



The policy of the Chicago Department of Public Health Division of Mental Health is to provide a broad array of evidence based, well-defined culturally sensitive mental health programs and treatment approaches/modalities to assist consumers increase functional capacity and achieve Individualized Treatment Plan objectives and recover. Each program delivers its services according to a written plan that directs the program and the delivery of services.

All of the procedures associated with admitting a consumer into a mental health program are designed to accomplish the following goals:

- 1. Ensure that consumers are matched with the appropriate level of care.
- 2. Optimize consumer participation in making decisions regarding their admission to mental health program.
- 3. Eliminate or reduce barriers to access to mental health services and medical and other public health services available through in the CDPH system.
- 4. Triage consumer acuity and presenting problems to ensure case assignment is matched with clinician specialty in a timely manner.

Intake process:

- 1. CDPH is currently serving children (ages 6 and above,) adolescents, and adults.
- 2. Services are currently provided in English and Spanish.
- 3. All clinicians will be conducting intakes on a rotating basis
- 4. Until Intake is centralized in one location and one intake number, all clinicians will take one day to conduct intakes.
- 5. Once intake is centralized Center Director will assign cases based on needs and expertise.
- 6. Service request can be via:
 - a. Walk-in
 - b. Telephone
 - c. Video
 - d. Fax
 - e. Email
- 7. The process will begin by accessing the new computerized Intake form created in RedCap. The assigned Intake worker will click on the following link https://redcap.link/CDPHMHIntake The link will take the Intake worker directly to the form.
- 8. Once the form is loaded the Intake worker will begin the inquire process to determine eligibility for services.
- 9. If the request is via fax or email the Intake clinician must contact the requester and verify all necessary information.
- 10. If the requester speaks a language other than English or Spanish the Intake worker will seek help from other colleagues or use the language line:





a. Dial 1-866-874-3972

b. Provide Client ID: 206688c. Indicate the language need.

d. Provide: 2 Digit location code:

Englewood: 13
 Lawndale: 14
 Greater Grand: 15
 Greater Lawn: 16
 North River: 17

In certain cultures, people use family members as translators, in the event of such situation the intake worker should use family members as a last resource to obtain the necessary information to complete the intake form.

- 11. Each Spanish-speaking clinician will be assigned to a specific day of the week where they are the clinician responsible for any Spanish-speaking intakes that come in that day. These clinicians are never on the calendar for intakes in any other language other than Spanish. Spanish-speaking clinicians do not need to clear their schedule for the day, as the volume is lower thank intakes in other languages.
- 12. For intakes completed in any language other Spanish, the clinician assigned to intake for the day is expected to clear their schedule, and will be forwarded all calls for intakes across all 5 sites.
- 13. The sample calendar for centralized intake is located at this bottom of this document, as a visual representation of what the intake calendar would look like. Please note that "English" is actually any language other than Spanish, and would require the intake clinician to use the language line in the event that language is not the language spoken by the caller.

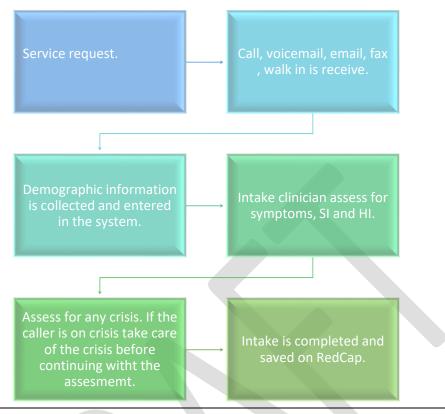
If the consumer is experiencing a crisis and has active SI or HI, the Intake worker must make sure the wellbeing of the consumer takes priority. At this point the completion of the intake can be paused to take care of the emergency. Make sure to follow all emergency procedures and recommendations.

Daily Intake Process:









The following information must be obtained:

- 1. Demographic information.
- 2. Current address.
- 3. Referral source.
- 4. Identify initial screener.
- 5. Desire service delivery (In person, Telephone or Video)
- 6. Desire Location (EN, GG, GR, LW or NR).
- 7. Race (Patient's own identification, Do not assumed ASK).
- 8. Ethnicity (Must Ask).
- 9. Birth Sex.
- 10. Gender Identity (ASK).
- 11. Preferred Pronouns (ASK).
- 12. Insurance.
- 13. Presenting Problem. (Patient's own words).
- 14. Risk Assessment.
- 15. Symptoms.
- 16. History of f Substance Use.
- 17. History of Treatment.
- 18. History of Medications.





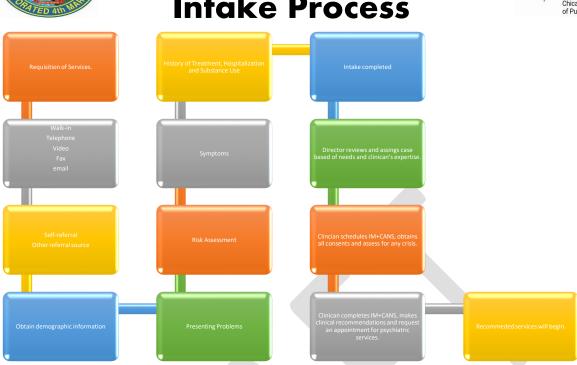
- 19. History of Hospitalizations.
- 20. Sources of Support.
- 21. Co-Morbid Medical Conditions.
- 22. Preliminary Diagnosis.
- 23. Types of Services requested.
- 24. Clinical Priorities.

Intake Assignment:

- 1. Intake worker will complete the form via Redcap and the form is automatically submitted to the center director.
- 2. The Intake forms will be review according to location in order to better accommodate the services the consumer is requesting.
- 3. Once the form is completed the Center Director will assign the case based on the needs of the consumer and clinical expertise of the staff.
- 4. The Directors will review each clinicians' current caseloads and make assignment to those that have less cases if the new case is a good match.
- 5. Once the case is assigned the clinician will receive an encrypted email from the Center Director with a completed PDF form of the intake completed, with the admin staff from the associated site cc'ed.
- 6. The assigned clinician will reach out the prospective consumer to schedule an appointment with the consumer to complete the IM+CANS.
- 7. The clinician can make the clinical decision to postpone the IM+CANS, if the consumer is experiencing a crisis. The wellbeing of the consumer should take priority.
- 8. The assigned clinician will discuss and collect all necessary consents.
- 9. The clinician will complete the IM+CANS and then make the necessary recommendation.
- 10. Once the IM+CANS is completed the clinician will request an appointment for the consumer to see the psychiatric provider.
- 11. The therapeutic process begins.







State Referrals:

- 1. Consumers referred or deflected to the center by Illinois Office of Mental Health are scheduled for an appointment within 24 hours of the time of assessment, or within the time specified in the center's continuity of care agreement with the Illinois Department of Human Services, Office of Mental Health.
- 2. Consumers discharged from an Illinois State mental health inpatient facility are scheduled for an appointment 24 hours from the date of screening.
- 3. Consumers discharged from private hospitals are scheduled within 7 days and other referral sources requiring outpatient mental health services are scheduled for an appointment within ten calendar days from the date of screening.

Managing Ineligible Consumers

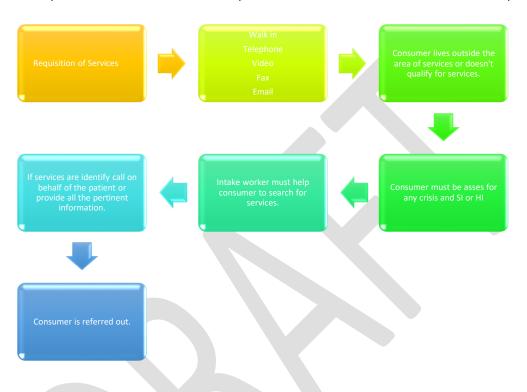
If the intake clinician determines that a prospective consumer is ineligible for services through CDPH programs, he or she discusses the reasons for ineligibility with the consumer, informs him or her about alternative resources or interventions, makes appropriate referrals, and documents the referral information in the intake form. If the consumer was referred from another agency, the intake clinician notifies the referring agency about the consumer's ineligibility for the program and discusses referrals/recommendations provided to the consumer. All consumers indicated as ineligible for services will be collected in Redcap, with reasons, and referrals provided.





Referral Procedures:

Consumers who do not meet the admission criteria for services and those who require services beyond the scope of those available in the Chicago Department of Public Health's services delivery system will receive a referral. Referral procedures will include helping the consumer locate appropriate service that he or she requires. The staff will also make specific recommendations about services and providers.



Expectations:

- 1. Full centralization of Intake.
- 2. CDPH will have a phone line, website link and an email address for all intake inquires.
- 3. Intake clinician will be the primary link for services. The clinician will assess and complete the Intake form in RedCap.
- 4. Once Intake is completed Center Director will log into RedCap and assign Intakes based on needs and expertise.
- 5. Assigned clinicians will then complete the IM+CANS and in collaboration with the consumer will complete the Treatment plan and recommendations for services.
- 6. Patient will be provided with the option of telehealth or in-person services.
- 7. Patients can decide to go to a clinic closer to their home or a clinic of their choice.
- 8. Until Intake is centralized all clinicians will have an assigned day to complete Intakes.
- 9. Vacation/Day Off- If a clinician has plan to be out on their assigned intake day they are responsible for switching days with another clinician, if a clinician is out unexpectedly they are





responsible for advising their supervisor that is your intake day, and the supervisor would be responsible for assigning another clinician to do intakes that for that day.

10. Case assignment- Case assignment is different from covering intake. Cases will not be assigned on a rotation basis, they will be assigned by matching therapist strengths with client presenting problems, logistical needs, and therapist caseload and productivity combination.







January

2023

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2 Closed	Spanish: Melenne English: Bre'Shae	Spanish: Gelsys English: Latesha	5 Spanish: Marco English: Cvnthia	6 Spanish: Lorena English: Chandra	7
8	Spanish: Annette English: Danielle	Spanish: Melenne English: Dawn	Spanish: Gelsys English: Cvndee	Spanish: Marco English: Calex	Spanish: Lorena English: Mary	14
15	Closed 16	Spanish: Melenne English: Jay	Spanish: Gelsys English: Kadijat	Spanish: Marco English: Latrelle	20 Spanish: Lorena English: Shilvnda	21
22	Spanish: Annette English: Susan	Spanish: Melenne English: Angela	Spanish: Gelsys English: Nancy	26 Spanish: Marco English: Sheila	27 Spanish: Lorena English: Robert	28
29	Spanish: Annette English: Othello	Spanish: Melenne English: Bre'Shae	Spanish: Gelsys	Spanish: Marco	Spanish: Lorena	