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Milwaukee County Behavioral Health Division	Date Revised	Subject: Orientation & Training	
Community Services Branch			

1. POLICY:

Per 36.07 (5) (i) All CCS staff shall be provided with orientation and training that meets the requirements in DHS 36.12. The orientation and training program will be provided, but not limited to, CCS staff, providers, peer specialists, volunteers and consumers.

2. PROCEDURE

A. ORIENTATION AND ONGOING TRAINING:

1. *Orientation program.* The CCS shall develop and implement an orientation program that includes all of the following.
 - a. At least forty (40) hours of documented orientation training within three (3) months of beginning employment for each staff member who has less than six (6) months of experience providing psychosocial rehabilitation services to children or adults with mental disorders or substance use disorders.
 - b. At least twenty (20) hours of documented orientation training within three (3) months of beginning CCS employment for each staff member who has six (6) months or more experience providing psychosocial rehabilitation services to children or adults with mental disorders or substance use disorders.
 - c. At least forty (40) hours of documented orientation training for each regularly scheduled volunteer before allowing the volunteer to work independently with consumers or family members.
2. *Orientation training.* The Orientation Training shall include all of the following:
 - a. Parts of Chapter 36 pertinent to the services they provide.
 - b. Policies and procedures pertinent to the services they provide.
 - c. Job responsibilities for staff members and volunteers.
 - d. Applicable parts of chs. 48, 51 and 55, Stats., and any related administrative rules.
 - e. The basic provisions of civil rights laws including The American with Disabilities Act of 1990 and The Civil Rights Act of 1964 as the laws apply to staff providing services to individuals with disabilities.
 - f. Current standards regarding documentation and the provisions of HIPAA, s. 51.30, Stats., ch. DHS 92 and if applicable, 42 CFR Part 2 regarding confidentiality of treatment records.

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- g. The provisions of s. 51.61, Stats. and ch. DHS 94 regarding consumer rights.
 - h. Current knowledge about mental disorders, substance use and addiction disorders and co-occurring disabilities and treatment methods.
 - i. Recovery concepts and principles.
 - 1. To ensure that services and supports promote consumer hope, healing, empowerment, connection to others and to the community
 - 2. Are provided in a manner that is respectful, culturally appropriate, collaborative between consumer and service providers
 - 3. Are based on consumer choice and goals protective of consumer rights.
 - j. Current principles and procedures for providing services to children and adults with mental disorders, substance use, addiction disorders, and co-occurring disorders. Areas addressed shall include:
 - 1. Recovery-oriented assessment and services
 - 2. Principles of relapse prevention
 - 3. Psychosocial rehabilitation services
 - 4. Age-appropriate assessments and services for individuals across the life span
 - 5. Trauma assessment and treatment approaches, including symptom self-management
 - 6. The relationship between trauma and mental health and substance abuse disorders
 - 7. Culturally and linguistically appropriate services
 - k. Techniques and procedures for providing non-violent crisis management for consumers, including
 - 1. Verbal de-escalation
 - 2. Methods for obtaining backup
 - 3. Acceptable methods for self-protection and protection of the consumer and others in emergency situations
 - 4. Suicide assessment, prevention and management.
 - l. Training that is specific to the position for which each employee is hired. Note: Service facilitators, for example, need a thorough understanding of facilitation and conflict resolution techniques, resources for meeting basic needs, any eligibility requirements of potential resource providers and procedures for accessing these resources. Mental health professionals and substance abuse professionals will need training regarding the scope of their authority to authorize services and procedures to be followed in the authorization process.
3. *Ongoing training program.* The CCS staff shall ensure that each staff member receives at least eight (8) hours of in-service training a year that shall be

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designed to increase the knowledge and skills received by staff members in the orientation provided under par. (b). Staff shared with other community mental health or substance abuse programs may apply documented in-service hours received in those programs toward this requirement if that training meets the requirement of DHS 36. Ongoing in-service training shall include one or more of the following:

- a. Time set aside for in-service training, including discussion and presentation of current principles and methods of providing psychosocial rehabilitation services.
- b. Presentations by community resource staff from other agencies, including consumer operated services.
- c. Conferences or workshops.

4. *Training records.* Updated, written copies of the orientation and on-going training programs, and documentation of the orientation and ongoing training received by staff members and volunteers shall be maintained as part of the central administrative records of the CCS.

- B. To ensure all services will be delivered in a person-centered, trauma-informed, culturally competent, and recovery oriented focus of care.
- C. Training recommendations made by the Cultural Intelligence Action Team of the Mental Health Redesign will follow recommendations in DH 36.12 (1) (c).



Reviewed and Approved by: _____
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