CHILDREN COME FIRST: HOSPITAL DIVERSION PROGRAM

Family Handbook
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Introduction

Welcome to Children Come First (CCF). CCF is a program that coordinates care for youth who have a mental health challenge and are at risk of being placed in an institutional setting. This handbook explains what CCF has to offer your child and family. Please read this over carefully. If you have questions, please speak with your assigned Clinical Specialist. Our goal is to help children be successful in their communities and prevent institutional placements. When your child leaves our program, we hope they will be doing better in school, at home, and in the community.

Program Values

CCF believes that children with mental health issues are best served in their communities. We believe children and families get the most out of services that are close to home and that will still be there after your child is doing better. We work very hard to find and put together anything that is needed to keep your child at home, or close to it. In addition, we believe that:

- Families are responsible for their children.
- Each child and family is unique. All families have strengths and needs.
- Families can set their own goals for the future.
- A team effort and balanced approach helps families reach their goals.

To achieve your family’s vision for the future, we also believe it is important to respect your family’s culture. We believe it is our duty to gain the needed cultural information about families that will help us work together. We believe that cultural diversity includes more than just language, food, the way we dress, and cultural events. It is the way a person thinks, acts, and understands the world around them. We believe a long-term process that encourages an understanding of our own beliefs and values and how they affect our relationships with others is important.

General Program Overview

As part of the Children Come First Program, we are going to:

- Work together as a team.
- Provide services and supports that will help your child.
- Plan for what to do when there is a crisis.
- Set goals and help your child meet those goals.

CCF puts together mental health care and other services to help your child be successful in their home, school, and community. We do this by building on child and family strengths and coordinating services and supports for your child in the community. Our goal is to support your child and prevent him or her from being placed in an institutional setting. This includes hospitals, residential treatment facilities, or corrections. If your child is placed outside of your home, we will help you get ready for your child’s return home or to the community.

There are two organizations that provide Children Come First services. One is Dane County Department of Human Services’ Achieving Reunification Through Teamwork (ARTT) unit. The other is RISE Wisconsin, Inc. It is important to know which organization your child is involved with. Information may be slightly different in this Handbook for ARTT and RISE.
One of the programs within Children Come First Program at RISE is the Hospital Diversion Program (HDP). HDP provides 24/7 crisis stabilization and diversion services to families who have a child at risk of an involuntary hospitalization.

This short-term program (30-90 days) provides children and families with the following services:

- In-home crisis stabilization
- Crisis planning and intensive case management
- Parent/child support and behavior management
- Medication management
- Wraparound services, including coordination and linkage to ongoing services and support

**Clinical Specialists**

The Clinical Specialist is your program guide who will work with your child and family to develop a Child & Family Team, treatment goals for your child, and plan for safety in times of crisis. Your child’s Clinical Specialist will help identify services and supports that will help your child be successful even after your child is no longer in CCF.

**Special Needs and Services**

All special services, including interpreter services, are provided at no cost to you. Talk to your Clinical Specialist if you or a member of your family has a disability and/or needs special services such as:

- Special accommodations for meetings.
- Written material in an alternative format (ex: Braille, large print, etc.).
- Interpreter or translation services.

A written copy of the CCF Hospital Diversion Manual para la Familia- Espanol (CCF Family Handbook) can be obtained from your CCF Coordinator and/or found on RISE’s website at www.risewisconsin.org.

**Interpreter Services**

**English:** For help to translate or understand this, please call (608) 250-6634.

**Spanish:** Si necesita ayuda para traducir o entender este texto, por favor llame al teléfono (608) 250-6634.

**Russian:** Если вам не всё понятно в этом документе, позвоните по телефону (608) 250-6634.

**Hmong:** Yog xav tau kev pab txhais cov ntaub ntawv no kom koj totaub, hu rau (608) 250-6634.

**Enrollee Rights**

Enrollees have the right to:

- Be treated with respect and with due consideration for their dignity and privacy;
- Be free from physical restraint and isolation except for emergency situations;
• Treatment no matter what race, religion, gender, ethnicity, age, disability, or source of payment;
• Have their treatment and other information kept private. Records may be released, with Enrollee approval, only when the law permits;
• Easy access to timely care;
• Receive information on available treatment options and alternatives;
• Participate in decisions regarding their care, including the right to refuse treatment;
• Information in a language and manner they can understand;
• A clear description of their diagnosis and treatment choices, including risks and benefits;
• Information about what works to treat their diagnosis;
• Ask their Provider about their training and experience;
• Know about services to help them;
• Request and receive a copy of their records, and request that they be amended or corrected;
• Freely file a grievance or appeal and have help in doing so;
• Know their rights and responsibilities in treatment;
• Receive services where and when it is best for them;
• Ask for a certain Provider, change Provider, or disenroll for cause.

What to Expect

Here is what you can expect once your child has been approved for the Children Come First Hospital Diversion Program:

Intake
• The Clinical Specialist will meet with you to talk about the program and enroll your child.
• All information about your family will be kept confidential unless you give permission for the Clinical Specialist to speak with others about your child’s progress.
• The Clinical Specialist will ask you questions to learn what your child and family need from the program. This is called the Initial Assessment. With your permission, the Clinical Specialist will also talk to other people working with your child to find out how your child is doing and what would be most helpful.
• You and the Clinical Specialist will talk about who you would like to be involved to work with your child. This is called your Child & Family Team.
• The Clinical Specialist will work with you and your Child & Family Team to develop a plan for emergencies or very stressful times. This is called a Crisis Plan.
• The Clinical Specialist will work with you and your Child & Family Team to develop a treatment plan for your child. This is called a Plan of Care or POC. The Plan of Care will describe your child’s goals and what kind of help your child needs to meet these goals.

CCF’s Hospital Diversion Program, a sample timeline of our 90 day model

Days 1-30
Assessment
Development of treatment goals
Intensive in-home support with family, parents and/or child with a focus on immediate stabilization, safety planning, and support of basic needs
24/7 crisis support and safety planning
Coordination of service referrals
Community outreach and education

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The range of contact with some part of the family during this time period: multiple contacts per week up to daily contact.

**Days 30-60**

30 day and 60 day team meetings to determine need for additional services  
In-home stabilization  
- Trauma and solution focused family and individual interventions  
- Ongoing safety planning  
- Ongoing support of basic needs  
24/7 crisis support and safety planning  
Coordination of service referrals  
Community outreach and education  
The range of contact with some part of the family: 1-2 contacts per week up to several contacts per week.

**Days 60-90**

End of service team meeting to review transitional services  
Linkage to community services and supports  
24/7 crisis support and safety planning  
Coordination of service referrals  
Community outreach and education  
The range of contact with some part of the family: as needed (in supportive role)

**Ongoing**

- The Child & Family Team will meet during the first month and will meet at least one time each month after that. These are called Team Meetings. The Child and Family Team will talk about your child’s progress toward Plan of Care goals. The Child and Family Team will talk about services and supports that are in place and how they are helping. The Team will also talk about what else your child may need to be successful.
- The Clinical Specialist will also keep in touch with other team members about your child’s progress.

**Child & Family Teams**

You and the Clinical Specialist will talk about who you would like to be involved to work with your child. This is called your Child & Family Team. You are part of the Child & Family Team. Your child may also be part of the Team. If your child is involved with Dane County Department of Human Services your child’s Social Worker will be a member of the Child & Family Team. Other team members should include people who work with your child and family, such as teachers and therapists.

We hope that you will ask people who are important to you and your child to be on the Team. These people may be relatives, friends, neighbors, or others. It is very important that there are people on your Team who will still be in your life when your child is done with the CCF program. Please talk to the Clinical Specialist if you have any questions about your Team.
**CCF Team Meetings**

Your child’s Clinical Specialist will arrange for your Child & Family Team to meet at least once per month. These are called CCF Team Meetings. Your Child & Family Team will talk about your child’s progress toward Plan of Care goals. Topics discussed at Team Meetings usually include your child’s treatment progress, current behaviors at home, how he or she is doing at school, and safety planning. The Team will talk about services and supports that are in place and how they are helping. The Team will also talk about what else your child may need to be successful. The Clinical Specialist will try to schedule Team Meetings at times and places that work best for you. It is important that you take part in Team Meetings and talk with the Clinical Specialist about what you would like to see happen at these meetings.

**Crisis Plans**

Your child’s Clinical Specialist will work with you and your Child & Family Team to develop a plan for emergencies or very stressful times. This is called a Crisis Plan. The Crisis Plan will describe what kinds of behavior your child has had in the past and what has been the most helpful for calming your child. The Crisis Plan will also identify “warning signs” that people working with your child should know about and what they can do to help prevent a crisis from occurring. The Crisis Plan will include a list of people and supports who can be contacted if a crisis occurs. The Team will review the Crisis Plan any time a crisis occurs and updated as needed and at the time of Program completion.

**Plans of Care**

Your Clinical Specialist will work with you and your Child & Family Team to develop a treatment plan for your child. This is called a Plan of Care or POC. The Plan of Care will describe your child’s strengths, needs, and goals. The Plan of Care will also describe what kind of help your child needs to meet these goals, and will include the supports and services used to help. When your Team identifies a service that may be helpful for your child, it must be approved by CCF and included in the Plan of Care before it can begin. The Team reviews the Plan of Care at each monthly Team Meeting. You may have to pay for mental health services that are not included in your child’s CCF Plan of Care. Please contact the Clinical Specialist if you have questions about your child’s Plan of Care.

**Coordinating Services**

CCF Clinical Specialists work to support your child at home and in their community. The Clinical Specialist will try to do that by providing services to you and your family in your home and community and by coordinating family and community supports. CCF also purchases formal services when needed. Our money to purchase services comes from many places so we can provide a flexible Plan of Care. We are not limited to services covered by only health insurance, MA/Medicaid, or Dane County Department of Human Services.
It is important to note that CCF is a payer of last resort for services. If your child is covered by private health insurance, then you must get your child’s mental health services through your child’s insurance network before CCF funding will be considered. The Clinical Specialist may also work with you to get scholarships or other types of funding for services when available.

All requests for services come from the Child & Family Team. When your Team identifies a service that may be helpful for your child, it must be approved by CCF and included in the Plan of Care before it can begin. The Team can request that the Clinical Specialist speed up the review of a request for approving a service if the Team feels that a service needs to be in place right away. How soon a request is completed will depend on the needs of the child and family.

Please Note: Your child has a right to receive medically appropriate healthcare services as provided in federal and state law. Services must be available 24 hours a day, 7 days a week. Please contact the Clinical Specialist to make a service request during regular business hours (Monday-Friday 8:30am-5pm). For after-hours service requests please use the following numbers:

- For RISE clients, call #258-0269.
- For ARTT clients, call #280-2610.

Service Providers

CCF contracts with a variety of mental health and other service providers who work closely with children and families. This is called our CCF Provider Network. All CCF funded services for your child should be provided by someone in the CCF Provider Network.

CCF will consider funding Providers who are not in our network, for up to 3 months, in the following situations:

- Your child needs urgent or immediate care that cannot be obtained by an in-network provider;
- Your child lives outside of Dane County and CCF has no in-network providers in the area;
- Your child needs a service and CCF doesn’t have an in-network provider that provides that service;
- A court-ordered assessment is assigned to someone outside of the CCF Provider Network.

Please talk with the Clinical Specialist if you would like to request to use a provider who is not in the CCF Provider Network. All providers must meet the basic standards set by CCF to work with enrolled youth.

Transportation

As of August 1, 2013, Medical Transportation Management (MTM, Inc.) is Wisconsin’s non-emergency medical transportation manager and is arranging transportation to covered appointments for Medicaid and BadgerCare Plus members. Please call 866-907-1493 or TTY 800-855-2880 to schedule rides.

If you have a medical emergency you should call 911.

Talk with your Care Coordinator if you have additional transportation needs.
Second Opinions

Parents always have the right to obtain a second opinion related to your child’s mental health care from a qualified mental health care professional. If you would like a second opinion from a different psychiatrist, therapist, etc., the Clinical Specialist can help arrange for this to occur. All requests for second opinions will be reviewed by CCF and arrangements will be made within ten business days. If you feel your request for a second opinion requires emergency response please see the “Expedited Review” section of this handbook for more information.

Medical Assistance (Title XIX-Medicaid)

If your child has Medicaid or Medical Assistance (MA) insurance that is managed by a Health Maintenance Organization (HMO), your child will need to leave the HMO plan while in CCF. This change from your HMO to MA’s “fee-for-service” will automatically be done when your child enters CCF. CCF services replace your child’s insurance for all MA-covered mental health services. This includes services like therapy and psychiatric services, but does not include prescription medication costs. Your child should be able to keep their regular medical and dental health care providers.

When CCF ends, your child should be able to rejoin the HMO plan. For any questions on re-enrolling in an HMO call the HMO Enrollment Specialist at 800-291-2002. This is an important step to help change your child’s MA coverage from CCF back to a Medicaid-HMO.

If you have any questions about MA coverage or other insurance questions, you can contact:
   Dane County Human Services Ombudsman
   608-242-6477

Please note: All children who receive MA/Medicaid can also get a free HealthCheck exam which is a complete medical exam. Please talk to the Clinical Specialist if you would like help to set up a HealthCheck exam for your child.

Private Health Insurance

If your child has private health insurance, you must provide this information to the Clinical Specialist. CCF will work with your insurance company to set up covered mental health services for your child. **Private insurance must be billed before CCF is able to pay for any covered mental health services.**

Out of Home Placements

Sometimes, because of different reasons, children need to be placed outside of their homes for short periods of time. Examples of these placements are:

- Foster home or group home care.
- Respite or shelter care.
- Juvenile detention, residential treatment or hospitals.
If an out of home placement occurs, the Clinical Specialist will meet with you to discuss what this means for next steps.

Dane County Department of Human Services will review and charge a fee from parents for all of these out of home placements. This fee is based on a sliding scale and is determined by your income. The Dane County Parental Support Collection Unit sets the fee and this office is not part of the Children Come First program. These fees are not covered by Children Come First. **If you receive paperwork from the Dane County Parental Support Collection Unit it is very important that you fill it out and return it to avoid being billed for the full cost of your child’s placement.** You can call the Dane County Parental Support Collection Unit for more information at #242-6408.

If your child receives Social Security and is placed out of the home, your child’s Social Security payments will be redirected to Dane County Department of Human Services to offset the cost of your child’s out of home care. Once your child is returned home you must contact the Social Security Office at 866-770-2262 to have these payments redirected back to you.

If you receive court-ordered child support payments from your child’s other parent, and your child is placed out of the home, these child support payments will be redirected to Dane County Department of Human Services to offset the cost of your child’s out of home care. Once your child is returned home you must contact Dane County’s Child Support Agency at #266-4031 to have these payments redirected back to you.

**CCF Parent & Family Support**

CCF has a Family Advocate who is available to work with individuals and families on whatever you may need. Some of the types of help that can be provided are: attending school meetings, placements, court, Team Meetings, mentoring either a parent or child, providing transportation for the parent or child, helping the parent with budgeting issues and providing general information.

When your child leaves the CCF program, you may still stay involved with any parent meetings and other groups. CCF’s Family Advocate welcomes questions and updates on how you are doing anytime.

**In Case of Emergency**

**Mental Health Emergency**

A mental health emergency is a life threatening situation in which an individual is imminently threatening harm to self or others, severely disoriented or out of touch with reality, has a severe inability to function, or is otherwise distraught and out of control.

**Examples of a Mental Health Emergency include:**

- Acting on a suicide threat
- Homicidal or threatening behavior
- Self-injury needing immediate medical attention
- Severely impaired by drugs or alcohol
- Highly erratic or unusual behavior that indicates very unpredictable behavior and/or an inability to care for themselves.
Call 9-1-1, and be sure to remove yourself from any imminent danger. Prior authorizations are not required for emergency services.

Mental Health Crisis
A mental health crisis is a non-life threatening situation in which an individual is exhibiting extreme emotional disturbance or behavioral distress, considering harm to self or others, disoriented or out of touch with reality, has a compromised ability to function, or is otherwise agitated and unable to be calmed.

Examples of a Mental Health Crisis include:
- Talking about suicide threats
- Talking about threatening behavior
- Self-injury, but not needing immediate medical attention
- Alcohol or substance abuse
- Highly erratic or unusual behavior
- Eating disorders
- Not taking their prescribed psychiatric medications
- Emotionally distraught, very depressed, angry or anxious

A Crisis Plan will be created for all children enrolled in Children Come First. Your child’s Crisis Plan will describe who to call during a crisis. If necessary, CCF also has two crisis lines that are staffed 24 hours per day:

For RISE clients, call #258-0269.
For ARTT clients, call #280-2610.

Contact your Clinical Specialist (or the appropriate crisis line if it is after hours) if you think your child needs to be in a psychiatric hospital.

Grievances & Appeals
Children Come First wants your family to get the best care possible. If you are not happy with the care you are getting, we would like you to let us know. You will not get in trouble for telling us your concerns. Knowing your concerns can help us give you better care.

Informal Grievances
If you are unhappy with your care, you can let the person you are working with know you are not happy. They can try to help work it out. If you don’t want to tell this person, you can call his/her Supervisor.

Formal Grievances
If you are unhappy with the response from your informal grievance you can file a formal grievance. You can also do this right away if you want. To do this, contact the following people:
If you need help to file or write your grievance you can call Wisconsin Family Ties at (608) 267-6888.

If your formal grievance is about a decision to decrease or deny a covered service, you must file within 45 days of that decision. This also applies:

a. If you were not getting the service before the decision CCF does not need to provide the service during this process.

b. If you were getting the service before the decision CCF will provide the same level of service during this process. If the decision does not change you may have to pay for these services.

This is how Children Come First will respond to your formal grievance:

1. The Quality Improvement Manager (for RISE) or the CYF Mental Health Manager (for ARTT) will send you a letter within 10 business days. This is to let you know we received your grievance. We will look into your concerns. The Manager will mail you a decision letter within 30 calendar days from the day you filed your grievance. You will also get information on what to do if you do not like this decision.

2. If the Quality Improvement Manager (for RISE) or the CYF Mental Health Manager (for ARTT) needs more time to make a decision, their time period may be increased by 14 calendar days. If this happens, we will notify you in writing. We will explain why we need more time. We will also tell you when we will have a decision for you. The total time for Children Come First to make a decision will not be more than 45 calendar days from when you filed.

3. If you do not like the CCF Manager’s decision, you can ask for it to be reviewed by the CCF Grievance Committee. You have 14 days from the day you receive the Manager’s decision letter to ask for this review. You can ask for this review by contacting the following person:

   CYF Mental Health Manager
   1202 Northport Dr.
   Madison, WI 53704
   (608) 242-6404

You will get a letter telling you when and where the Grievance Committee will meet. You will get this letter at least 7 days before the meeting. You have a right to be at the meeting. You have a right to present your information in writing or orally. You can bring whoever you want to the meeting. This can be a family member, a friend, or a provider.

**Expedited Review**

If you think your grievance is urgent you can ask for an Expedited Review. This means we will decide very quickly. This is for when you need a response right away to prevent serious harm. We will look over your concerns and decide within 2 business days. You can ask for an Expedited Review from the person you are working with, or their Supervisor. You will not be penalized for asking for this. Also,
your providers will not be penalized for asking for this.

If we do not think this is urgent, we may not speed up your decision. If that happens, we will tell you right away. We will also mail you a letter within 2 calendar days. We will then respond to your grievance in our regular timeframes.

**Grievance Rights**
You have the right to:

- Get help to write and file your grievance. You can get help from any CCF employee. Or you can call Wisconsin Family Ties at (608) 267-6888. You can also call the Medicaid Managed Care Ombudsman at 1-800-760-0001.
- Look at the information Children Come First used to make its decision.
- Attend meetings about your grievance. You can bring whoever you want to these meetings. This could be a family member, a friend, or a provider.
- Present new information during the grievance process.
- Ask that your grievance be handled in an urgent manner (see Expedited Review above).
- Have an interpreter. This will be free to you. You can ask for an interpreter by calling the Quality Improvement Manager (for RISE) or the CYF Mental Health Manager (for ARTT).
- Move to any part of this grievance process at any time.

**Appealing a Decision**

*Please note: You can go to any part of this grievance process at any time. You can file directly with the State if you want to.*

You have 14 days from the date you get the CCF Grievance Committee decision to ask for a State level review.

**Appealing to the Department of Health and Family Services**
You can appeal a grievance decision to the State of Wisconsin, Department of Health and Family Services. You can do this by contacting:

**Medicaid Managed Care Ombuds**
P.O. Box 6470
Madison, WI 53716
Phone: 1-800-760-0001

The Department will review your grievance. They will provide a final response within 30 days from the date the Department has all the information they need to make a decision.

**State Fair Hearing Request**
You can appeal a grievance decision by asking for a hearing with the State’s Department of Hearings and Appeals (DHA). You can do this by writing to:

Division of Hearings and Appeals
P.O. Box 7875
Madison, WI 53703-7875

In your letter you will need to include the enrollee’s name and social security number, your mailing
address, a brief description of the problem, and your signature. The hearing request date will be the date they receive your letter.

If your Appeal is about a decrease or denial of a covered service this applies:

1. If you were not getting the service before the decision CCF does not need to provide the service during this process.

2. If you were getting the service before the decision CCF will provide the same level of service during this process. If the decision does not change you may have to pay for these services.

If you need help asking for a State Fair Hearing, you can call the Medicaid Managed Care Ombudsman at 1-800-760-0001.

**Transition Planning**

Because the Hospital Diversion Program is a relatively brief program, it is important for your Child & Family Team to plan for life after CCF involvement ends. This planning should identify a timeline for leaving the program, services and supports that will remain in place after disenrollment, and information about what to do if things are not going well.

**Leaving the Program**

Your child may be disenrolled from the CCF Hospital Diversion Program if:

- Your child has made substantial progress toward treatment goals and is no longer at great risk of an institutional placement in a psychiatric hospital, residential treatment center, or corrections.
- You (the parent or legal guardian) ask that your child be removed from the program.
- Your child moves out of the county, is court-ordered to a correctional placement, or is 19 years of age or older.
- Your child or family is not benefiting from services, including an extended runaway by the child.

We encourage you to attend CCF’s monthly Parent Groups and to stay in contact after your child leaves the program.

**Re-Enrollment**
Re-enrollment in the Children Come First program may be an option for your child if he or she once again becomes at risk for institutional placement. If your child is involved with Dane County Department of Human Services you must contact your child’s Social Worker to discuss this option. If your child is not involved with Dane County Department of Human Services, you may contact RISE at #250-6634 to discuss this option.

### Advance Directives

There are times when an Enrollee turns 18 while enrolled in the program. Your CCF Coordinator will review the CCF Program and your enrollee rights with you again at this time. You will also be provided information about Advance Directives, which describe, in writing, your choices about the treatments you want or do not want or about how health care decisions should be made for you if you become incapacitated and cannot express your wishes. If you establish Advance Directives, you will want to share a copy with your CCF Coordinator to include as part of your medical records. RISE does not hold any beliefs or policies that prohibit your CCF Case Coordinator from honoring wishes made in your advance directives.

If you have concerns regarding non-compliance with your advance directives, you may file a complaint by contacting:

Department of Health Services, [Division of Quality Assurance](mailto:),
P.O. Box 2969
Madison, WI 53701-2969
Phone: 608-266-8481
Fax: 608-267-0352
Important Numbers

Contact your CCF Clinical Specialist for information on services and support options available for your child and family. For crisis situations outside of normal business hours—including a psychiatric hospitalization—please contact the crisis line of the CCF program your child is currently in:

**After Hours RISE-CCF Crisis Line** 608-258-0269
**After Hours ARTT-CCF Crisis Line** 608-280-2610

**Other Helpful Numbers:**
- DCDHS CYF Mental Health Manager 608-242-6404
- RISE Executive Director 608-250-6634 ext. 111
- CCF Family Advocate 608-250-6634 ext. 124
- CCF Quality Improvement Manager 608-250-6634 ext. 110
- DCDHS Parent Support Collection Unit 608-242-6408
- Social Security Office 866-770-2262
- Domestic Abuse Intervention Services 608-251-4445
- Parental Stress Center 608-241-4888
- Suicide Prevention Helpline 608-280-2600
- United Way First Call for Help Dial 211
- Wisconsin Family Ties Family Advocacy 608-267-6888
- Briarpatch Teen Helpline 608-251-6221
- Family Support & Resource Center 608-237-7630

**My Important Numbers:**

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**RISE Wisconsin, Inc.**

1334 Dewey Court  
Madison, WI 53703  
Telephone: 608-250-6634  
Fax: 608-250-6637

Email: info@risewisconsin.org  
Website: www.risewisconsin.org

**DCDHS—ARTT Unit**

1202 Northport Drive  
Madison, WI 53704  
Telephone: 608-242-6200  
Fax: 608-242-6293

Website: www.danecountyhumanservices.org