

Reviewer:  
Date Reviewed:

NC DHHS  
DMH/DD/SAS

Provider: \_\_\_\_\_  
Site: \_\_\_\_\_

Community Support Team (CST-MH/SA Adults)

DESCRIPTION							
Community Support Team (MH/SA) CST		Evidence of Compliance	MET	NOT MET	NA	60-day review Evidence of Compliance	COMMENTS
<b>Provider Requirements</b>							
<b>a</b>	1) Agency has current, valid business verification.	NEA from another LME or Business Verification completed locally					
<b>Staffing Requirements</b>							
<b>a</b>	CST shall be comprised of three full-time staff positions as follows: <ul style="list-style-type: none"> <li>• one full-time team leader who is a master's-level Qualified Professional, a Provisionally Licensed Professional, or a Licensed Professional</li> </ul> AND <ul style="list-style-type: none"> <li>• one full-time equivalent (FTE) Qualified Professional (may be filled by no more than two individuals)</li> </ul> AND <ul style="list-style-type: none"> <li>• one FTE Qualified Professional, Associate Professional, Paraprofessional, or Certified Peer Support Specialist.</li> </ul>	Organizational Chart for CST; Program description; Job description consistent with Provider Agency Policy for CST service definition; Personnel files per core rules checklist; License/certification (if applicable); experience verification; staff schedule; Clinical Interviews					
<b>b</b>	Persons who meet the requirements specified for QP or AP status according to 10A NCAC 27G. 0104 and a minimum of 1 year of documented experience with the adult MH/SA population may deliver CST	Organizational Chart for CST; Program description; Job description consistent with Provider Agency Policy for CST service definition; Personnel files per core rules checklist; License/certification (if applicable); experience verification; Individualized Supervision Plan/Contract; staff schedule; Clinical Interviews					

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Community Support Team (MH/SA) CST		Evidence of Compliance	MET	NOT MET	NA		
<b>c</b>	A Paraprofessional level staff may be part of the 3 person team. They must meet the requirements specified for paraprofessional status according to 10A NCAC 27.G.0104 and have a minimum of 1 year of documented experience with the adult MH/SA population and may deliver CST services within the requirements of the staff definition specific in the above role.	Organizational Chart for CST; Program description; Job description consistent with Provider Agency Policy for CST service definition; Personnel files per core rules checklist; License/certification (if applicable); experience verification; Individualized Supervision Plan/Contract; staff schedule; Clinical Interviews					
<b>d</b>	A Certified Peer Support Specialist staff may be part of the 3 person team and may deliver CST services within the requirements of the staff definition specific in the above role. A Certified Peer Support Specialist is not required to demonstrate 1 year of documented experience in working with the adult MH/SA population, as his or her personal experience in MH/SA services fulfills that requirement.	Organizational Chart for CST; Program description; Job description consistent with Provider Agency Policy for CST service definition; Personnel files per core rules checklist; License/certification (if applicable); experience verification; Individualized Supervision Plan/Contract; staff schedule; Clinical Interviews					

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e	Individualized Supervision is provided according to supervision requirements specified in 10 A NAC27.G.0104 & .0203 and is provided by CST Team Leader.	Organizational Chart for CST; Program description; Job description consistent with Provider Agency Policy for CST service definition; Personnel files per core rules checklist; License/certification (if applicable); experience verification; Individualized Supervision Plan/Contract; staff schedule; Clinical Interviews					
f	The CST maintains a maximum caseload of 45 individuals per team. The recipient-to-staff ratio is no more than 15:1. The team caseload will be determined by the level of acuity and the needs of the individuals served.	Program description; Personnel Manual; Job description consistent with Provider Agency Policy for CST service definition.				caseload list; billing/tracking forms; service notes	
g	All CST staff must complete a minimum of 20 hours of training specific to the required components of the CST service definition, including crisis response and person-centered thinking, within the first 90 days of each staff member's delivery of this service. Qualified Professional staff responsible for Person Centered Plan development shall also participate in "PCP Instructional Elements" training within the same time frame. All pre-requisites for training have been met per 10A NCAC 27G .0202 & .0203.	Program description; Personnel Manual; Job descriptions. Personnel files and/or other documentation of required experience and completion of training requirements per core rules checklist; training certificates. Agency staff training plan					
<b>Service Type/Setting</b>							

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Community Support Team (MH/SA) CST		Evidence of Compliance	MET	NOT MET	NA	60-day review Evidence of Compliance	COMMENTS
<b>a</b>	1) CST is a direct and indirect periodic rehabilitative service in which the team provides medically necessary direct intervention and also arranges, coordinates, & monitors services on behalf of the recipient & and is provided in any location. CST providers shall deliver services in various environments, such as homes, schools, courts, homeless shelters, street locations, libraries, vocational settings, and other community settings. 2) CST also includes telephone time with the recipient and collateral contact with persons who assist the recipient in meeting their rehabilitation goals specified in the Person Centered Plan.	Program description; job descriptions; policy and procedure manuals;				PCP, service notes, Medicaid RA forms	
<b>Program / Clinical Requirements</b>							
<b>a</b>	CST shall provide at least eight (8) contacts in the first month of service. In subsequent months, CST services are provided at least once a week.	Program description; job descriptions; policy and procedure manuals; supervision plans; Team Meeting Minutes				PCP; service notes; billing tracking forms; client interviews	
<b>b</b>	1) Seventy-five per cent (75%) or more of CST services that are delivered are performed face to face with recipients, 2) Seventy-five per cent (75%) or more of staff time must be spent working outside of the agency's facility, with or on behalf of consumers. 3) CST Team Leader actively participates in the delivery of the service.	Program description; job descriptions; policy and procedure manuals; supervision plans; Team Meeting Minutes				Service Notes; PCP; Team meeting minutes.	

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<b>C</b>	<p>The members of the team collaborate to provide services and interventions documented in a Person Centered Plan, which shall include the following, as clinically indicated:</p> <ul style="list-style-type: none"> <li>• identification of strengths that will aid the individual in his or her recovery, as well as the identification of barriers that impede the development of skills necessary for independent functioning in the community;</li> <li>• individual and team therapeutic interventions with the recipient that directly increase the acquisition of skills needed to accomplish the goals of the Person Centered Plan;</li> <li>• psychoeducation regarding 1) the identification and self-management of the prescribed medication regimen, with documented communication to prescribing practitioner(s), 2) the</li> <li>• coordination and oversight of initial and ongoing assessment;</li> <li>• facilitation of the person centered planning process, which includes</li> <li>• effective coordination of clinical services, natural supports, and</li> </ul>	<p>Program description; job descriptions; policy and procedure manuals; supervision plans, Team Meeting Minutes</p>				<p>PCP; service notes; client interviews</p>	
<b>Program/Clinical Requirements(continued)</b>							

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<b>d</b>	CST Team Leader drives the delivery of this rehabilitation service. In partnership with the recipient, the assigned CST Qualified Professional identified as the person responsible for the Person Centered Plan has ongoing clinical responsibility for the initial development, implementation, monitoring, and ongoing revision of the Person Centered Plan including involving other medical and non-medical providers and natural and community supports. The CST Team Leader is responsible for monitoring and evaluating the effectiveness of interventions as evidenced by symptom reduction and progress toward goals identified in the Person Centered Plan for all recipients the team serves.	Policies and Procedures in place for PCP development. Team Meeting minutes; Program description; job descriptions; supervision plans;				PCP in chart. Documentation of PC Planning meetings, with consumer participation and input into all decisions. Service notes document implementation of plan consistent with PCP. Team meeting minutes	
<b>Program/Clinical Requirements(continued)</b>							
<b>e</b>	The agency must have has policies in place specifying CST staff responsibility to carry out first responder activities for the recipients the team serves. First responder activities include face to face and telephonically, and are available at all times (24/7/365), with capacity for face-to-face emergency response within 2 hours. Each recipient's crisis plan is included in their Person Centered Plan. The CST staff must provide direct interventions in escalating situations to prevent a crisis (including identifying cues and triggers). CST staff also provide assistance to the recipient and his or her natural supports in implementing preventive and therapeutic interventions outlined in the Person Centered Plan (including the crisis plan).	Program description, policy and procedure manuals, job descriptions, supervision plans, team meeting minutes, on-call schedule				Crisis Plan is completed in compliance with PCP Instruction Manual. Service notes document implementation of crisis plan when needed.	

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<b>f</b>	<p>CST is an intensive community-based rehabilitation team service that provides treatment and restorative interventions carried out by the team and designed to meet the following outcomes:</p> <ul style="list-style-type: none"> <li>• assist the recipient in achieving recovery goals identified in the Person Centered Plan;</li> <li>• reduce psychiatric and addiction symptoms and promote symptom stability;</li> <li>• restore personal, community living, and social skills necessary for self-management;</li> <li>• assist individuals to gain access to necessary services in all life domains;</li> <li>• increase the ability to access financial entitlement, housing, work, and social opportunities in the community; and</li> <li>• monitor and evaluate the effectiveness of delivery of all services and supports identified in the Person Centered Plan.</li> </ul>	<p>Policies and Procedures in place for PCP development. ; Team Meeting Minutes; Program description; job descriptions; supervision plans</p>				<p>Staff/Client Interviews; PCP; Service Notes</p>	
<b>g</b>	Signed Order based on individualized assessment.					<p>Comprehensive Clinical Assessment or D/A; PCP signed order</p>	
<b>Documentation Requirements</b>							

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<p><b>Community Support Team (MH/SA) CST</b></p>	<p>Evidence of Compliance</p>	<p>MET</p>	<p>NOT MET</p>	<p>NA</p>	<p>60-day review Evidence of Compliance</p>	<p>COMMENTS</p>
<p>Full service note for each contact or intervention (such as individual counseling, case management, crisis response), for each date of service, written and signed by the person(s) who provided the service, that includes the following:</p> <ul style="list-style-type: none"> <li>• Recipient's name</li> <li>• Medicaid identification number</li> <li>• Service provided (for example, CST)</li> <li>• Date of service</li> <li>• Place of service</li> <li>• Type of contact (face-to-face, telephone call, collateral)</li> <li>• Purpose of the contact</li> <li>• Description of the provider's interventions</li> <li>• Amount of time spent performing the interventions</li> <li>• Description of the effectiveness of the interventions</li> <li>• Signature and credentials of the staff member(s) providing the service (for paraprofessionals, position is required in lieu of credentials with staff signature)</li> </ul>	<p>Program Description; Policy &amp; Procedure Manual, job descriptions.</p>				<p>PCP; service notes</p>	