

Community Support Training 101

September/October 2013



Community Support Definition

Community Support consists of specific activities with or on behalf of a person in accordance with an individualized treatment plan. Services are provided to maximize an individual's immediate and continued community functioning while achieving and sustaining recovery/resiliency from mental illness and/or substance use disorders. These services are delivered in an amount and scope defined by each individual's plan, and not all plans will contain all services.

Community support services for both adults and children focus on helping individuals develop skills, access resources and learn to manage illness in order to be successful in the living, working, learning, and social environments of their choice. Community Support staff teach, model, and practice skills with persons served in order to increase self sufficiency and independence. The specific skills and supports are addressed on an individualized treatment plan (ITP) and based on the life domains that the person has identified as being impacted directly or indirectly by their serious mental illness, or substance abuse, or both. Community support services are time-limited based on recipient need, and rehabilitative in nature.

Community Support for children and youth is designed to coordinate and provide services and resources to children, adolescents and their families as necessary to promote resiliency. The focus is on teaching/modeling developmentally appropriate skills, necessary for positive self esteem, a sense of identity, positive relationships with family and peers, social competence, and success in school. The specific skills and supports are addressed on an individualized treatment plan (ITP) and based on the life domains that the child/family have identified as being impacted directly or indirectly by their serious emotional disturbance, or substance abuse, or both. A key in promoting resiliency is building on the strengths of the child's natural support system which is also a key element of the ITP.

Community Support Key Service Functions

1. Providing holistic, person-centered care with emphasis on personal strengths, skill acquisition and harm reduction, while using stage-wise and motivational approaches that promote active participation by the individual in decision making and self-advocacy in all aspects of services and recovery/resiliency.
2. Using interventions, based on individual strengths and needs, to develop interpersonal/social, family, community and independent living functional skills including adaptation to home, school, family and work environments when the natural acquisition of those skills is negatively impacted by the individual's mental illness and /or substance use disorder.

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3. Facilitating and supporting recovery/resiliency through activities including: defining recovery/resiliency concepts in order to develop and attain recovery/resiliency goals; identifying needs, strengths, skills, resources and supports and teaching how to use them; and identifying barriers to recovery/resiliency and finding ways to overcome them.
4. Developing, implementing, updating, and revising as needed, a treatment plan that identifies specific, measurable and individualized interventions to reduce and manage symptoms, improve functioning and develop stability and independence. This plan is developed by a team consisting of the following as appropriate: the individual, family, community support specialist, community support supervisor, therapist, medication providers, schools, child welfare, courts and other supports.
5. Providing services that result in positive outcomes including but not limited to the following areas: employment/education, housing, social connectedness, abstinence/harm reduction, decreased criminality/legal involvement, family involvement, decreased psychiatric hospitalizations, and improved physical health.
6. Working collaboratively with the individual on treatment goals and service including the use of collaborative documentation as a tool to ensure that individuals are active in their treatment.
7. Documenting services that clearly describes the need for the service, the intervention provided, the relationship to the treatment plan, the provider of the service, the date, actual time and setting of the service, and the individual's response to the service.
8. Developing a discharge and aftercare/continuing recovery plan to include, if applicable, securing a successful transition to continued services.
9. Contacting individuals and/or referral sources following missed appointments in order to re-engage and promote recovery/resiliency efforts.
10. Supporting individuals in crisis situations including locating and coordinating resources to resolve a crisis.
11. Maintaining contact with individuals who are hospitalized for medical or psychiatric reasons and participate in and facilitate discharge planning for psychiatric hospitalization and for medical hospitalization as appropriate.
12. Provide information and education in order to learn about and manage mental illness/serious emotional disturbance and/or substance use disorders including symptoms, triggers, cravings and use of medications.
13. Reinforce the importance of taking medications as prescribed and assist the individual to make medication concerns regarding side effects or lack of efficacy known to the prescriber.

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14. Building skills for effective illness self-management including psychoeducation, behavioral tailoring for medication adherence, wellness/recovery planning, coping skills training, and social skills training.
15. In conjunction with the individual, family, significant others and referral sources, identifying risk factors related to relapse in mental illness and/or substance use disorders and develop a plan with strategies to support recovery and prevent relapse.
16. Make efforts to ensure that individuals gain and maintain access to necessary rehabilitative services, general entitlement benefits, employment, housing, schools, legal services, wellness or other services by actively assisting individuals to apply and follow-up on applications; and to gain skills in independently accessing needed services.
17. Ensuring communication and coordination with and between other interested parties such as service providers, medical professionals, referral sources, employers, schools, child welfare, courts, probation/parole, landlords, and natural supports.
18. Ensuring follow through with recommended medical care, to include scheduling appointments, finding financial resources and arranging transportation when individuals are unable to perform these tasks independently.
19. Developing and supporting wellness and recovery goals in collaboration with the individual, family and/or medical professionals, including healthy lifestyle changes such as healthy eating, physical activity and tobacco prevention and cessation; and coordination and monitoring of physical health and chronic disease management.
20. Assisting to develop natural supports including identification of existing and new natural supports in relevant life domains.
21. In coordination with the treatment team, improving skills in communication, interpersonal relationships, problem solving, conflict resolution; stress management; and identifying risky social situations and triggers that could jeopardize recovery.
22. Providing family education, training and support to develop the family as a positive support system to the individual. Such activities must be directed toward the primary well-being and benefit of the individual.
23. Helping individuals develop skills and resources to address symptoms that interfere with seeking or successfully maintaining a job, including but not limited to, communication, personal hygiene and dress, time management, capacity to follow directions, planning transportation, managing symptoms/cravings, learning appropriate work habits, and identifying behaviors that interfere with work performance.

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24. Building skills associated with obtaining and maintaining success in school such as communication with teachers, personal hygiene and dress, age appropriate time management, capacity to follow directions and carry out school assignments, appropriate study habits, and identification of behaviors that interfere with school performance.
25. Building personal self care and home management skills associated with achieving and maintaining housing in the least restrictive setting by addressing issues like nutrition, meal preparation; household maintenance including house cleaning and laundry; money management and budgeting; personal hygiene and grooming; identification and use of social and recreational skills; use of available transportation; and personal responsibility.