“What is the What?”

What is Self-Care?

Have you ever felt exhausted, grumpier than usual, had a hard time focusing, yelled at the universe to just stop moving for single moment?

Social service professionals are daily faced with the emotional pain and challenges of others. Over time this can have a crippling effect for those of us who help others (also known as secondary traumatic stress). Social service professionals for several years have maintained placeholders among the top 10 professions with the highest levels of stress, suicide rates, and substance use*.

Self-Care is a series of intentional lifestyle choices we make to recharge our sense of self. Self-care can look different for each person. Some emphasize physical self-care by working out, others social self-care by having their “person” they can go to process and vent to, another may need to give themselves permission to spend a little money on themselves or take a vacation day.

In a society that values productivity and business, we need to be reminded that self-care is not selfish—it is necessary to continue to serve others the best that we can. In fact it is an ethical issue that we present ourselves in the most competent professional state and avoid/address any situation that interferes with our ability to make impartial decisions in order to best meet the needs of the people we serve. (NASW Code of Ethics 1.04, 1.06).

Resources to Help with the Self-Care Journey:

Do: Professional Quality of Life Self-Assessment
Watch: The Importance of Self-Care (Collection of TED Videos)
Read: 45 Simple Self-Care Practices
Explore: Self-Care Starter Kit
Listen: The Social Work Podcast [ep 118]: A to Z Self-Care for Social Workers and Other Helping Professionals

* citations from multiple resources including: Psychology Today, US News & World Report, CNBC, CBS.
Boundaries for CCS Service Providers

Within a program as complex as CCS, it can seem like there is a lot to do and keep track of. This can also add to stress and burnout. One means of self-care is to examine and establish boundaries, to know where your responsibilities start and end. Below is a general framework for all CCS providers to help with understanding your professional boundaries. This resource is only a suggested starting tool. Discuss further within your organization and within your treatment teams.

If you would like a copy of this source template, contact Emily McGonigle or Ryan Ross

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**GREEN = CORE ACTIVITIES**

*Vital in sustaining CCS programs*

- Provide Services
  - Meet Contact and Service Requirements on Service Plan
  - Assist with developing consumer & family self-sufficiency
  - Assist with developing community integration & supports
- Monitoring the Progress and Stability of the Service Plan
  - Note Progress Made/Not Made in Progress Notes
  - Attend & Contribute in Monthly Team Meeting reviews
  - Review Service & Crisis Plans
- Maintain Continued Funding of Program
  - Ensuring Valid Service Plan and Service Authorizations
  - Completing Documentation & Notes in a Timely fashion
- Enhance Knowledge of Service Delivery
  - Complete Required Trainings upon hire and annually
  - Engage in Clinical Supervision with a Mental Health Professional
- Reporting Suspected Abuse/Neglect to Child/Adult Protection Agencies

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**YELLOW = ACTIVITIES THAT MAY BE NECESSARY AT TIMES, BUT NOT CORE**

- Attend Medical Appointments (medical & psychiatric)
- CPS/JJ/EP driven meetings
- Court
- Provide Support to Consumer’s Family and Social Network
- Coordinating/Connecting Consumer with other services
- Personal Self-Disclosure (sharing information about your personal life)

**Things to consider:**

1. Yellow Activities may become Green activities if explicitly stated in the approved service plan
2. If green activities are done, and you have time, and service plan approval, you may choose to do these
3. If doing the activity alongside a core activity (i.e. assisting with self-sufficiency)
4. When participant is new; it may make sense to accompany to first appointments

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**RED = ACTIVITIES OUTSIDE OF THE ROLE**

- Taking on Parental and/or Consumer Responsibilities
  - Direct Care/Supervision
  - Daycare
  - Errands
  - Moving
  - Taking on Caregiving/Respite
- Transportation Only
- Recreational Activities
  - Participating in recreational event with no clear connection to treatment outcomes/objectives
  - Attending sporting events to watch consumer
- Serving as First Responders
  - On-Call Crisis Responder/Immediate Crisis follow up
  - Direct Care Responder
- Family Disputes
  - Custody/Divorce
  - Mediating
- Completing CPS/JJ activities (supervised family visits, etc)
- Enforcing Court Orders
- Researching or Completing Applications for other Resources for a Consumer/Family without consumer or family participation

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**Submissions:** Have you observed or heard of another provider doing a good job?
Do you have a question for the Emilies?
Know of any trainings or events occurring in the community or hosted by your agency?

Please send to Ryan Ross rross@lacrossecounty.org by the 25th of the month.
**Emails from the Emilies**

Q: In regards to the 1-hour of clinical supervision requirement: if a staff is currently in a college program for psychology, human services, etc. Can time with a licensed professor count for supervision?

A: Time spent in a classroom as part of an academic program could count towards the staffs’ training hours for CCS, but it would not count towards clinical supervision hours.

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**Faces of CCS**

**Kyra Wolf (La Crosse County)**

CCS Youth Service Facilitator

CLTS Service Support Coordinator

I originally started with La Crosse County as an Economic Support Specialist in October 2013, and after about a year transitioned into being a CCS Service Facilitator. When the waiver expansion started to happen in late 2017, I was trained to also provide Support and Service Coordination under the CLTS-Waiver. Prior to my current role, I didn’t anticipate working with kids because I had always worked primarily with the adult population. When I interviewed for my current position, I thought I was interviewing for an adult worker position, but soon found out it was for youth. It has definitely been a learning experience, but happy with the way things turned out with the unexpected transition. Some of my interests and hobbies outside of work include: bicycling, road trips, being active with my black lab Porter and my husband, coffee, Mexican food, live music, watching sports, working out, being in nature, golfing, and starting to dabble with photography.

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**CCS by the Numbers**

**The State of WRIC-CCS (2019)**

Total Individuals & Families Being Served: 471

- Adults: 215
- Transitional Age (16-26): 33
- Youth & Families: 223

By County:
- La Crosse: 354
- Monroe: 81
- Jackson: 36

WRIC Providers: 60

- Service Facilitators: 47
- Psychotherapy: 26
- Skills & Wellness (Community-Based): 24
- Substance Use: 7
- Residential Facilities: 16

Outcomes (from 2018):

- Discharges Back into the Community: 97 (65%)
- Average Length of Service in CCS: 2 years, 3 months

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**Policy Primer**

**Payment for Non-Covered Services**

(Forward Health Billing & Claims Manual, topic #104)

Providers may not collect payment for certain non-covered services or activities provided in connection with covered services including:

- Charges for Missed Appointments
- Charges for Telephone Calls
- Charges for Time Spent Completing Necessary Forms, Billing Claims, or Reports
- Translation Services

For online access to the Forward Health Comprehensive Community Services Provider Handbook for Billing & Claims
What Does It Mean to be a Social Worker?
(from Confessions of a Banshee)

It means having an honest dialogue with people. It means talking openly about trauma, addiction, suicide, homicide, rape, abuse, homelessness, mental illness, poverty, sexual deviance, criminal activity, racism, sexism, aging, illness, abortion, marriage equality, religious freedom, euthanasia, finances, issues related to military combat, and gender identity—among other topics. It means discussing these matters in the complete absence of judgement.

It means early mornings, late nights, and hours spent sitting next to someone who mostly cannot stand you in an emergency room, a food bank, or at the Department of Human Services. It means finding a bed bug crawling on your pants, having your car tire slashed in a dangerous neighborhood, and finding a needle in an unconscious person’s arm. It means watching two years of sobriety get washed down with cheap vodka or go up in smoke.

It means going to sleep on a cold night thinking about the people not lucky enough to have found shelter in time. It means waking up to learn about the man that died of hypothermia while you slept peacefully in a warm bed. It means someone jumped in front of a train, or hung himself in a forest, or shot himself in a parking lot.

It means no longer finding it strange when people talk to themselves, or talk to people you cannot see, or style their hair in front of a mirror that does not exist with an invisible curling iron. It means that a woman engaged in sex work will think you are competition and chase you out of an apartment complex.

It means that you will spend your day surrounded by the profound suffering, deep sorrow, and unbearable pain of others. It means acknowledging that many problems have absolutely no solution. It means accepting that not all people want, nor need, the help of a social worker.

It means accompanying a human that you never would have met had you chosen a different profession on their powerful life journey. It means building meaningful connection with resilient and fascinating individuals. It means the precious opportunity to learn from people very different than you. It means experiencing the struggle with someone who so generously trusts you. It means sitting quietly next to someone in a moment of hardship and realizing that you do not need words to feel someone’s intense gratitude for your presence.

It means watching someone unlock the front door of her new apartment after twenty years on the streets. It means being present for someone’s first step toward recovery. And all the missteps along the way. It means being lucky enough to show up for someone in need when no one else would. It means being a voice for those who cannot speak for themselves.

It means learning to treasure success, however small. It means constantly seeking to uncover the inherent strengths of others. It means triumph and transformation. It means always keeping the faith and never giving up hope.

It means asking yourself, “who am I not to change the world?” It means believing that you can, and do, make a difference every single day.

Social work means getting to fully experience the vast richness and the strange, exquisite beauty found in the rawest parts of our human condition.
Upcoming Events

Meetings

- **Vendor Clinical Support Groups:**
  - 1st Thursday (3/7): 1:30-2:30pm @ La Crosse County Human Services #2002
  - 3rd Tuesday (3/19): 10-11am @ La Crosse County Administration #1107
    Who Should Attend: Any direct provider of CCS services. Teleconference available

- **Residential Clinical Support Teleconference Groups:**
  - 2nd Tuesday (3/12): 9-10am @ (605) 472-5637 Code: 994794#
  - 4th Monday (3/25): 2-3pm @ (605) 472-5637 Code: 994794#
    Who Should Attend: Any direct provider of CCS residential services

- **Vendor Contracting**
  - All Vendor Conference; March 12 from 10am-12pm at La Crosse County Human Services Basement Auditorium. Will discuss updates to vendor contracts and program requirements
  - CCS Contracting & Rate Workgroup; March 22 from 1-3pm at La Crosse County Human Services Basement Auditorium. To discuss changing CCS rates and contracting process
    Who Should Attend: Directors and Administrative staff

- **CCS Statewide Meeting**
  - April 16 from 8am-4pm at Glacier Canyon Conference Center, WI Dells. Information and Registration at [DHS.wisconsin.gov/ccs](http://DHS.wisconsin.gov/ccs)
    Who Should Attend: Open to anyone involved in CCS services

Trainings

**CCS Core Curriculum (teleconference available)**

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<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Session</th>
<th>Location</th>
<th>Registration Info</th>
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<tbody>
<tr>
<td>Mar 6</td>
<td>10:00</td>
<td>CCS Program Overview</td>
<td>La Crosse County Admin 1107</td>
<td>Info &amp; Registration</td>
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<tr>
<td>Mar 13</td>
<td>10:00</td>
<td>CCS Policies &amp; Procedures</td>
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<td>Mar 27</td>
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**Other Trainings**

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<td>Mar 8</td>
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<td>Addictions &amp; Attachment: Implications for Treatment</td>
<td>University of MN—Webinar</td>
<td>Info &amp; Registration</td>
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<td>Mar 14</td>
<td>11:00am</td>
<td>Boundaries in Clinical Practice</td>
<td>WPPNT Teleconference</td>
<td>877-820-7831 Code: 107633#</td>
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<td>Mar 21</td>
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<td>Trauma Informed Care in Community-Based Settings</td>
<td>Webinar</td>
<td>Info &amp; Registration</td>
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<td>Mar 26-29</td>
<td>8:00am-4:00pm</td>
<td>Circle of Security</td>
<td>First Presbyterian Church, La Crosse</td>
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<td>Mar 28</td>
<td>11:00am</td>
<td>Wellness &amp; Recovery Action Planning</td>
<td>WPPNT Teleconference</td>
<td>877-820-7831 Code: 107633#</td>
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You’re Invited!

To the Chileda Sibshop for siblings of children with special needs

Who: Children 7-12 with a sibling with special needs.

When: Saturday, March 9, 2019 from 9:00am-12:00pm

Where: Chileda
1825 Victory Street
La Crosse WI 54601

Cost: $10 (to cover supplies and snack)

Pre-registration is required and space is limited

Sibshops are pedal-to-the-metal celebrations of the many contributions made by brothers and sisters of kids with special needs!

To register contact Karrie Zielke
Director of Chileda
Development and Learning Center
Karrie@chileda.org
608.782.6480 ext. 368

The Wisconsin Trauma Project

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) Learning Collaborative

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)
TF-CBT is an evidence-based, short-term treatment model that effectively improves a range of trauma-related outcomes in children, adolescents, ages 3 to 18, and caregivers. TF-CBT is highly effective at improving youth posttraumatic stress disorder (PTSD) symptoms as well as many other trauma impacts, including affective (e.g., depressive, anxiety), cognitive and behavioral problems, as well as addressing the participating parent’s or caregiver’s personal distress about the child’s traumatic experience, effective parenting skills, and supportive interactions with the child.

Wisconsin Trauma Project

The TF-CBT Learning Collaboratives are part of the larger Wisconsin Trauma Project at the Department of Children and Families. The Trauma Project works to strengthen trauma-informed care infrastructure throughout the state. The project has three components: TF-CBT training for mental health clinicians; Trauma-informed caregiver training for caregivers of children who have experienced trauma; and Organizational Systems Change. Counties and tribes can apply to participate in any component of the project.

2019 Learning Collaborative Sessions

Racine – Delta Hotel by Marriott
Learning Session Part I: March 13-15, 2019
Learning Session Part II: July 10-11, 2019

Eau Claire – The Linmore Hotel
Learning Session Part I: July 28-31, 2019
Learning Session Part II: November 13-14, 2019

Registration will be coordinated by the Milwaukee Child Welfare Professional Development System. If interested, please register via the attached link: https://itsupl1.com/traumafr2019

DCF Contact:
DCFWisconsinTraumaProject@wicf.gov

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