones, Felicia	Peer Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kittoe, Christopher	Employment Specialist		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lee, Por Shoua	Service Facilitator	APSW 130551	4,5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2019	9/2019	9/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lopez, Andrew	Vocational Peer Specialist		5	20	90%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Parman, Robert	Employment Specialist		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Peterson, Eric	Peer Specialist		5	20	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2019	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Puleo, Audi	Employment Specialist		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Rischall, Danielle	Executive Director/ Supervisor	LCSW 8149-123	1	5	10%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2019	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Slotnick, Julie	Employment Specialist		5	15	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	6/2020	6/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Staley, Ashley	Employment Specialist		5	15	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Stapleton, Kurtis	Vocational Peer Specialist		5	20	90%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Stark, Sonora	Employment Specialist		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Strickland, Matthew	Peer Specialist		5	20	75%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2019	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Yonker, Amy	Employment Specialist	LPC 6347-125	1,5 (SAP)	6	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ziegert, Kathy	Service Facilitator	LCSW 7592	1,3,4,5 (SAP)	5	80%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	4/2020	4/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Collective Roots Psychotherapy LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Click here to enter text.	Supervisor		N/A	Click here to enter text.		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	Click here to enter text.	Click here to enter text.	Click here to enter text.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Williams, Mary	Owner/ Psychotherapist	LPC 5099 AT 127	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2020	7/2020	7/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Privacy Officer – Mary Williams
Security Officer – Mary Williams

Agency Name: Collective Voices, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Felice, Algernon (Al)	CCS Supervisor	LPC 4103	N/A	6	<input type="checkbox"/> E <input type="checkbox"/> C	10/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Greengus, Heidi	Grief Support Specialist		5	15	<input type="checkbox"/> E <input type="checkbox"/> C	11/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Kushner, Jessica (Jessie)	Founder/ Provider		5	15	<input type="checkbox"/> E <input type="checkbox"/> C	8/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Taylor, Christine	CCS Supervisor	LCSW 8871 CSAC 16087	N/A	5,16	<input type="checkbox"/> E <input type="checkbox"/> C	8/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Agency Name: Common Threads Family Resource Center

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Anderson, Shanna	MHP/ SAP/SD	LPC 8733	1,3,5 (SAP)	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Douglass, Kory	Marriage & Family Therapist	LMFT-IT 754	5	14		<input type="checkbox"/> E <input checked="" type="checkbox"/> C		5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Elsbury, Savannah	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Faretta, Michaela	Clinical Director	OT 6599	5	13	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Fogeltanz, Erica	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		8/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Heimerl, Robin	LPC	LPC 5587 SAC 15852	1,3,5 (SAP)	6,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		12/2022	12/2022	12/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Layde, Patricia	LPC-IT	LPC-IT 7164	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Long, Monty	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ludin, Mackenzie	OT/ISDE	OT 7297	5	13		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mischler, Alex	Service Facilitator	LPC 10019	4, 5	6	80%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		10/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Park, Sin Young (Sara)	PhD Clinical Student	LPC-IT 7064	5	14, 22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Princl, Ann	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Tiedt, Grace	Service Facilitator		4, 5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Community Care Programs

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Buschke, Bonnie	Clinical Case Manager	LCSW 9303	5	5	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		11/2019	01/2020	01/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Nyhuis-Wing, Joy	Clinical Case Manager	LCSW 1553-121	5	5	<input type="checkbox"/> E <input checked="" type="checkbox"/> C		11/2019	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Reynders, Rachel	Therapist	APSW 132450	5	9	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Rifken, Donna	Psychologist	Ph.D 1092-057	5	4	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	50%	12/2020	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schroeder, Lora	Clinical Case Manager	LCSW 6630-123	5	5	<input type="checkbox"/> E <input checked="" type="checkbox"/> C		03/2019	03/2019	03/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Simon, Mary	Supervisor	LCSW 830-123	5	5	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	50%	02/2019	03/2019	03/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Diana Chidester
Privacy Officer – Diana Chidester

Agency Name: Community Counseling Center of Madison, WI, Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Barger, Sharon A.	Director, Psychotherapist / SAP Supervisor	LPC 308 LCSW 2583 SAC 12077	1, 3, 4, 5 (SAP)	5, 6, 16	60%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2020	1/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Elkind, Steve	Psychologist	Psychologist 1102-057	1, 4, 5 (SAP)	4	20%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	11/2019	11/2019	11/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Emmerich, Galina	Service Facilitator	LPC-IT 5046	4, 5	14	90%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Farmer-Oren, Mary	COTA	OTA 404	4, 5	18	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Koehler, Gregory	MHP/ Service Facilitator	LCSW 880	1, 4, 5 (SAP)	5	90%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Muich, Catherine (Trina)	Support Specialist		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Sexson, Donna	Service Facilitator		4, 5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Zinser-Minocha, Tammy	Therapist / MHP/ Service Facilitator	LPC 3367	1, 4, 5 (SAP)	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Community Living Alliance (CLA)

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Isham, Nicholas	Community Support Specialist		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Murray, Michelle	Behavioral Health Clinician	LCSW (1.09) 7814	1, 5 (SAP)	5,16	6%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2020	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Nordstrom, Daniel	Behavioral Health Clinician	LCSW 9151	1,5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Shampo, Kaylin	BH Program Coordinator/ Supervisor	LCSW 9052	1, 3 (SAP)	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Statz, Heather	Transition Specialist	APSW 131819	4, 5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Adamczyk, Shannon	Therapist	LPC 5870 CSAC 16122	5	6, 16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Aney, Alexis	Counselor		5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Cates, Taryn	Counselor	LPC-IT 4693	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Divine, Cory	Counselor	LPC 6901 CSAC 15367	5	6, 16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Howell, William	Therapist	SAC-IT 19089 LPC-IT 4731	5	14,16		<input type="checkbox"/> E <input type="checkbox"/> C	8/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kauer, Timothy	Therapist	LPC-IT 7146	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kuehn, Joseph	Counselor	LPC 5852 CSAC 16057	5	6, 16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2019	1/2019	1/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lewandowski, Lara	Counselor	LMFT-IT 723 SAC-IT 19108	5	14,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Light, Elizabeth	Counselor	LMFT-IT 776	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
McCreadie, Rob	Substance Abuse Counselor	CSAC 15500	5	16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2019	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mulcahy, Brooke	Therapist	APSW 130679 SAC-IT 18181	5	9,16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2020	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Pitzo, Jennifer	Counselor CCS Supervisor	LPC 6337 CSAC 16353	5	6,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2020	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Plesh, Jason	Counselor	LPC 7656 SAC-IT 18494	5	6,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2019	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Scofield, Ethan	Counselor	LPC 7694 SAC-IT 18756	5	6,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2021	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Wagner, Casey	Counselor	LPC-IT 7136 SAC-IT 19771	5	14,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
---------------	-----------	-----------------------------	---	-------	--	---	---------	---------	---------	---

Agency Name: Cornucopia

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Beyer, Alison	Peer Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Cassidy, Sandra	Skills Development Specialist		5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Grantman, Jessica	CCS Supervisor	LCSW 9311	N/A	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Herro, Karen A.	Executive Director	RN 117586	5	12, 20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Pettersen, Erik	Peer Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Gregory Smith
Privacy Officer – Karen Herro

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Allen, Dan	CCS Intake Worker	SW 13061	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2019	10/2019	10/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Behling, Aaron	CCS Intake Worker	SW 14010	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Chew, Kelly	LTE CCS Intake Worker	SW 12595 SAC-IT 19069	5	9,16	10%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ewoldt, Deborah	CCS/CRS Social Worker	SW 8732-120	5	9	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2020	11/2020	11/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Fuhrmann, Marcella (Marcie)	CCS Intake Worker	APSW 131534	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gerke, Sara	CCS Intake Worker	SW 8048-120	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gilbert, Jessica	CCS Service Director	LPC 5318	3	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2021	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gilles, Brittany	CCS/CRS Social Worker	APSW 132030	5	9	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2020	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Harruff, Alexandra	CCS Intake Worker	SW 13457	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Haynes Sauk, Tammy	CCS Service Facilitator	APSW 1435	4,5	9	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hokkanen, Sara	CCS Intake Worker	APSW 128321	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kamp, Sydney	CCS QA Specialist	APSW 130262	5	9	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2020	2/2020	2/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kamps, Zachary	CCS Intake Worker	APSW 131343	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lee, Sheng	CCS Intake Worker	APSW 129975	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Macaulay, Frances	CCS Service Facilitator	APSW 130519	4,5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
McKenzie, Sarah	CCS Service Facilitator	SW 11230	4,5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Meister, Julie	CCS Administrator	LCSW 8385-123	1,2,3	5	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Munson, Erin	CCS Service Facilitator	APSW 129648-121	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Moore, Chloe	Behavioral Health Manager	APSW 131607	5	9	1%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Morris, Emily	CCS Lead Intake Worker	LCSW 9082	5	5	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2020	1/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Peterson, Kyle	CCS Intake Worker	LCSW 9983 SAC-IT 19344	5	5,16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Rodriguez, Tatiana	CCS Bilingual Spanish Intake Worker		5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Roelke, Sarah	CCS Intake Worker	SW 13274-120	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Seiverd, Kristen (Kivi)	CCS Intake Worker	SW 4784-120	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2020	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Sheldon, Patricia	CCS Intake Worker	SW 5263-120	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Stainbrook, Jenna	CCS Service Facilitator	APSW 127607-121	4,5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Stockburger, Nicole	CCS Intake Supervisor	LCSW 8405-123	5	5	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Stringer, Heidi	CCS/CLTS Supervisor	LCSW (1.09) 8502-123	1,3,4,5 (SAP)	5,16	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Tanner Wallace, Melissa	CCS Intake Worker	APSW 126830	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Thao, Mai	CCS Intake Supervisor	LCSW 8238	5	5	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Veloon, Heidi	CCS Service Facilitator	SW 328-120	4,5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Vieaux, Debra	CCS/CRS Backup Social Worker	LPC 2656	5	6	1%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Walasek, Jennifer	CCS Intake Worker	SW 9659-120	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Warner (Sullivan), Terri	CCS Service Facilitator	SW 7736-120	4,5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Wende, Heather	CCS Service Facilitator	APSW 2093-121	4,5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wiemiller, Natasha	CCS Intake Worker	SW 2716-120	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	4/2020	4/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wills, Marykay	PEI Manager, CCS Service Director	LCSW 6570-123	1,3	5	15%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Yang, Hnub	CCS Intake Worker	APSW 130788	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Creative Forces Therapy

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Daentl, Sarah	Skill Builder		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
King, Rebecca	Art Therapist	LPC 7313 ATR 144-36	5	6,17		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Meissner, Emily	Recreational Therapist		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2020	2/2020	2/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Salgado, Jessi	Skill Builder		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schmidt, Kristin	Art Therapist, Professional Counselor	ATR (133-36) LPC (6340-125)	5	6,17		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Stubbs, Lucia	CCS Supervisor	Psychologist 3511	N/A	4		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Trotter, McKayla	Recreational Therapist		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Deeper Insights, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Schmidt, Kristin	CCS Clinical Collaborator	ATR (133-36) LPC (6340-125)	N/A	6,17	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Stubbs, Lucia	Psychologist	Psychologist 3511	5	4	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

**Privacy Officer –
Security Officer –**

Agency Name: Driftless Counseling, LLC dba Trailhead Therapy and Mentoring

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Dedrick, Grady	Therapist	LPC 8436 SAC-IT 18999	5	6,16	<input type="checkbox"/> E <input type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Dimick, Sarah	Therapeutic Mentor		5	14	<input type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Egerdal, Kyle	Therapist	LPC-IT 4659	5	14	<input type="checkbox"/> E <input type="checkbox"/> C	3/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Harris, Sara	APSW	APSW 134066	5	9	<input type="checkbox"/> E <input type="checkbox"/> C	7/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Ruder, Christopher	Owner/ Supervisor	LMFT 1121	N/A	6	<input type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Seehusen, Gregory	Therapist	LPC-IT 7050	5	14	<input type="checkbox"/> E <input type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Stolarick, Shannon	APSW	APSW 131742	5	9	<input type="checkbox"/> E <input type="checkbox"/> C	8/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Agency Name: Dyer Multisensory Approach

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Dyer, Michael A.	Heartmath Trainer/Owner	N/A	5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schwichtenberg, Ric	Supervisor	LCSW 7138-123	N/A	5		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	10/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer - Michael Dyer
Privacy Officer - Michael Dyer

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Abiri, Oseni	APNP	APNP 9867 RN 773383	5	8	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Abiri, Sadat	Owner	APNP 5311 RN 133293	5	8	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Christianson, Kirstin	Array Provider		5	14	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2021	11/2021	11/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Fox, Amanda	RN	RN 198394	5	12	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Harun, Hussain	Pharmacist		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Hoekstra, Sydney	ISDE Worker		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Hylkeman, Lorraine (Lorrie)	APNP	APNP 1857 RN 121674	5	8	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Lobe, Stephanie	Skill Development Specialist		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
McCallum, Cynthia	ISDE Worker		5	15	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Mofikoya, Adebowale	CCS Supervisor	MD 60574	N/A	1	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
VonFrankenberg, Annette	Psychiatric Mental Health Nurse Practitioner	APNP 552 RN 102158	5	7	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	10/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Agency Name: Edelweiss Behavioral Health, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Desai, Anna	Owner/LPC	LPC 4741	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2019	11/2019	11/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Doyle, Kathryn	Therapist	LCSW 9932 SAC-IT 18907	5	5,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Francois, Sarah	Psychotherapist	LCSW 1.09 7579	5	5,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Pieper, Jeremy	Psychotherapist	LMFT 1158	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Steinbauer, Erika	PA	PA 5818	5	11		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Anna Desai
Privacy Officer – Anna Desai

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Alesch, Bryenne	Chief Operating Officer Mental Health Provider;		5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Bostwick, Ashley	Mental Health Provider	LPC-IT 5314	5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Eifert, Mary (McCaleb)	Mental Health Provider		5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gilpin-Parks, Lynn	Owner/ Chief Clinical Officer/ Therapist	LPC 6682-125	5	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2019	11/2019	11/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Knautz, Brock	Mental Health Provider		5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
McArthur, Katharine	Mental Health Provider		5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
McGonagle, Brittany	Mental Health Provider	LPC-IT 5319	5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Miller, Haelee	Mental Health Provider		5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Polacek, Eric	Mental Health Provider		5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Reo, Jessica	Mental Health Provider	APSW 130984	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Spooner, Sadette	Mental Health Provider/ Therapist	LPC 7673 SAC-IT 18180	5	6,16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2019	6/2019	6/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Tranel, Katrina	Mental Health Provider	APSW 131595	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Xiong, Hlee	Mental Health Provider		5	15	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Yates, Ryan	Mental Health Provider		5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Bryenne Alesch
Privacy Officer – Bryenne Alesch

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Crouse, Nicole	CCS Supervisor	LPC 5884 CSAC 15283	N/A	6,16	<input type="checkbox"/> E <input checked="" type="checkbox"/> C		2/2017	2/2017	2/2017	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kraimer, Brianne	Housing Specialist		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mitchell, Andrea	Owner	APSW 131284	5	9	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Marks, Jocelyn	ISDE/ Psychoed Provider	LPC-IT 5001	5	14	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		3/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Quandt, Alaina	Housing Specialist		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		5/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Raupp, Sophie	Employment Specialist		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Smith, Samantha	Housing Specialist		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Strachan, Annie	Employment Specialist		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		8/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Te Stroete, Crystal	Employment Specialist		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Yang, Michael	Employment Specialist		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Employment Resources, Inc. (ERI)

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Brauer, Jessica	Employment Specialist	LPC 7388	5	6	80%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Elswick-Hustad, Sarah	Community Benefits Specialist		5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2021	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Koch, Megan	Work Incentive Benefits Specialist		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Manuel, Ashley	Employment Specialist		5	15	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mitchel, Jolin	Supervisor	LPC 7104-125	N/A	6	10%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Olson, Corinne (Cori)	CCS Program Manager/Benefits & Employment Specialist		5	14	80%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schroeder, Sarah	Benefits Specialist and Pre-Driving Specialist		5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Stark, Kathleen (Katy)	Employment Specialist		5	15	80%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Essence Realized

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Czecholinski, Jennifer	Director	CSW 11931-120	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Veneman, Geraldine	CCS Supervisor	LCSW 8031	N/A	5	5%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	8/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Jennifer Czecholinski
Privacy Officer – Jennifer Czecholinski

Agency Name: Family Service Madison, Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Cogdill, Mark	Case Manager/Mental Health Tech	LPC 8596	5	6	Full-Time	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Fitzpatrick, Megan	Psychotherapist	LPC-IT 5161	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Natera, Emily	Psychotherapist	LPC 7750	5	6	Part-Time	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Nichols, Judith (Jude)	Psychotherapist/ Supervisor	LPC 3009	5	6	Full-Time	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2020	11/2020	11/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Rozek, Heidi	Psychotherapist/ Intake Coordinator	LPC-IT 5018 SAC 16453	5	14,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Stalcup, Bret	Psychotherapist	LMFT-IT 756	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ulm, Mollie	Psychotherapist	APSW 132800	5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Bonner, Nicole	Service Facilitator		4,5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Contreras, Sam	Service Facilitator	SAC-IT 18945	4,5 (SAP)	15, 16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Essenburg, Katherine (Kate)	Service Facilitator	APSW 131184	4,5	9	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2019	2/2019	2/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Goss, April	Service Facilitator	SAC-IT 18478	4,5	15,16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hall, Kitty	Service Facilitator		4,5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2019	11/2019	11/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hardin, Kaitlin	Service Facilitator	APSW 130517	4,5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lancaster, Erica	Therapist	LPC 6310	1,5	6	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
McLellan, Lucy	Clinical Supervisor Psychotherapist	LPC 6037	5	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Olson, Nate	Skills Coach/ Therapist	LMFT 1259	5	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Poedtke, Corey	Service Facilitator		4,5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Rozeske, Jordan	Executive Director/ Supervisor	LCSW 8018	1,3,4,5 (SAP)	5	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schlitz, Elizabeth (Liz)	Service Facilitator		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Sweazy, Jessica	Therapist/ Supervisor/ SDD	LCSW 9433	1,4,5 (SAP)	5	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wollinger, Jacob	Skills Coach		5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Forward Counseling and Consultation LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Frisella, Ann	ISDE Provider		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gilles, Brittany	Skill Developer/ APSW	APSW 132030	5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Haas, Annette	Psychotherapist	LCSW 9533	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Henschel, Amanda	Psychotherapist	LCSW (1.09) 8811	5	5,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hiller, Becky	Psychotherapist	LMFT 1244	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2020	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Murray, Michelle R.	Owner/ Psychotherapist	LCSW (1.09) 7814-123	5	5,16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2020	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Walmer, Michael	Psychotherapist	LPC (1.09) 6294	5	6,16		<input type="checkbox"/> E <input type="checkbox"/> C	3/2019	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Michelle Murray
Privacy Officer – Michelle Murray

Agency Name: Foundations Counseling Center, Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Briesemeister, Lucinda	Psychotherapist	LCSW 9429	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Crabtree, Amanda	Psychotherapist	LCSW 7809-123	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Duprey, Kelly Jo	Psychotherapist	LPC 3645-125	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		9/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gayan, Joseph	Therapist	LPC 8394	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kelly-Martina, Alisa	Supervisor	LCSW 7189-123	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Niekerk, Kati	In-Home Therapist	APSW 131288	5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		11/2021	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Rausch Smith, Brittany	In-Home Therapist	LMFT-IT 506	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		10/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schleicher, April	Supervisor, Psychotherapist	LPC 5266-125	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Storkson, Stephani	Supervisor, Psychotherapist	LMFT 905-124	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		9/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ugur, Jennifer	Therapist	LPC 10086	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		4/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Walden, Emily	In-Home Therapist	APSW 132038	5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C		8/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Four Winds Counseling, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Luedtke, Abigail	Skill Developer	LPC-IT 5119	5	14	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Mitchel, Jolin	Psychotherapist	LPC 7104	5	6	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Moran, Sue	Director/Therapist	LPC 3357 CSAC 1890	5	6,16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Parkes, Judith	CCS Supervisor/Therapist	LCSW 6884	5	5	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Agency Name: Ginko Counseling Services

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Ginko, Amy	Owner/ Psychotherapist	LPC 4697-125	5	6	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Marifrog, Rainbow	Supervisor	LMFT 919	N/A	6	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Security Officer – Amy Ginko
Privacy Officer – Amy Ginko

Agency Name: Golden Mend Wellness and Counseling LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – ServicesArray	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Cyprus, David	Service Facilitator	APSW 132746	4,5	9	<input type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Grantman, Jessica M.	Founder and Provider/ Supervisor	LCSW 9311	1,3,5 (SAP)	5	1.0 FTE <input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Grist, Ryan	Health Coach		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Holt, Amy	Psychosocial Rehab Specialist		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2020	12/2020	12/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Toltzien, Kelly	CCS Supervisor	LPC 6990 AT 111	N/A	6	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Security Officer – Jessica Grantman
Privacy Officer – Jessica Grantman

Agency Name: Goodwill Industries of South Central Wisconsin, Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Golden, Elena	Director of Residential Services/ Supervisor	LCSW 7217	N/A	5	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Privacy Officer – Elena Golden
Security Officer – Elena Golden

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %	Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22		E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Aroonsavath, Linda	Director		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kue, Manila	Administrator		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kue, Mindy	MHP/SAP/SD/ Supervisor	LPC 8044	1,3,5 (SAP)	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lee, Nao Lue	Rehabilitation Worker		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Scharrer, Melanie	MHP/SAP	MD 67055	1,5 (SAP)	1		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
So, Bophia	Service Facilitator		4,5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Vang, Alexa	Service Facilitator		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Vue, Linda	Service Facilitator		4,5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Greenroot Yoga

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Marifrog, Rainbow A.	CCS Supervisor	LMFT 919	N/A	6	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Norelle, Clare	Owner	N/A	5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Security Officer – Clare Norelle
Privacy Officer – Clare Norelle

Agency Name: Hancock Center for Dance/Movement Therapy, Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Lending Halsten, Robyn	Supervisor	LPC, BC-DMT, DTRL #4564-125 #7-37	5	6	10%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wingate, Ann	Dance/Movement Therapist	BC-DMT, DTRL #6-37	5	14	62.5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Laura Rogers
Privacy Officer – Robyn Lending Halsten

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Abel, Wendy	Psychotherapist	LPC 3365	5	6	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2022	12/2022	12/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Dienberg, Candice	Psychotherapist	LCSW 9228 SAC 15826	1,5	5,16	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2019	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lopez Purkapile, Nicole	Service Facilitator		4,5	15	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	12/2022	12/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mayer, Madison	Psychotherapist	LCSW 9238	5	5	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Meyer, Mary	Psychotherapist	LMFT 1330	5	6	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Miller, Tara	Service Facilitator	SW 10285	4,5	9	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Oliver, Kristine	Therapist/Affiliated Provider	LMFT 1242-124	4,5	14	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Olsen, Madalyn	Service Facilitator		4,5	14	75%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Peterson, Andrew D.	Owner/President/ Supervisor	LMFT 834-124	1,3,4,5	6	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2019	5/2019	5/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Peterson, Drew	Rehabilitation Worker		4,5	21	10%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2020	1/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Purkapile, Kristine	LPC-IT	LPC-IT 5281	4,5	15	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Raufman, Kelly	Rehabilitation Specialist		4,5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Riddiough, Claire	Psychotherapist	LCSW 9634 SAC-IT 18398	5	5,16	40%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Roethe, Judy A.	Therapist/Affiliated Provider	LPC 5314-125	4,5	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2019	5/2019	5/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Seichter, Nathan	Rehabilitation Worker		4,5	15	10%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2019	1/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Speich, Stacey	Service Facilitator		4,5	14	65%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2019	5/2019	5/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Unser, Alexis	Psychotherapist	LMFT 1235	5	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Vu, Hleechia (Chia)	Service Facilitator	LCSW 8686-123	1,4,5	5	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wick, Paula	Service Facilitator/ Rehab Specialist		4,5	15	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Woodford, Brenda K.	Affiliated Provider	RN 71949-30	5	12	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Woods, Jane A.	Therapist/Affiliated Provider	LCSW 1938 CSAC 843	1,5 (SAP)	5, 16	30%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2019	6/2019	6/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wuestenberg, Linda	Service Facilitator	LCSW 4284 CSAC 2021	4,5 (SAP)	5, 16	60%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	4/2020	4/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Hope Inspired LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Andreas, Jocelyn	Service Facilitator/Array		4,5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Asbel, Amanda	Service Facilitator/Array	APSW 132413	4,5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Doepfers, Aaron	Service Facilitator	LMFT-IT 784	4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Edgren, Hope	Service Facilitator	APSW 132766	4,5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gonsalves, Valerie	Psychologist	Psychologist 2998	1, 5 (SAP)	4		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Higgins, Jeremy	Service Facilitator		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jones, Elizabeth (Liz)	Owner/ Provider	APSW 132011 SAC-IT 19329	4,5 (SAP)	9,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2021	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kaatz, Sarah	Service Facilitator	SW 2731	4,5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kaiser, Gabrielle	Service Facilitator	APSW 132052	4,5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lancaster, Taran	Service Facilitator		4,5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Martinez, Kathleen	Array Provider	APSW 132770	5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mason, Melanie	Service Facilitator		4,5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Moon, Erin	MHP/SAP	LCSW 9105	1,4,5 (SAP)	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Nelson, Nicole	Service Facilitator	SAC-IT 17223	4,5	16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Oetting, Jillian	SD/MHP/SAP/ Supervisor	LPC 8155	1,3,5 (SAP)	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Rasmussen, Makenzi	Service Facilitator	APSW 132121	4,5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Repplinger, Michael	Clinical Supervisor	MD 52591	1 (SAP)	2		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	1/2021	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schumaker- Karstetter, Stephanie	Service Facilitator/Array	APSW 132647	4,5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2021	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Scott, Tineisha	Service Facilitator/Array	LMFT-IT 307	4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2021	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Smith, Julia	Psychotherapist	LMFT 733	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Sokolova, Kseniya	Service Facilitator/Array		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Stone, Kirk	Service Facilitator/ Array Provider		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Thomas, Courtney	Admin/Array Provider		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Toltzien, Tina	Service Facilitator	APSW 132050	4,5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Werth, Lauren	Service Facilitator/Array		4,5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2021	11/2021	11/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Horizon High School

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %	Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22		E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Brown, Madeline	AODA Counselor	CSAC 16120	5	16		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	7/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Duprey, Kelly Jo	CCS Supervisor	LPC 3645-125	N/A	6	5%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	12/2018	2/2019	2/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Goll, Traci	Director		5	15	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Housing Initiatives, Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
McGettigan, Kevin	Case Manager/Peer Specialist		5	20	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2021	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Moran, Sue	CCS Supervisor	LPC 3357 CSAC 1890	N/A	6,16	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Scott, Kevin	Case Manager		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2021	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Agency Name: Imagine A Child's Capacity

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Banchik-Lesniak, Julia	Behavioral Consultant		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Eggen, Ellen	Psychotherapist	LPC 3849	5	6		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Erickson, Rachael	LPC	LPC 3980	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hammer, Sharon	Psychotherapist	LPC 6822	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hodgkins, Kathleen	Clinical Social Worker	LCSW 7698	5	5		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hoeme, Lisa	Psychotherapist	LPC 5051	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Plamann, Chelsea	Behavior Consultant		5	15		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Prosch, Shannon	Educational & Behavioral Consultant		5	15		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	5/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schmidt, Kimberly	Psychotherapist	LPC 4385	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Sward, Jenna	Educational & Behavior Consultant		5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Thompson, Leah	Psychotherapist	LPC 6409	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2020	1/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wise, Sarah	Psychotherapist	LPC 7851	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Ellen Eggen
Privacy Officer – Ellen Eggen

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %	Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22		E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Becker, Joanna	Therapist	LCSW 8791	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Bosma, Emily	Service Facilitator	LPC-IT 4488	4,5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Cook, Nikki	Psychosocial Rehab Specialist		5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2019	1/2019	1/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Craig, Abigail	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2021	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Dillon, John	Rehabilitation Worker		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ditlow, Theresa	Psychotherapist	LPC 5019	5	6	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Doyle, Kathryn	LCSW	LCSW 9932 SAC-IT 18907	5	5,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ellington-Deitz, Victoria M.	Therapist	LPC 6033-125	1,5	6	20%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2019	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Herrmann, Matthew	Therapist	LPC-IT 4766-226	5	14	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hyland, Lynn	Psychologist	Psychologist 2335	5	4	10%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kearns, Abigail	Clinic Director	LCSW 7780	1,3,5 (SAP)	5	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kendricks, Kelly	Therapist	LPC-IT 4714	5	14	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Khang, Chienyann	Service Facilitator	APSW 128816	4,5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2021	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kies, Kim	Skills Provider		5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Kolker, Jeanne S.	Clinic President	LPC 5967	1,3,5	6	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2019	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lang, Elyse	Therapist	LPC 7210	1,5 (SAP)	6	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2020	1/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lambert, Joe	Therapist	LPC 6271 CSAC 16324	1,5 (SAP)	6, 16	20%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lauth, Katherine (Kate)	Therapist	LCSW 9125-123	1,5 (SAP)	5	10%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2020	6/2020	6/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lewis, Ann C.	Therapist	LPC 2935-125	5	6	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2019	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Martorana, Julie Ann	Service Facilitator		4,5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Merino, Carrie	Therapist	LPC 5756	5	6	20%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Natera, Emily	Therapist	LPC 7750	5	6	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Niesen, Rachel	Therapist	LCSW 9799 SAC-IT 18974	1,5 (SAP)	5,16	30%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Parkes, Claudia	Intern/ Clinical Student		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Pederson, Tracy	Therapist	LCSW 8875	1, 5 (SAP)	5	20%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Penkal, Kelsey	Service Facilitator		4,5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Peterson, Jeffrey	Therapist	LCSW 7840	5 (SAP)	5	20%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Rollins, Tara E.	Therapist	LPC 4978-125	1,5 (SAP)	6	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2019	2/2019	2/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schneider, Erika	Service Facilitator		4,5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schueffner, Angela M.	Therapist	LMFT 884-124	5	6	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2019	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Story, Kira	Psychotherapist In- Training	LMFT-IT 829	5	14	40%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Taylor, Kylie	CCS Service Director/ Supervisor	LPC 5725	1,3, 5 (SAP)	6	75%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2020	1/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Toth, Ariyanna	Intern/ Clinical Student		5	22	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2019	10/2019	10/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Tseng, Claire	Therapist	LCSW 9974	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Warpula Schultz, Jessica	Therapist	LMFT 1181	1,5 (SAP)	6	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wooddell, Catherine	Service Facilitator		4,5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Jason C Smith MA LMFT LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Newman, Sara	CCS Supervisor	LCSW 8016-123	N/A	5	<input type="checkbox"/> E <input checked="" type="checkbox"/> C		4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Smith, Jason	Owner/Psychotherapist	LMFT 949-124	5	6	<input type="checkbox"/> E <input type="checkbox"/> C		3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Jason Smith
Privacy Officer – Jason Smith

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %	Caregiver Misconduct Background Checks – Dates Conducted				
			Functions	Minimum Qualifications Per DHS 36.10 (c)		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
			1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	1-8 1-14 1-21 Any		<input type="checkbox"/> E <input type="checkbox"/> C				<input type="checkbox"/> Y <input type="checkbox"/> N
Bear-Rittenmeyer, Mary	Clinical Specialist IIB		4,5	14		<input type="checkbox"/> E <input type="checkbox"/> C	04/2022	04/2022	04/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Beckler, Megan	Clinical Specialist IIB		4,5	14		<input type="checkbox"/> E <input type="checkbox"/> C	07/2020	07/2020	07/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Borley, Abigail	Service Facilitator	APSW 132336	4, 5	9		<input type="checkbox"/> E <input type="checkbox"/> C	08/2022	08/2022	08/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Bosko, Bryana	Mental Health Technician (YH)		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	08/2020	08/2020	08/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Boson, Olin	Clinical Specialist IIC	LMFT 1429	4,5	6		<input type="checkbox"/> E <input type="checkbox"/> C	05/2022	05/2022	05/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Burda, Alisson	Clinical Team Manager	LCSW 7678	1	5	50	<input type="checkbox"/> E <input type="checkbox"/> C	02/2021	02/2021	02/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Calvert, Michael “Mike”	Senior Clinical Specialist	LCSW 8498	1,4,5 (SAP)	5	50	<input type="checkbox"/> E <input type="checkbox"/> C	04/2020	04/2020	04/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Chapin-Donalson, Suzanne	Registered Nurse	RN 119179	5	12		<input type="checkbox"/> E <input type="checkbox"/> C	12/2020	12/2020	12/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Christie, Nichole	Clinical Specialist IA (Grow CCS & YH)	LCSW 9794	1,4,5 (SAP)	5		<input type="checkbox"/> E <input type="checkbox"/> C	06/2021	06/2021	06/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Coffin, John	Clinical Specialist IIB		5	14		<input type="checkbox"/> E <input type="checkbox"/> C	12/2021	12/2021	12/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Damm, Michelle	Clinical Specialist IIC	LPC-IT 4423	4, 5	14		<input type="checkbox"/> E <input type="checkbox"/> C	12/2019	12/2019	12/2019	<input type="checkbox"/> Y <input type="checkbox"/> N
Eberhardt, Shari	APNP	APNP 6567 RN 189691	5	8		<input type="checkbox"/> E <input type="checkbox"/> C	07/2021	05/2021	05/2021	<input type="checkbox"/> Y <input type="checkbox"/> N

Eigenberger, Gabriella (Abby)	Community Clinical Specialist IA (PROPS)		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	04/2022	04/2022	04/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Ellison, Elizabeth	Clinical Specialist IIIC	LMFT 970	4,5	6	50	<input type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Fox, Morgan	Clinical Specialist IIB (GROW)		4,5	14		<input type="checkbox"/> E <input type="checkbox"/> C	06/2020	06/2020	06/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Frazier, Bryan	Clinical Specialist	LPC-IT (5086)	5	14		<input type="checkbox"/> E <input type="checkbox"/> C	09/2021	09/2021	09/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Freeman, Kimberly	Peer Specialist/ SF (GROW East)		4,5	20		<input type="checkbox"/> E <input type="checkbox"/> C	04/2021	04/2021	04/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Fry, Hannah	Clinical Specialist 1A (Yahara House)	LPC-IT 4396 SAC-IT 19047	4,5 (SAP)	14,16		<input type="checkbox"/> E <input type="checkbox"/> C	03/2022	03/2022	03/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Galka, Andrea	Clinical Team Leader	LMFT (1.09) 1048	1,5 (SAP)	6,16	50	<input type="checkbox"/> E <input type="checkbox"/> C	04/2020	04/2020	04/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Gloudeman, Shirley	Registered Nurse	RN 136399	5	12	50	<input type="checkbox"/> E <input type="checkbox"/> C	08/2020	08/2020	08/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Goldbaum, Hannah	Clinical Specialist IA (YH)		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	06/2021	06/2021	06/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Gonzalez, Elizabeth	Clinical Specialist IIIB (YH)	LCSW 8195-123	1,5 (SAP)	5	50	<input type="checkbox"/> E <input type="checkbox"/> C	03/2022	03/2022	03/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Goth, Ann	Service Facilitator/ Supervisor	LCSW 10067	1, 4, 5 (SAP)	5		<input type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Hamelink, Jamie	Clinical Specialist IA (PROPS)		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	09/2022	09/2022	09/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Harrison, Lorayne	Clinical Specialist IIB (GROW)		4,5	14		<input type="checkbox"/> E <input type="checkbox"/> C	06/2020	06/2020	06/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Hartsough, Shanta	Program Support Specialist II		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	07/2020	07/2020	07/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Henschel, Amanda	Clinical Specialist IIIB	LCSW (1.09) 8811	5	5,16		<input type="checkbox"/> E <input type="checkbox"/> C	09/2022	09/2022	09/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Her, Zoua	Clinical Specialist IA (Journey GROW)		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	09/2022	09/2022	09/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Horsens, Abbey	Clinical Specialist IA (Journey GROW)		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	09/2021	09/2021	09/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Jaramillo, Arizona	Service Facilitator/ RNII	RN 254968	4,5	12		<input type="checkbox"/> E <input type="checkbox"/> C	01/2022	01/2022	01/2022	<input type="checkbox"/> Y <input type="checkbox"/> N

Revised 1.3.2023

Kay, Lilliana	Student 2/ Intern		5	22		<input type="checkbox"/> E <input type="checkbox"/> C	08/2022	08/2022	08/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Kirch, Renee	Clinical Specialist IIC	LPC 7945 SAC 16483	1,4,5 (SAP)	6,16		<input type="checkbox"/> E <input type="checkbox"/> C	01/2019	01/2019	01/2019	<input type="checkbox"/> Y <input type="checkbox"/> N
Klawiter, Aaron	Lead Clubhouse Specialist	LCSW 9538	1,4,5 (SAP)	5	50	<input type="checkbox"/> E <input type="checkbox"/> C	04/2020	04/2020	04/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Kouba, Rachel	Clinical Team Manager	LCSW 21544	4,5	5		<input type="checkbox"/> E <input type="checkbox"/> C	08/2021	08/2021	08/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Kramer, Scott	Clinical Specialist VB	LPC-IT 4828 SAC-IT 19320	5	14,16		<input type="checkbox"/> E <input type="checkbox"/> C	10/2019	10/2019	10/2019	<input type="checkbox"/> Y <input type="checkbox"/> N
Kuiper, Andrea	Clinical Specialist IA		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Lickel, Robin	Clinical Specialist II	LPC 4605 CSAC 15268	5	6,16	50	<input type="checkbox"/> E <input type="checkbox"/> C	01/2020	01/2020	01/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Lopez Morales, Lizbeth	Clinical Specialist IA		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	07/2022	07/2022	07/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Lozano, Francisco (Cisco)	Clinical Specialist IIB		4,5	14		<input type="checkbox"/> E <input type="checkbox"/> C	05/2021	06/2021	06/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
MacDonald, Laina	Clinical Specialist IIB Clinical Team Lead - CCS/GROW Program	LPC 10133	1,4,5 (SAP)	6		<input type="checkbox"/> E <input type="checkbox"/> C	09/2020	09/2020	09/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Malec, Alexandra	Community Clinical Specialist IA (GROW)		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	05/2022	05/2022	05/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Masbruch, Brett	Clinical Specialist IVB	LPC 5654 CSAC 14161	5	6,16		<input type="checkbox"/> E <input type="checkbox"/> C	10/2019	10/2019	10/2019	<input type="checkbox"/> Y <input type="checkbox"/> N
Mattson, Amy	Peer Specialist/RN	RN 164551	5	12,20		<input type="checkbox"/> E <input type="checkbox"/> C	04/2021	04/2021	04/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Mercy, Meg	Student 2/ Intern		5	22		<input type="checkbox"/> E <input type="checkbox"/> C	08/2022	08/2022	08/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Miller, Lauren	Student 2/ Intern		5	22		<input type="checkbox"/> E <input type="checkbox"/> C	08/2022	08/2022	08/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Milner, Karen	Psychiatrist	26155 MD	5	1	50	<input type="checkbox"/> E <input type="checkbox"/> C	04/2020	04/2020	04/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Moorman, Daniel	Clinical Specialist IA (YH)		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	07/2022	07/2022	07/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Parfitt, Jenna	Clinical Specialist IIB (YH)	OT 6923	4,5	13		<input type="checkbox"/> E <input type="checkbox"/> C	01/2021	01/2021	01/2021	<input type="checkbox"/> Y <input type="checkbox"/> N

Revised 1.3.2023

Pearson, James	Clinical Team Manager	LCSW 8531 CSAC 15822	5	5,16		<input type="checkbox"/> E <input type="checkbox"/> C	09/2020	09/2020	09/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Peterson, Joshua	Clinical Team Manager	LCSW (1.09) 7739	1,4,5 (SAP)	5,16		<input type="checkbox"/> E <input type="checkbox"/> C	02/2022	02/2022	02/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Phillips, Carol	Clinical Specialist IA	SW 3440-120	4,5	9	100	<input type="checkbox"/> E <input type="checkbox"/> C	03/2022	03/2022	03/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Rickerl, Kathleen	Registered Nurse	RN 72109	5	12	50	<input type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Rittenmeyer, Tyson	Director of Program Services	LPC 8420	5	6		<input type="checkbox"/> E <input type="checkbox"/> C	10/2021	05/2022	05/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Roberts, Molly	Clinical Specialist IIC	APSW 131872	5	9		<input type="checkbox"/> E <input type="checkbox"/> C	04/2020	04/2020	04/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Roehl, Nicole	Mental Health Technician (YH)		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	03/2019	03/2019	03/2019	<input type="checkbox"/> Y <input type="checkbox"/> N
Rossmeissl, Peter	Clubhouse Generalist		5	20		<input type="checkbox"/> E <input type="checkbox"/> C	09/2022	09/2022	09/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Santos, Bryzena	Clinical Specialist IA		4,5	14		<input type="checkbox"/> E <input type="checkbox"/> C	08/2020	08/2020	08/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Schaefer, Shannon	Clinical Specialist II	LCSW 8694	1,4,5 (SAP)	5	50	<input type="checkbox"/> E <input type="checkbox"/> C	01/2019	01/2019	01/2019	<input type="checkbox"/> Y <input type="checkbox"/> N
Schlough, Bradley "Brad"	Director of Community Services	LPC 2439	1,3 (SAP)	6	50	<input type="checkbox"/> E <input type="checkbox"/> C	12/2019	12/2019	12/2019	<input type="checkbox"/> Y <input type="checkbox"/> N
Smith, Sawyer	Clinical Specialist IIB	LPC 10018	1,4,5 (SAP)	6		<input type="checkbox"/> E <input type="checkbox"/> C	08/2020	08/2020	08/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Strauss, Sarah	Clinical Specialist IIC	APSW 132902	5	9		<input type="checkbox"/> E <input type="checkbox"/> C	09/2022	12/2022	12/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Sutkay, Renee	Associate Director	LPC (1.09) 4798-125	1,3,5 (SAP)	6,16	50	<input type="checkbox"/> E <input type="checkbox"/> C	03/2021	03/2021	03/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Szocik, Eva	Service Facilitator		4, 5	15		<input type="checkbox"/> E <input type="checkbox"/> C	01/2020	01/2021	01/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Taylor, Laura	Clinical Specialist IIB		4, 5	15		<input type="checkbox"/> E <input type="checkbox"/> C	01/2021	01/2021	01/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Tempel, Ashley	Program Support Specialist II		4, 5	20		<input type="checkbox"/> E <input type="checkbox"/> C	07/2021	07/2021	07/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Thakor, Sheila	Physician III	MD 31401	1,5 (SAP)	2	50	<input type="checkbox"/> E <input type="checkbox"/> C	06/2019	06/2019	06/2019	<input type="checkbox"/> Y <input type="checkbox"/> N

Thao, Lyda	Clinical Specialist IIB		5	14		<input type="checkbox"/> E <input type="checkbox"/> C	07/2019	07/2019	07/2019	<input type="checkbox"/> Y <input type="checkbox"/> N
Uttal, Lynet	Clinical Volunteer		5	Volunteer		<input type="checkbox"/> E <input type="checkbox"/> C	02/2019	02/2019	02/2019	<input type="checkbox"/> Y <input type="checkbox"/> N
Van Abel, James	Clinical Specialist IA		4,5	15	50	<input type="checkbox"/> E <input type="checkbox"/> C	06/2021	07/2021	07/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Von Bauer, Henning	Clinical Team Leader	LCSW 6923	1,4,5	5		<input type="checkbox"/> E <input type="checkbox"/> C	07/2020	07/2020	07/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Walsh, Ann	Registered Nurse	RN 124776	4,5	12	50	<input type="checkbox"/> E <input type="checkbox"/> C	05/2020	05/2020	05/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Weathers Jr., Marcus	Student 4/ Doctoral Intern (PROPS)		5	22		<input type="checkbox"/> E <input type="checkbox"/> C	05/2022	05/2022	05/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Weber, Lindsey	Team Leader (CCS-Grow)	LCSW 9710	1,4,5 (SAP)	5	50	<input type="checkbox"/> E <input type="checkbox"/> C	09/2021	09/2021	09/2021	<input type="checkbox"/> Y <input type="checkbox"/> N
Whearty, Deyanira	Clinical Specialist IIB		4,5	14		<input type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input type="checkbox"/> Y <input type="checkbox"/> N
Wright, Nichole	Clinical Team Leader / SAP	LPC (1.09) 5096	1 (SAP)	6,16	50	<input type="checkbox"/> E <input type="checkbox"/> C	01/2020	01/2020	01/2020	<input type="checkbox"/> Y <input type="checkbox"/> N
Zhou, Kaiqi	Student 4 (Doctoral Intern- YH)		5	22		<input type="checkbox"/> E <input type="checkbox"/> C	06/2021	06/2021	06/2021	<input type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Kabba Recovery Services LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Allee-Jatta, Sara	Counselor/ Owner	CSAC 16292	5	16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Ball, Ashley	CCS Supervisor	LCSW 1115	N/A	5	<input type="checkbox"/> E <input type="checkbox"/> C	7/2020	7/2020	7/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Jatta, Lamin	Rehabilitation Worker		5	21	<input type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Lewis, Catherine	Counselor/ Supervisor	LPC 8278 CSAC 16570	5	6,16	<input type="checkbox"/> E <input type="checkbox"/> C	9/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Privacy Officer – Sara Allee-Jatta
Security Officer – Sara Allee-Jatta

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %	Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22		E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Akins, Emily	Peer Support Specialist		4,5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Assah, Mary	Rehab Worker		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Assah, Pius	Service Facilitator		4,5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Girard, Colette	Service Facilitator		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2020	12/2020	12/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Haas, Annette	MHP	LCSW 9533	1	5	5%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jallow, Kaddijatou	Service Facilitator		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Moore, Khara	Owner	SAC-IT 19180	4,5 (SAP)	14, 16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Sackey, Nathaniel	Service Facilitator		4,5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Sackey, Olivia	Administrative Assistant		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Thomas, Gerald	Supervisor/ MHP	Psychologist 1367	1,3,5	4,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	4/2020	4/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

CCS STAFF LISTING – Chapter DHS 36

Agency Name: Lutheran Social Services of Wisconsin and Upper Michigan, Inc.

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Bobek, Shelby	Therapist	LCSW 9820	4,5	5	80%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Braun, Ericca	Peer Support Specialist- OTSC		5	20	80%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Campion, Shannon	Human Services Professional- OTSC		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Dobson, Keoinia	Service Facilitator	LPC-IT 7145	4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Feryance, Samantha	Program Manager	LPC 6635	1,3 (SAP)	6	10%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Finoguina, Alexandra	Service Facilitator		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Russell, Sydney	Peer Support Specialist- OTSC		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Tucker, Carleigh	Service Facilitator		4, 5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Valentin, Celie	Service Facilitator Director	LPC 7481	1, 4, 5 (SAP)	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Williams, Carla	Program Supervisor- Off the Square Club		5	15, 20	30%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Bohlman, Ann	Psychotherapist	LCSW 7018	1,5	5	25%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	1/2020	1/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jendus, Melissa	Service Facilitator		4,5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Metzger, Aimee	Therapist	LCSW 8882	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Meyer, Annalisa	Service Facilitator	LMFT 672	1,3,4,5 (SAP)	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Millman, Debra A.	Clinical Supervisor	LPC 4177-125	1,3,5 (SAP)	6	75%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2019	11/2019	11/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Moll, Nicole	Service Facilitator	APSW 132198	4,5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Monson, Shannon	Psychotherapist	LPC-IT 5342	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mortensen, Cassie	Service Facilitator		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2020	6/2020	6/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Noot, Kari	Service Facilitator	SW 7209	4,5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ostrander, Haley	Therapist	LCSW 9718	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2022	12/2022	12/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Penaranda, Danielle	Service Facilitator	LCSW 9968	1,4,5 (SAP)	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Peterson, Janessa	Service Facilitator		4,5	14		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Reategui DeWitt, Krisha	Service Facilitator		4,5	14		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	11/2021	11/2021	11/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schmidt, Claudia	Psychotherapist	LPC 6424	1,5	6	25%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Madison Trauma Therapy, LLC

CCS STAFF LISTING – Chapter DHS 36

Weiss, Hannah	Service Facilitator	LPC-IT 7113	4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Zastrow, Liesa	Rehab Worker	SW 7140	5	9	35%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Maleck Therapy, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Toltzien, Kelly	Supervisor	LPC 6990 AT 111	N/A	6	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Maleck, Sarah	Owner/ Therapist	LMFT 977 LPC 5370	5	6	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Chappell, Steven	ISD/ Psychoed Provider	OTA 5032	5	18	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	4/2020	4/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Cornell, Elliot	Service Facilitator	APSW 131938	4, 5	9	100%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Crouse, Nicole	CCS Supervisor	LPC 5884 CSAC 15283	1	6, 16	10%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	1/2021	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Dorfman, Michael	Service Facilitator	APSW 130991	4, 5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Dunlavey, Bayley	Service Facilitator		4, 5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Grace, Emily	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2020	11/2020	11/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hamlett, Danna	MHP	LMFT 833	1	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2019	1/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Howard, Nicholas	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hughes, Janet	Service Facilitator	CSAC 16194	4, 5	16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2019	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Klekamp, Jennifer	Program Director and Service Director	LPC 7532 SAC 16150	1, 3, 4, 5 (SAP)	6, 16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2021	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kuecken, Kristen	Service Facilitator	SAC-IT 19053	4, 5 (SAP)	15,16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lein, Samantha	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lein, Stephanie	Individual Skill Developer		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
McCrum, David	Service Facilitator		4, 5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2020	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Nelson, Alysia	Program Director and Director of PD	CSAC 16372	4, 5 (SAP)	16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Olson, Angel	Service Facilitator	SW 12866 SAC-IT 20001	4, 5 (SAP)	9,16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Rothschadl, Paige	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Sherman, Kaitlin	Service Facilitator		4, 5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ullmark, Baylie	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Warr, Mikayla	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Weigman, Mallorie	Service Facilitator		4, 5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wills, Jenna	Service Facilitator	APSW 130961	4, 5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Alysia Nelson
Privacy Officer – Alysia Nelson

Agency Name: Mercyland Psychiatry

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Abiri, Sadat	CCS Supervisor	APNP 5311	N/A	8		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mofikoya, Adebawale	Medical Director/Provider	MD 60574	5	1		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Trost, Jean	Psychiatric Nurse Practitioner	APNP 10932	5	8		<input type="checkbox"/> E <input type="checkbox"/> C	9/2021	1/202	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Michelle Ayres, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Ayres, Michelle	Owner/ Therapist	LMFT 893	5	6	<input type="checkbox"/> E <input type="checkbox"/> C	6/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Lending Halsten, Robyn	CCS Supervisor	LPC 4564 DT 7	N/A	6	<input type="checkbox"/> E <input type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Privacy Officer – Michelle Ayres
Security Officer – Michelle Ayres

Agency Name: Monarch Addiction Recovery Clinics, S.C.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Baley, Teaghen	Peer Support Specialist		5	20	<input type="checkbox"/> E <input type="checkbox"/> C	7/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Brown, Sharita	Service Facilitator		4,5	14	<input type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Cooper, Marta	Nurse Practitioner	RN 199582 APNP 9218	5	8	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Croft, Howard	Medical Director	MD 27912	5	2	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Glomski, Sarah	Mental Health Clinician	LPC (1.09) 6821	1,5 (SAP)	6,16	<input type="checkbox"/> E <input type="checkbox"/> C	2/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Morshead, Megan	Recovery Coach		5	20	<input type="checkbox"/> E <input type="checkbox"/> C	9/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Ransom, Annmarie	Nurse Practitioner	APNP 7277 RN 181007	5	8	<input type="checkbox"/> E <input type="checkbox"/> C	12/2021	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Repplinger, Michael	Medical Director/ Supervisor	MD 52591	1,3,5 (SAP)	2	<input type="checkbox"/> E <input type="checkbox"/> C	7/2020	7/2020	7/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Riley, Patrick	Service Facilitator/ AODA Counselor	SAC-IT 18894	4,5 (SAP)	16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Seidel, Jessica	Nurse Practitioner	RN 189834 APNP 10261	5	8	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
South, Kelsey	Service Facilitator		4,5	14	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Villella, Brooke	SAC-IT	SAC-IT 19641	5	14,16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2021	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Williams, Maggie	Physician Assistant	PA 5450	5	11	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Agency Name: Moontree Psychotherapy Center

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Decker, Dale	CCS Supervisor	LCSW 6789 CSAC 11475	N/A	5,16	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2019	9/2019	9/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Eisen, Merija	Psychotherapist	LMFT 859	5	6	100%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	6/2019	6/2019	6/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Nickles, Carol	Psychotherapist	LCSW 2843	5	5	100%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	10/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Reeder, Elizabeth (Libby)	Psychotherapist	LMFT 901	5	6	100%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	9/2019	9/2019	9/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Scherer, Abbey	Psychotherapist	LPC 5149	5	6	100%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Dale Decker
Privacy Officer – Dale Decker

Agency Name: Mosaic Consulting, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Ibarra, Veronica	Owner		5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Maleck, Sarah	Clinical Supervisor	LMFT 977 LPC 5370	N/A	6		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Veronica Ibarra
Privacy Officer – Veronica Ibarra

Agency Name: Natures Ark Behavioral Health Services LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Echols, Arkeya	Owner/Provider		5	14		<input type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kleibor, Rachel	CCS Supervisor	LCSW (1.09) 7255-123	N/A	5,16		<input type="checkbox"/> E <input type="checkbox"/> C	12/2020	12/2020	12/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Arkeya Echols
Privacy Officer – Arkeya Echols

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Chhoeun, Samantha	Rehabilitation Worker		5	21	<input type="checkbox"/> E <input type="checkbox"/> C	6/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Garden, Ann	MHP	LPC 1887	1,5	6	<input type="checkbox"/> E <input type="checkbox"/> C	7/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Keys, Linda	Clinical Supervisor/ MHP	LCSW 2877	1,3,5 (SAP)	5	<input type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Montgomery, Katherine	Service Facilitator		4,5	15	<input type="checkbox"/> E <input type="checkbox"/> C	7/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Thao, See	Service Facilitator		4,5	15	<input type="checkbox"/> E <input type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Vang, Anerlee	Service Facilitator	RN 252643	4,5	12	<input type="checkbox"/> E <input type="checkbox"/> C	3/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Vang, Doua	President/ CEO		5	15	<input type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Vang, Everett	Service Facilitator		4,5	21	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Vang, Ricky	Service Facilitator		4,5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Vang, Schwaw	Service Facilitator		4,5	14	<input type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Yang, Maivaj	Service Facilitator		4,5	15	<input type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Ziegert, Kathy	CCS Supervisor	LCSW 7592	N/A	5	<input type="checkbox"/> E <input type="checkbox"/> C	11/2020	11/2020	11/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

**Privacy Officer – Linda Keys
Security Officer – Doua Vang**

Agency Name: New Growth Mental Health Counseling, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Cooper, Susan A	MH Therapist/ SA Counselor	LCSW 8616 CSAC 15819	5	5,16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		12/2020	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Erhardt, Anne	MH Therapist/ SA Counselor	LMFT 1209-124	5	6	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		12/2020	12/2020	12/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kleibor, Rachel	MH Therapist/ SA Counselor	LCSW (1.09) 7255	5	5,16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C		12/2020	12/2020	12/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Anne Erhardt
Privacy Officer – Anne Erhardt

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Cummings, Jennifer	Therapist	LCSW 7928	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	6/2020	6/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Douglas, Heather	Co-Owner, Supervisor	LPC 4925-15	1,3,5 (SAP)	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2020	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Douglas, Tyler	Service Facilitator		4,5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Duhr Stowell, Natalie J.	Therapist	LMFT 1101-124	5	6	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ebbott, Jennifer	Therapist	LCSW 7109-123	1,3,5 (SAP)	5	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hooper-Lane, Eli	Administrative Assistant, SF		4,5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2019	5/2019	5/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jackson, Sally	Therapist	LCSW 9167	1, 5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2020	2/2020	2/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jensen, Alena	Therapist	LCSW 7984	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jordan-Zammuto, Lindsay	Therapist	LCSW 7482	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Joseph, Christiam	Therapist	LCSW 8283-123	5	5	40%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2019	5/2019	5/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lyons, Nicole	Therapist	LCSW 9155	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2021	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Matthews, Dia (Austine)	Therapist	LPC 7424	1,5 (SAP)	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2019	9/2019	9/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Meister, Karyl	Therapist	LPC-IT 1962	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mosher-Garvey, Amy	Co-Owner, Supervisor	LCSW 6592 CSAC 2118	1,5 (SAP)	5,16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Seeley-Schreck, Heather W.	Therapist	LMFT 1036-124	1,5	6	80%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
-------------------------------	-----------	------------------	-----	---	-----	---	--------	--------	--------	---

Security Officer – Amy Mosher-Garvey
Privacy Officer – Amy Mosher-Garvey

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Atkinson, Francesca	Service Facilitator		4,5	15	50%	<input type="checkbox"/> E <input type="checkbox"/> C	8/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Bopp, Jeffrey	Therapist/ SDD	LPC 7598	1, 5	6	75%	<input type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Boyd, Bethany	Array Provider	RN 226502	5	12	25%	<input type="checkbox"/> E <input type="checkbox"/> C	8/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Carpenter, Kate	Service Facilitator		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Conn, Alane	Housing Specialist	SW 10641	5	9	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Faulman, Rachel	Service Facilitator	APSW 131772	4,5	9	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Fox Kingwill, Samantha	Service Facilitator		4,5	14	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2019	6/2019	6/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Franklin, Jody	Peer Support Specialist		5	20	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Goldade, Kristi	Service Facilitator		4,5	14	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hamilton, Dianne	Array Provider		5	21	75%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hanson, Jennifer	Service Facilitator	APSW 127646	4,5	9	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	8/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Johnson, Samantha	SF/ ISDE		4,5	15	25%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Levenson, Matthew	Service Facilitator		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Miller, David	Director/ Therapist Supervisor	LMFT 1142	1,3,5 (SAP)	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Milstein, Karen	Peer Specialist		5	20		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Neal, David	Service Facilitator		4,5	15	20%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Roach, Heather	Peer Specialist		5	20	25%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Roe, Brendan	Service Facilitator	APSW 132901	4,5	9	100%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Rose, Emma	Physician Assistant	PA 3237	5	11		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schmitt, Jenna	Service Facilitator	APSW 130901	4,5	9	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	1/2021	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Timler, Kiley	Peer Support Specialist		5	20	25%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Torinus, Dan	Psychotherapist	LCSW 8745	5	5	25%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	2/2020	2/2020	2/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Van De Weerd, Skyler	Service Facilitator		4,5	15	25%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Veneman, Geraldine	Psychotherapist	LCSW 8031	5	5	25%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	8/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – David Miller
Privacy Officer – Jeffrey Bopp

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Alpert, Jennifer	Individual/Family Therapist	APSW 132333	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Barnett, Niquanna	Individual/Family Therapist	LMFT-IT 255	5	14	4%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Buske, Kristi	Service Facilitator		4,5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Caceres-Turcios, Alice	In-Home Therapist	APSW 132825	5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Cali, Samuel	Individual Skill Developer		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Derry, Ashley	Individual/Family Therapist	LMFT 1416	5	6	7%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Erdos, Chandler	ISDE Provider		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Felton, Carlee	Service Facilitator		4,5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Grabon, Jennifer	Individual/Family Therapist	LPC-IT 5062	5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Grafenauer, Kimberly	Clinical Student/ Intern		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hawley, Jennifer	Individual/Family Therapist, Supervisor	LPC 3985	1,3,5 (SAP)	9	33%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2020	1/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hermus, Madelyn	Clinical Student/ Intern		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Howard, Michelle	Individual/Family Therapist	LPC 8276 SAC-IT 18255	5 (SAP)	6,16	27%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2021	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Huemmer, Hannah	In-Home Therapist	LMFT-IT 1005	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Jones, Amanda	Clinical Student/ Intern		5	22	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N
Kanitz, Fern	Individual/ Family Therapist	LPC 4552	5	6	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2019	2/2019	2/2019	<input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N
Keller, Alaina	Service Facilitator		4,5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N
Keller, Kelly	Service Facilitator	LPC 8017	4,5	6	90%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N
Kelly, Lauren	In-Home Therapist	APSW 131962-121	5	9	20%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	4/2020	4/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Korn, Melissa	Service Facilitator		4, 5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Leggiere, Laurel	In-Home Therapist	LCSW 9854	1,3,5 (SAP)	5	19%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2019	5/2019	5/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Legreid, Dayne	Individual/Family Therapist	LPC 8229	5	6	31%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2021	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Levy, Gette	Individual/Family Therapist	Art Therapist 137	5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2019	10/2019	10/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Long, Tia	Individual/Family Therapist	LPC 5771	1,5	6	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2019	2/2019	2/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lucas, Jennifer	In-Home Therapist		5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Maunu, Anna	Clinical Student/ Intern		5	22	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Morioka, Shelby	Individual/Family Therapist/ Supervisor	LCSW 9430	1,3,4,5 (SAP)	5	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Parke, Stacey	Individual/Family Therapist, Supervisor	LCSW 6601	1,3,5	5	33%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Pruett, Melissa	Individual/Family Therapist	LMFT 1106	5	6	23%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2021	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Prust, Samantha	Individual/Family Therapist	APSW 131979	5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Reetz, Kimberly	Service Facilitator		4,5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Rojo, Colleen	Individual/Family Therapist	APSW 132867	5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schupbach, Sarah	Service Facilitator / In-Home Therapist		4,5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Spicer, Mercedes	Clinical Student/ Intern		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N
Swiatek, Joanna	Individual/Family Therapist	LPC-IT 3350	5	14	31%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2019	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N
Van Fossen, Amber	Individual/Family Therapist	LPC 4878	5	6	0%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N
Williams, Heaven	Clinical Student/ Intern		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	10/2022	10/2022	<input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N
Williams (Ballweg), Kaci	Individual/Family Therapist	LMFT 1353	5	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wolf, Liam	Service Facilitator		4,5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Anderton, Cindy	Therapist	LPC 4086	5	6		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ball, Ashley	Therapist	LCSW 1115	5	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2020	7/2020	7/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Charles, Ramona	ISDE/ Psychoed Provider		5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ervin, Ruchita	Director/Therapist	LPC 6487 CSAC 16072	5	6,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2020	7/2020	7/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gresens, Paige	ISDE/ Psychoed Provider		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hirt, Katelyn	ISDE/ Pscyhoed Provider	SAC-IT 19613	5	16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schultz, Brock	ISDE/ Pscyhoed Provider	LPC-IT 3887	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Privacy Officer – Ashley Ball
Security Officer – Ashley Ball

Agency Name: Pecku Anchored AFH LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Pecku, Nicole	Owner/ Service Provider		5	15	<input type="checkbox"/> E <input type="checkbox"/> C	8/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Grantman, Jessica	CCS Supervisor	LCSW 9311	N/A	5	<input type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Privacy Officer – Jessica Grantman
Security Officer – Jessica Grantman

Agency Name: R U Fit LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %	Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22		E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)
Felice, Algernon	CCS Supervisor	LPC 4103	N/A	6	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	11/2020	11/2020	11/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Taylor, Christine	CCS Supervisor	LCSW 8871 CSAC 16087	N/A	5,16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Washington, Venus	Owner		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Rainbow Marifrog, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Ginko, Amy	CCS Supervisor	LPC 4697	N/A	6		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Marifrog, Rainbow A.	Owner/Psychotherapist	919 LMFT	5	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2019	4/2019	4/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Rainbow A. Marifrog
Privacy Officer – Rainbow A. Marifrog

Agency Name: Rape Crisis Center, Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %	Caregiver Misconduct Background Checks – Dates Conducted			
			Functions	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22		E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)
Kobor, Heidi	Service Facilitator		4, 5	9	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lewis, Veronica	Service Facilitator		4, 5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Marshall, Maureen	Mental Health Services Supervisor	LPC 4352	1, 3	6	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	9/2021	9/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Xiong, Lisa	Service Facilitator		4, 5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Maureen Marshall
Privacy Officer – Maureen Marshall

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Anderson, Alexandra	Service Facilitator	LMFT-IT 708	4, 5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Buege, Paula	Family & Consumer Advocate		5	20	20%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2019	1/2019	1/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Chodorow, Sarah	Program Supervisor	LCSW 9281	1, 5 (SAP)	5		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Dettinger, Hannah	Service Facilitator		4, 5	15	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2021	11/2021	11/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Freeman, Alice	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Fujikawa, Karen	CCS Supervisor	LCSW 7648	1, 3, 4, 5 (SAP)	5	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2021	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gurda, Kjerstin	HBTS Clinician	LCSW 8424	1, 5 (SAP)	5	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hedgcock, Sarah	Community Based Clinician	APSW 131387	5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Johnson, Samantha	Service Facilitator		4, 5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Krueger, Shalynn	Service Facilitator		4, 5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2019	5/2019	5/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lammers, Julia	Service Facilitator	SW 13536	4, 5	9	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Neal, David	Service Facilitator		4, 5	15	10%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2020	2/2020	2/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Patterson, Claire	Psychologist	Psychologist 3246	1, 5 (SAP)	4	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Quinones, Nereida	Community-Based Clinician		5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Rohn, Andrew	Community-Based Clinician	LMFT-IT 782 MTBT 1839	5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Wallin, Robyn	Program Supervisor	LCSW 9187	5	5	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Safe Community Coalition of Madison and Dane County, Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Boesel, Mary	Peer Support Specialist		5	20	<input type="checkbox"/> E <input type="checkbox"/> C	3/2019	6/2019	6/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Casey, Elicia	Recovery Coach		5	20	<input type="checkbox"/> E <input type="checkbox"/> C	12/2019	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Galey, Joseph	Peer Support Specialist		5	20	<input type="checkbox"/> E <input type="checkbox"/> C	12/2019	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Grunder, Joel	Peer Support Specialist		5	20	<input type="checkbox"/> E <input type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Hamilton, Lana	Peer Support Specialist		5	20	<input type="checkbox"/> E <input type="checkbox"/> C	1/2019	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Haumschild, Michelle	Recovery Coach		5	20	<input type="checkbox"/> E <input type="checkbox"/> C	7/2020	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Hauser, Katharine (Kay)	Recovery Coach		5	20	<input type="checkbox"/> E <input type="checkbox"/> C	12/2019	9/2019	9/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Lane, Dexter	Peer Specialist		5	20	<input type="checkbox"/> E <input type="checkbox"/> C	4/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Mullen, Andrew	Peer Specialist		5	20	<input type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Taylor, Christine	CCS Supervisor	LCSW 8871 CSAC 16087	N/A	5,16	<input type="checkbox"/> E <input type="checkbox"/> C	8/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Walker, Davita	Peer Specialist		5	20	<input type="checkbox"/> E <input type="checkbox"/> C	12/2019	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Agency Name: Samaritan Counseling Center of Southern Wisconsin

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Feaster, Dan	Executive Director/ Psychotherapist	LCSW 2511 SAC 12716	5	5,16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Gruen, Suzanne	Psychotherapist	LCSW 7512	5	5	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Lovick, Brenda	Psychotherapist	LMFT 1116	5	6	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2020	12/2020	1/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
McCauley, Jane	Psychotherapist	LCSW 8692	5	5	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2019	6/2019	6/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Security Officer – Angela Laufenberg
Privacy Officer – Dan Feaster

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/ <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Bah, Kumba	LPN	LPN 323911	4,5	19	<input type="checkbox"/> E <input type="checkbox"/> C		8/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Bah, Musa	Peer Support Specialist		5	20	<input type="checkbox"/> E <input type="checkbox"/> C		12/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gause-Bemis, Christie	Supervisor/ MHP/ SAP	LCSW 7262	1,5 (SAP)	5	<input type="checkbox"/> E <input type="checkbox"/> C		7/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Joe-Meyers, Jalateefa	CEO	APSW 1.09 132305	5 (SAP)	9, 16	<input type="checkbox"/> E <input type="checkbox"/> C		12/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Meyers, Baniah	Peer Support Specialist		5	20	<input type="checkbox"/> E <input type="checkbox"/> C		6/2022	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Roehrich, Herbert	Psychiatrist	MD 29103	1,5 (SAP)	1	<input type="checkbox"/> E <input type="checkbox"/> C		8/2022	9/2022	9/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Russell, Missey	Peer Support Specialist		5	20	<input type="checkbox"/> E <input type="checkbox"/> C		12/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Williams, Asianna	Peer Support Specialist		5	20	<input type="checkbox"/> E <input type="checkbox"/> C		12/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %	Caregiver Misconduct Background Checks – Dates Conducted				
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22		E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Andresen, Heather	Case Manager		4, 5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Armbruster, Jessica	Supervisor/ Program Manager	LCSW 8773-123	1, 3, 4, 5 (SAP)	5	80%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2019	11/2019	11/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Auter, Lisa	Certified Peer Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Constien, Daniel	Peer Support Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gardiner, Gala	Peer Support Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hensel, Hope	Case Manager	APSW 132161	4, 5	9	66%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Herson, Josie	Case Manager	RN 109653	4, 5	12	80%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2020	1/2021	11/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kamiya, Moeka	Case Manager		4, 5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kelly, Elizabeth	Certified Peer Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
King, Jasmine	Case Manager		4, 5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lochmann, Andrew	Certified Peer Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> E <input type="checkbox"/> C

Martinez, Dalia	Case Manager		4,5	15	75%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mayer, Andrew	Rehabilitation Worker		5	21	51%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
O'Rourke, Miranda	Case Manager		4, 5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schmit, Carrie	Case Manager		4, 5	14	70%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Thakor, Sheila	Psychiatrist	MD 31401	1, 3, 5 (SAP)	2	35%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	6/2019	6/2019	6/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Tinoko, Maebel	Case Manager/ Peer Specialist	APSW 132831	4, 5	9,20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2021	11/2021	11/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Vaillancourt, Bert	Certified Peer Specialist		5	20	0%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2020	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Von Hellfire, Ruth	Certified Peer Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2022	12/2022	12/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Weatherby, Rachmaan	Case Manager		4, 5	21	80%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2019	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Stay Focused Counseling

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Kallas, Mollie	Service Provider	SAC-IT 19334	5	14,16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Maleck, Sarah	Supervisor	LPC 5370 LMFT 977	N/A	6	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Turner, Mitchell	Owner	LPC 7290 CSAC 16472	5	6,16	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2019	5/2019	5/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Vetter, Lindsay	PhD		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Security Officer – Mitchell Turner
Privacy Officer – Mitchell Turner

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22			BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Avery, Furman	Certified Peer Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2021	11/2021	11/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Blakeslee, Beth A.	Service Array	MD 37953-20	5	1	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	5/2019	5/2019	5/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Blum, Derek	CIT Case Manager	CSAC 16203	4,5 (SAP)	15,16	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Callahan, Natalie	Clinical Student/ Intern (CIT)		5	22		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Calnese, Cherise	CIT Case Manager		4,5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Enloe, Amy	Peer Support Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2019	6/2019	6/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Evenson, Gregory	Peer Specialist (PAIR)	CPS	5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Judkins, Erin	RN (CIT)	RN 254244	5	12		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kasper, Shanna	Case Manager (CIT)		4,5	15	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2019	1/2019	1/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lawrence, Esther	Case Manager (Rethke)		4,5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lazo, Jessie	Human Services Specialist (Rethke)		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2020	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lipman, David	Certified Peer Support Specialist		5	20		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Loumos, Dean	Program Director		5	21		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
McAuliffe-Schroeder, William (Bill)	Outpatient Therapist	LCSW 3629 SAC 12640	5	5,16	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Meir, Jason	Outpatient Therapist	LPC 7583 SAC 16284	5	6,16	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2019	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Pichette, Casey	Outpatient MH Clinic Therapist	LPC 5594-125 CSAC 16096	5	6,16	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2019	1/2019	1/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Sawczak, Alaynah	Case Manager (CIT)		4,5	15	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	8/2019	8/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schwichtenberg, Ric	MHP, Supervisor	LCSW 7138-123	1,3 (SAP)	5	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Shippert, Careena	Supportive Services Case Manager		4, 5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Smith, John	Therapist/ Clinical Supervisor	LPC 3299 CSAC 1772	1, 5 (SAP)	6,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Spears, Courtney	PAIR Supervisor		5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Stauffer, Danielle	Director of Behavioral Health Programs		5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2022	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Verbauwhede, Sydney	Case Manager	SAC-IT 19597	4, 5	16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2021	11/2021	11/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Willihnganz, Sarah	Case Manager		4, 5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2021	12/2020	12/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Zertuche, Jessica	CIT Case Manager		4, 5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Kelly Crooks
Privacy Officer – Kelly Crooks

Agency Name: The Hmong Institute, Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Krasucki, Mai Kue	MHP/SAP	LCSW 8267	1,5 (SAP)	5	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Lee, Xeng	Case Manger		4,5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Lhawang, Tenzin	Case Manger		4,5	14	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2020	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Thao, Wa Yia	Case Manager		4,5	21	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Uttal, Lynet	Mental Health Professional	LCSW 9374	1 (SAP)	5	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2019	2/2019	2/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Vang, Alyssa	MHP/SAP/SD Supervisor	Psychologist 3877	1,3 (SAP)	4	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2020	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Armstrong, Libby	Service Facilitator		4,5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	2/2019	2/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Asplund, Laurie	Clinician	LMFT 605 LPC 2840	4,5	6	100%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	9/2020	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Baker, Jesse	Service Facilitator	LPC 7905-125	4,5	6	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2019	2/2019	2/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Barloon, Rachel	Service Facilitator	LCSW 9591	4,5	5	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2020	2/2020	2/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Benner, Laiza	Service Facilitator		4,5	14	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Black, James	Clinic Director, Psychologist	Psychologist 1620-57	3,5 (SAP)	4	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Curtin, Mary	Therapist	LPC 7615 SAC 16445	5	6, 16	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Czerwinski, Jordyn	Supervisor/ Therapist	LCSW 9006	1,3,4,5	5	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2022	6/2022	6/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
DeZell, Gregory	Service Facilitator, Psychotherapist	LCSW 9553	4,5 (SAP)	5	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Elsing, Katherine (Katie)	Therapist	LMFT 1090	1,5	6	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	1/2021	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Her, Jessica	Service Facilitator		4,5	14	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Fishnick, Kathryn	Service Facilitator		4,5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Janik, Katie	Service Facilitator	LCSW 10016	4,5	9	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2019	6/2019	6/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Kelly, Shannon	Service Facilitator	APSW 132833	4,5	9	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Laechelin, Sonya	Service Facilitator		4,5	14	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
LaMasney, Leah	Service Facilitator	APSW 132245	4,5	9		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	3/2020	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lu, Isaac	Service Facilitator		4,5	14	100%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	11/2020	11/2020	11/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Lucht, Elizabeth	Psychiatric Physician Assistant	LCSW 6817 PA 3332	5	5,11		<input type="checkbox"/> E <input checked="" type="checkbox"/> C	8/2022	11/2022	11/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Matysik, Gregory	Therapist	LPC 3847 CSAC 15307	1,4,5 (SAP)	6,16	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	7/2020	7/2020	7/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
McLeod, Katherine	APNP	APNP 1347 RN 131135	5	8	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	11/2021	11/2021	11/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Miller, Erika	Registered Nurse	RN 148305	5	12	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	12/2021	1/2022	1/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Nelson, Andrea	Psychologist	Psychologist 2722-57	5	4	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	10/2019	11/2019	11/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Parkes, Judith	Psychotherapist	LCSW 6884	5	5	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	7/2021	7/2021	7/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Pollema, Andrea	APNP	APNP 7802	5	8	100%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	12/2020	12/2020	12/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Pulver, Dana	Service Facilitator	LMFT-IT 590	4,5	14	50%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Richard, Mary Chris	Service Facilitator		4,5	15	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Roethe, David	Clinic Director, Psychologist	Psychologist 1360-57	1,3,5	4	90%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2020	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ruggiero, Nanette	Clinical Student/ Intern		5	22	25%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Samb, Allison	Service Facilitator		4,5	15	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	4/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Schein, Brooke	Registered Nurse	RN 164834	5	12	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	12/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Van Straten, Miranda	Service Facilitator	APSW 131980 SAC-IT 19119	4,5 (SAP)	9, 16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2020	5/2020	5/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Von Bauer, Henning	Psychotherapist	LCSW 6923	5	5	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N

Woodman, Kelly	Service Facilitator	APSW 128462	4,5	9	50%	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	3/2021	4/2021	4/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Woodruff, Nori	Service Facilitator		4,5	15	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N

Agency Name: The Rainbow Project, Inc.

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Burr, Samantha	Child and Family Therapist	LCSW 8413-123	5	5	FT	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2019	1/2019	1/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Huerta, Celia	Psychotherapist	LPC 3950	5	6	FT	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
LeCount, Darren	Clinical Manager/ Psychotherapist	LCSW 7004	5	5	FT	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Madrigal, Monica	Bilingual Psychotherapist	LPC-IT 4319	5	14	FT	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Martinez, Johnathan	Bilingual Psychotherapist	LPC 8385	5	6	FT	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	3/2020	3/2020	3/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Security Officer – Sara Flynn
Privacy Officer – Sara Flynn

Agency Name: Think & Grow LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Adkins, Marcella	CCS Supervisor	LPC 4059	N/A	6	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Williams, Walter	Owner/ Clinician	LPC 8145	5	6	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Privacy Officer – Walter Williams
Security Officer – Conchetta Hunter-White

Agency Name: Thomas & Associates Services

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Elkind, Steven	CCS Supervisor	Psychologist 1102-057	N/A	4	<input type="checkbox"/> E <input type="checkbox"/> C	11/2019	11/2019	11/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Girard, Colette	Service Facilitator		5	14	<input type="checkbox"/> E <input type="checkbox"/> C	12/2018	2/2019	2/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Thomas, Gerald Eugene	Director, Mental Health Provider	Psychologist 1367	5	4,16	<input type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Security Officer – Gerald Eugene Thomas
Privacy Officer – Gerald Eugene Thomas

Agency Name: Trailways LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Abbott, Austann	ISDE Provider	SW 12992	5	9		<input type="checkbox"/> E <input type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Birkett, Derek	Therapist	LCSW 10087	5	5		<input type="checkbox"/> E <input type="checkbox"/> C	2/2022	2/2022	2/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Carvin, Andrea	ISDE Provider	OT 1173	5	13		<input type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Ethun, Scott	Psychotherapist	LCSW 2217	5	5		<input type="checkbox"/> E <input type="checkbox"/> C	8/2020	9/2020	9/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Geiger, JoAnn	Partner/ Therapist	LPC 3604 SAC-IT 18627	5	6,16		<input type="checkbox"/> E <input type="checkbox"/> C	5/2019	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Giebel, James	Mentor		5	15		<input type="checkbox"/> E <input type="checkbox"/> C	5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Harmening, Madison	Recreation Mentor		5	15		<input type="checkbox"/> E <input type="checkbox"/> C	7/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Henderson, Lauren	Recreation Mentor		5	14		<input type="checkbox"/> E <input type="checkbox"/> C	11/2021	11/2021	11/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Hennessy, Megan	Recreation Mentor		5	15		<input type="checkbox"/> E <input type="checkbox"/> C	10/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Loken, Jill	ISDE Provider		5	14		<input type="checkbox"/> E <input type="checkbox"/> C	8/2020	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Mason, Jane	Mentor		5	15		<input type="checkbox"/> E <input type="checkbox"/> C	3/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Moore, Danielle	Psychotherapist	LPC 6183	5	6		<input type="checkbox"/> E <input type="checkbox"/> C	5/2019	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Pierson, Haley	Psychotherapist	Psychologist 4069	5	4		<input type="checkbox"/> E <input type="checkbox"/> C	3/2021	3/2021	3/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Riley, Jamie	ISDE Provider		5	15		<input type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Silverwood, Katherine (Katie)	ISDE Provider	LMFT-IT 786	5	14		<input type="checkbox"/> E <input type="checkbox"/> C	4/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Thomas, Kayla	ISDE Provider	APSW 132470	5	9		<input type="checkbox"/> E <input type="checkbox"/> C	5/2019	6/2019	6/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Voss, Louise	ISDE Provider	SW 8354	5	9		<input type="checkbox"/> E <input type="checkbox"/> C	8/2022	8/2022	8/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Triplett 360 Counseling, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Triplett, Shareese	Owner	LPC 6683	5	6	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2021	12/2021	12/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Millman, Debbie	Clinical Supervisor	LPC 4177	N/A	6	<input type="checkbox"/> E <input checked="" type="checkbox"/> C	11/2019	11/2019	11/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Security Officer – Shareese Triplett
Privacy Officer – Shareese Triplett

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Bahr, Tami	Owner/ MH Professional	LCSW 7135 CSAC 15135	1,3,4,5 (SAP)	5, 16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2020	7/2020	7/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Bautch, Timothy	MHP/SAP	LPC 3921 CSAC 15366	1 (SAP)	5,16	15%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2020	6/2020	6/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Connell, Jackie	Service Facilitator	APSW 131185	4,5	9	62.5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	9/2021	10/2021	10/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Eastman, James	Service Facilitator		4,5	14	40%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	1/2020	2/2020	2/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Felgus, Matthew	Medical Director	MD 39227	5	1	5%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2020	2/2020	2/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Fleming, Jennifer	Service Facilitator	SAC 15500	4,5	16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2019	9/2019	9/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Jacobsen, Lindsey	Service Facilitator		4,5	14	25%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2020	3/2019	3/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Luetzow, Sarah	Service Facilitator	APSW 131951 SAC-IT 19209	4,5	9, 16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Riemer, Jordyn	Service Facilitator	APSW 132568	4,5	9		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Song, Ying	Service Facilitator		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	6/2021	6/2021	6/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Tinoko, Maebel	Service Facilitator/ Peer Specialist	APSW 132831	4,5	9, 20	60%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	8/2020	8/2020	8/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: True Believers, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Aiello, Adrian	Engagement Specialist		5	21		<input type="checkbox"/> E <input type="checkbox"/> C	4/2022	4/2022	4/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Boyd, Rochelle	Service Facilitator		4,5	15		<input type="checkbox"/> E <input type="checkbox"/> C	8/2021	8/2021	8/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Cooper, Susan	MHP/SAP Supervisor	LCSW 8616-123 CSAC 15819-132	1,3 (SAP)	5,16		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2020	1/2021	1/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Echols, Arkeya	Service Facilitator		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	10/2020	10/2020	10/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Gussine, Sara	Service Facilitator		4, 5	15		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2020	6/2020	6/2020	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Reed, Angela D.	Owner, SF, SAP	CSAC 10625	4,5 (SAP)	16	100%	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	11/2019	11/2019	11/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Saxon, Vincent	Service Facilitator		4,5	14		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2022	7/2022	7/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Syed, Salam	MHP	MD 53833	1	2		<input checked="" type="checkbox"/> E <input type="checkbox"/> C	12/2022	12/2022	12/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Agency Name: Wildflower Expressive Arts Therapies LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted	BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/	
Gidlund, Jean	Art Therapist In Training		5	15	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	5/2022	5/2022	5/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Grantman, Jessica	Supervisor	LCSW 9311	N/A	5	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	2/2021	2/2021	2/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Toltzien, Kelly	Owner, Art Therapist	LPC 6990 AT 111	5	6	<input checked="" type="checkbox"/> E <input type="checkbox"/> C	7/2019	7/2019	7/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	

Privacy Officer – Kelly Toltzien
Security Officer – Kelly Toltzien

Agency Name: Winding Path Psychotherapy, LLC

CCS STAFF LISTING – Chapter DHS 36

Name (Last, First, MI)	Position Description	Credentials/ License Number	Functions and Qualifications		FTE %		Caregiver Misconduct Background Checks – Dates Conducted			
			Functions 1 – MH Professional 2 – Administrator 3 – Serv Director 4 – Serv Facilitator 5 – Services Array	Minimum Qualifications Per DHS 36.10 (g) Record Number From Regs Ranging From 1-22	E = Employed (full or part time) C = Contracted		BID (Mon/Yr)	DOJ (Mon/Yr)	DHS IBIS (Mon/Yr)	Review within last 4 yrs/
Black, James	Clinical Supervisor	Psychologist 1620-57	N/A	4	<input type="checkbox"/> E <input checked="" type="checkbox"/> C		5/2020	12/2019	12/2019	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Curtin, Mary	Psychotherapist	LPC 7615 SAC 16445	5	6, 16	<input type="checkbox"/> E <input checked="" type="checkbox"/> C		5/2021	5/2021	5/2021	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Goerman, Katherine	Psychotherapist	LMFT 2009 SAC-IT 19481	5	6,16	<input type="checkbox"/> E <input checked="" type="checkbox"/> C		2/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Johnson, Sheila	Owner/ Psychotherapist	LMFT 957 CSAC 15831 MTBT 491	5	6,16	<input type="checkbox"/> E <input type="checkbox"/> C		2/2022	3/2022	3/2022	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Privacy Officer – Sheila Johnson
Security Officer – Sheila Johnson