



Denali Family Services
Consumer Rights Guidebook

Mission:

Supporting Children and Families
Through Individualized and Community Based Services

State of Alaska Mental Health Service Principles

The Division of Mental Health and Developmental Disabilities adopted the following combined service principles in December of 1997. These principles reflect the approach of both the Developmental Disabilities and Mental Health Sections to providing services in Alaska.

- Individuals are actively involved in and determine the design and implementation of their service plan.
- Individuals have access to a system of comprehensive and integrated community-based services.
- Services promote natural and community supports including family, friends and other citizens.
- Services promote natural and community supports including family, friends and other citizens.
- Services are relevant to the individuals' age, abilities and life goals.
- Services demonstrate respect for the rights and dignity of all individuals.
- Services incorporate the culture and value system of the individual.
- Individual choice, satisfaction, safety and positive outcomes are the focus of services.
- Individuals are offered the support and services necessary to be successful where they live, work and play.
- Services are designed to foster communities where all members are included, respected and valued.

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Introduction

Welcome!

Thank you for choosing Denali Family Services as your provider. Our goal is for you to be pleased with the effectiveness of our services and the positive communication with Denali's staff. We need your continued help in improving our services so your feedback is important to us.

This guide has been given to you so that you will know what you should expect from Denali Family Services. **If you are ever unhappy with our services, we need you to tell us.** Please review this guide thoroughly. We want Denali's services to meet your needs.

Sincerely,

Yvonne M. Chase, PhD, MSW, LCSW
President / CEO

Client's Bill of Rights

1. I have a right to be treated in a manner that promotes dignity and self-respect.
2. I have a right to receive a paper copy of Denali Family Services' (DFS) Notice of Privacy Practices.
3. I have a right to be fully informed, prior to receiving services, the fees, payment options, and insurance reimbursement for any service to be provided by DFS.
4. I have a right to receive current information regarding my diagnosis and recommended treatment.
5. I am entitled to participate in formulating, evaluating and periodically reviewing my individualized written treatment plan, including requesting specific forms of treatment, being informed why requested forms of treatment are not made available, refusing specific forms of treatment that are offered, and being informed of treatment prognosis.
6. I have a right to be informed by my prescribing physician or nurse practitioner of the name, purpose, and possible side effects of any medications prescribed as part of my treatment plan.
7. I have a right to be permitted to review my case file with an appropriate employee and to receive a copy of my record upon my request in writing.
8. I may request a copy of the discharge summary, which should include discharge and transitional plans
9. I have a right to confidential maintenance of all information pertaining to me and the right to provide written approval for release of my identifiable information
10. I have a right to actively participate in developing and modifying goals for myself in therapy and other services I utilize.
11. I have a right to be informed of services within Denali Family Services (DFS) as well as equivalent services throughout the community.
12. I have a right to receive referrals to other agencies in the community if, at any time, other services are needed or desired.
13. I have a right to know any DFS employee who is responsible for my treatment by name and be able to speak with him/her while he/she is at the agency.
14. I have a right to have a relationship with DFS that is therapeutic.

15. I have a right to be able to present any complaints or grievances to DFS to be addressed and resolved according to established procedures.
16. I have a right to be free from restraint except when determined absolutely necessary to protect myself or others from harm.
17. I have a right to receive treatment without discrimination based upon race, religion, sex, marital status, sexual orientation, national origin, age, or disability.
18. I have a right to be free to communicate with my significant others in emergency situations.

Client's Rights for Children and Teenagers

1. Your color, race, sex, sexual orientation, and religion will not affect the way you are treated, or the quality of services you receive.
2. You will not be punished in any physical way. Employees will not make fun of you, hurt you with words, or embarrass you. They will not allow others to do this. Other consumers will not be allowed to harm you. You will be treated with respect.
3. You have the same rights as every other person whom we work with. You will have a treatment plan while you are receiving services here. The treatment plan will be written with you to assist in addressing issues identified by you, your family and the Denali Family Services employees. Your treatment plan will be reviewed every 90 days, and updated as needed, to ensure you are receiving services that assist you in reaching your goals. You, your parent(s), guardian(s), social worker, probation officer, teacher and clinician will all meet to discuss your treatment plan. This is the best time to inform employees and the group how you feel about the services you are receiving. You are an important person at Denali Family Services and the reason this agency exists. We want to know what is going well, what needs to be changed, and any other suggestions you have that may improve service delivery. We want and need your feedback!
4. You, your parent(s), guardian(s), doctor, probation office, or DFYS worker may review your treatment plan at your request, at reasonable times.
5. Diversity is important to everyone at Denali Family Services. Your cultural values and traditions will always be respected.
6. At your request, you will have the opportunity to participate in activities consistent with your ethnic and cultural background.
7. Your confidentiality is one of our top priorities. Personal and treatment information will only be released to a third party with signed releases of information from your legal guardian or as required by state or federal law. All Denali Family Services employees are obligated to report instances of abuse and neglect of children, adults, seniors and any population of vulnerable persons.
8. You, your parent(s), or guardian(s) can file a grievance or make a complaint if you are unhappy with services you are receiving. You may contact Denali Family Services Clinical Director at 907-274-8281 with any questions.

Rights for Foster Children Using DFS Foster Homes

At Denali Family Services, we believe every child in foster care has the same rights belonging to all children, in addition, because of the temporary or permanent separation from and loss of parents and other family members; children require special safeguards, resources and care (Casey Foundation).

Every child in foster care has the inherent right:

1. To be cherished by a family of your own, either by your own family helped by readily available services and supports to reassume your care, or an adoptive family, or by plan, a continuing foster family.
2. To be nurtured by foster parents who have been selected to meet your individual needs.
3. To receive sensitive, continuing help in understanding the reasons for your own family's inability to take care of you, and in developing confidence in your own self worth.
4. To receive continuing loving care and respect from your foster parent(s) as a unique human being.
5. To grow up in freedom and dignity in a neighborhood of people who accept you with understanding, respect and friendship.
6. To receive help in overcoming things from your past that has hurt you whether emotional, physical, intellectual, social or spiritual. Your continued growth and learning is important to us.
7. To receive education, training, independent living, and career guidance to prepare for a useful and satisfying life.
8. To be represented by an attorney, when applicable, in administrative or judicial proceedings.
9. To be free from physical, sexual, emotional, and other forms of abuse and neglect.
10. To contact friends and family unless prohibited by your Division of Family and Youth Services (DFYS) worker or Division of Juvenile Justice (DJJ) probation officer (when applicable) or court order.
11. To contact Denali Family Services with any and all concerns regarding the care you are receiving in one of our foster homes.

12. DFYS authorizes Denali Family Services to license foster homes. The DFYS licensing worker for Denali Family Services can be contacted at 907-274-8281 with any questions. The licensing supervisor may also be reached at 907- 222-2324.

Information for Legal Guardians of Consumers

There are several different forms of legal guardians at Denali Family Services. The legal guardian of a child may be a biological mother or father, a grandmother or grandfather, and aunt or uncle, a Social Worker of Children's Services Specialist from DFYS, or a probation officer. Below is a list of ideas and suggestions for legal guardians that may help ensure your child is getting the most of the programs and services Denali Family Services offers.

1. It is beneficial to know who is providing services for your child. He/she may be receiving clinical services, have a care coordinator, like skills specialist or group services. Knowing who is providing services to your child will help you when you need to contact someone with questions about what is on a treatment plan, what activities are planned for Kid's Club, etc.
2. Your child may talk with you first if he or she is in some way unhappy with the services he or she is receiving. If your child is unhappy with services, please let us know so we can correct the problem.
3. **You and your child should ALWAYS receive a copy of his/her current treatment plan. If you do not understand this plan, you have the right to have it written in language that you do understand.**
4. If there are problems with the services that your child is receiving, you may file a grievance with Denali Family Services. Grievance information is included in this guidebook.
5. If you need assistance with filing a grievance, please call the Clinical Director, at 907-274-8281. No one will treat you differently because you have made a complaint. If so, please contact the Executive Director at 907-222-2322.
6. **If you have a billing concern or wish to report fraud, you should immediately call 907-222-2387. (see fraud definition on page 19)**
7. **If you suspect child abuse or neglect, you should immediately call DFYS at 907-269-4000.**
8. If Denali Family Services cannot resolve the concern or problem you or your child is having, please see section Additional Agencies that Can Help beginning on page 14.

How Do I File A Consumer Grievance?

1. A consumer may file a grievance by:
 - A. Requesting a feedback form from any Denali Family Services' staff member and submitting it to a receptionist, or:
 - B. Contacting the Clinical Director by:
 - i. E-mail: ablair@denalifs.org
 - ii. Telephone: 907-274-8281
 - iii. Fax: 907-274-4055
2. The form will be routed to the Clinical Director for review. Whenever possible, the Clinical Director will attempt to resolve the issue through the treatment team process.
3. The Clinical Director will conduct an investigation. Findings from the investigation will be sent to the consumer within to working days of initial receipt.
4. If the problem is not satisfactorily resolved, a committee of the Board of Directors will review the original complaint and the Clinical Directors findings. Findings from this review will be sent to the consumer within 10 working days.
5. In any case, the plan for resolving the grievance will be documented and implemented.

Consumer or Guardian

Date

Witness

Date

How the Grievance Process Works

POLICY: Denali Family Services shall resolve to the maximum extent possible a consumer's complaint or appeal.

PROCEDURE:

1. All clients have the right to file a grievance without fear or intimidation, or retaliation of any kind.
2. All clients shall be notified in writing of the grievance policy, during the intake process. A signed copy of receipt of the grievance policy shall be maintained in the client record, and updated at least annually.
3. Consumer grievances and feedback can be filed in one of three ways:
 - a. Any staff person shall provide a feedback form to any consumer upon request. Forms shall be readily available.
 - b. A consumer may file a verbal complaint directly or over the phone with the Clinical Director who will complete the consumer feedback form.
 - c. Clients can file a grievance by e-mail to the Clinical Director
4. If clients would like assistance in filing a grievance the client can designate a representative or advocate to assist them with all steps of the grievance process.
5. Upon request a client's case manager or clinician or the Clinical Director can assist the client in filing a grievance or provide a written referral to a client organization such as NAMI-Alaska or the Disability Law Center to assist them with a grievance.
6. The Clinical Director shall acknowledge positive feedback verbally or in writing to the consumer.
7. If the feedback is negative, the Clinical Director shall attempt to resolve the issue with the client in collaboration with the clinical director and treatment team within five (5) business days of receiving the initial grievance.
8. If the consumer does not feel that the issue was satisfactorily resolved, s/he must inform the Clinical Director within ten (10) business days.
9. Within five (5) business days of receipt of notice of consumer appeal, the CEO shall review all related documentation and make a determination. The CEO shall send notice of this determination to the consumer and to the Clinical Director.
10. If the client wishes to appeal the decision further, they may request verbally or in writing to have the appeal forwarded to the board of directors to be reviewed at the next board meeting.
11. Within 30 business days if a satisfactory resolution cannot be found a referral to Behavioral Health will be made to provide technical assistance for an unresolved grievance.
12. If the grievance involves alleged abuse, alleged unnecessary seclusion or restraint it will automatically be brought to the board of directors at the next board meeting.

13. The Clinical Director shall implement the resolution through collaboration with appropriate personnel, and shall document the resulting plan for grievance resolution.
14. The Clinical Director shall maintain a copy of the complaint, the resolution, and the notification.
15. The Clinical Director shall maintain a cumulative list regarding the nature and resolution of complaints. This list will include the type of incident/ concern and the resolution but the names of the clients and involved staff members would remain confidential.
16. The Board of Directors reviews a report analysis of client complaints at least once per quarter to assess complaint patterns, liability issues, and potential areas for improvement.
17. The continuous quality improvement process shall include review of feedback forms.
18. Client confidentiality shall be maintained throughout the grievance procedures.

If you have questions or need any assistance with this, please call the Clinical Director at 274-8281.

Additional Agencies that Can Help

Denali Family Services will make every reasonable attempt to resolve any problem you or your child is having while receiving services here. If, however, we cannot resolve a concern to your satisfaction, there are additional agencies that may be able to assist you.

Council on Accreditation (COA)

Do you have a concern about Denali Family Services that you would like to share with the Council on Accreditation? COA reviews issues about its accredited organizations after receiving background information regarding the concern as well as a signed consent. The consent gives COA your permission to contact the organization about the concern and to disclose your name to the organization.

Division of Mental Health and Development Disabilities (DMHDD)

Denali Family Services is a grantee of the Division of Mental Health and Developmental disabilities (DMHDD). DMHDD is available to receive any concerns or comments you may have about the services provided at Denali family Services. The Consumer Affairs Administrator at DMHDD can be reached at (907) 465-3139 or at (907) 465-4828. You may also visit the DMHDD web site at <http://www.hss.state.ak.us/dmhdd> for additional information.

National Alliance for the Mentally Ill Alaska (NAMI)

The National Alliance for the Mentally Ill Alaska (NAMI) chapter assists parents and families in understanding and caring for children with mental illness. NAMI's address is 144 W. 15th Ave. Anchorage, AK 99501. You may call NAMI at (907) 227-1300 or e-mail them at info@nami-alaska.org.

Alaska Mental Health Association (AMHA)

The Alaska Mental Health Association (AMHA) conducts studies regarding mental health, advocates for development and funding of mental health services and has information about mental illness. If you have feedback for them, or suggestions about programs or services you feel would benefit persons with mental illness, you may call them at (907) 563-0880 or visit their web site at www.alaska.net/~mhaa.

Disability Law Center of Alaska

Disability Law Center of Alaska is an excellent resource for people with disabilities. They can provide information about legal rights, advocacy, and provide you with information about other mental health agencies in Alaska. Disability Law Center of Alaska is located at 3330 Arctic Blvd., Ste. 103 Anchorage, AK 99503. Their phone number is (800) 478-1234 or email them at akpa@dlcak.org.

Division of Family and Youth Services (DFYS)

If you have children in the custody of Division of Family and Youth Services (DFYS) and would like to speak to someone there about concerns or problems with services your child is receiving at Denali Family Services, you may obtain DFYS grievance resolution information online at <http://www.hss.state.ak.us/dfys>. Here, you will be able to view information about the complaint. Form (06-9538) you can get a copy of the grievance procedure regulations for the publications page (Alaska Administrative Code 7 AAC 54.205 – 7 AAC 54.900), which explain the grievance procedure in detail.

Department of Juvenile Justice (DJJ)

If you have children who are supervised by the Department of Juvenile Justice (DJJ) or have a probation / parole officer, they may be contacted about the services your child is receiving at Denali Family Services. You may contact DJJ at (907) 465-2212 or their web site is <http://www.hss.state.ak.us/djj>.

Office of Public Advocacy (OPA)

The Office of Public Advocacy (OPA) is a state agency that may also be able to provide you with assistance regarding the care of your children. Their mission is “To protect the rights of vulnerable Alaskans by providing excellent, cost-effective legal and guardian representation to abused and neglected children, incapacitated adults, and others”. Please keep in mind OPA only represents clients when the court appoints the agency. OPA is located at 900 W. 5th Ave. Ste. 525, Anchorage, AK 99501. Their phone number is (907) 269-3500 and fax number is (907) 269-3535.



Concern Form

Date of Filing the Concern: _____

Name of Person Filing the Concern: _____

Relationship to Organization: Person served by the organization (consumer) Employee
 Volunteer Family Community Member
 Other concerned party (please describe):

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (____) _____ Fax: (____) _____

E-mail: _____

Organization Information

Organization Name: _____

Address (if known): _____

City: _____ State: _____ Zip Code (if known): _____

Has your concern(s) been expressed to the organization/provider? Yes No

Has your concern(s) been expressed to state/provincial licensing or regulatory bodies? Yes No

Nature of Concern

Please describe the specific facts of the concern in detail below, attaching additional pages as needed and any other information that explains the reasons for your concern.

Send by Mail or Fax (Please remember to include your signed Letter of Intent/Consent):

Mail to: Director
Quality Services Management
Council on Accreditation
120 Wall Street, 11th Floor
New York, NY 10005
Fax to: (212) 797-1428
Attention: Quality Services Management

120 Wall Street, 11th Floor, New York, NY 10005 • toll free: 866-262-8088 tel: 212.797.3000 fax: 212.797.1428 www.coanet.org



CREDIBILITY • INTEGRITY • ACHIEVEMENT

Letter of Intent/Consent

_____, 2010

Quality Services Management
Council on Accreditation
120 Wall Street, 11th Floor
New York, NY 10005

To whom it may concern:

I, _____, have informed the Council on Accreditation, Inc. (COA) of a concern about an organization that I believe merits review. I am under the belief that the organization is accredited by COA or is in the process of seeking accreditation with COA. I acknowledge by returning this signed letter that I am asking that COA review the information I provide as part of its external complaint process.

I understand also that, as part of reviewing my concerns, COA might disclose my identity and information to the organization and/or to individuals involved in the external complaint review process. By signing my name to this letter, I consent to the disclosure of my identity and any information related to the details of my concerns to the organization and to other persons or entities, where such disclosure occurs in the context of COA's external complaint review process.

I understand that COA exercises discretion and uses its own standards and procedures in reviewing concerns about standards conformance. I understand and acknowledge by signing this letter that external complaint process decision-making questions are solely a decision over which COA has absolute discretion, and that these decisions are not subject to review in any other forum.

I understand and acknowledge further that I have no right to appear and participate in the external complaint process, other than in any way identified in COA procedure, and that I may be asked to supply additional information to COA. I represent that all information furnished at any time by or on behalf of me is and shall be truthful and complete to the best of my information and understanding.

I agree to hold harmless and indemnify COA, and its officers, directors, employees, peer reviewers, commissioners, and others acting on COA's behalf in the external complaint process, from and against all damages, judgments, claims, losses and expenses, including attorneys fees incurred in defense or prosecution of a claim arising from the following: (a) any breach by me of my representation and (b) any claims of libel, slander, defamation, invasion of privacy, false light, unfair competition, anti-trust, tortious interference with a contractual or prospective commercial relationship, or any other claim related to the matters of concern I have raised to COA or involving the steps or actions taken or not taken by COA in reviewing, investigating and making decisions related to my concerns under the external complaint process.

Sincerely,

_____ (Signature)

Glossary of Children’s Mental Health Terms

Throughout this guidebook, there may be some terms that you do not understand. For this reason, there are several definitions listed below to serve as a reference is needed.

Accessible Services:

Services that are affordable, located nearby, and are open during evenings and weekends. Employees are sensitive to and incorporate individual and cultural values. Employees are also sensitive to barriers that may keep a person from getting help. For example, a youth may be more willing to attend a support group meeting in a church or club near home, rather than travel to a mental health center. An accessible service can handle consumer demand without placing people on a long wait list.

Appropriate Services:

Designed to meet the specific needs of each individual child and family. For example, one family may need day treatment services while another family may need home-based services. Appropriate service for one child or family may not be appropriate for another family. Usually the most appropriate services are in the child’s community.

Assessment:

A professional review of a child’s and family’s needs that is done when they first seek services from a caregiver. The assessment of the child includes a review of physical and mental health, intelligence, school performance, family situation, and behavior in the community. The assessment identifies the strengths of the child and family. Together, the caregiver and family decide what kind of treatment and supports, if any, are needed.

Caregiver:

A person who has special training to help people with mental health problems. Examples of people with this special training are social workers, teachers, psychologists, psychiatrists, and mentors

Care Coordinator / Case Manager:

An individual who organizes and coordinates services and supports for children with mental health problems and their families. (Alternate terms: service coordinator, advocate, and facilitator.)

Case Management:

A service that helps people arrange appropriate and available services and supports. As needed, a case manager coordinates mental health, social work, education, health, vocational, transportation, advocacy, respite, and recreational services, The care coordinator makes sure that the child’s and family’s changing needs are met.

Child Protective Services or Division of Family and Youth Services (DFYS):

Designed to safeguard the child when there is suspicion of abuse, neglect, or abandonment, or when there is no family to take care of the child. Examples of help delivered in the home include financial assistance, vocational training, homemaker services, and day care. If in-home supports are insufficient, the child may be removed from the home on a temporary or permanent basis. The goal is to keep the child with his or her family whenever possible.

Consumer:

Someone who uses mental health services.

Clinical Team Leader:

A professional, working directly with a consumer, whose practice occurs primarily in an office, hospital, or clinic. At Denali Family Services, clinical team leaders do complete home visits and see consumers in their communities.

Confidentiality:

A principal of ethics according to which an individual or agency may not disclose information about a consumer without the consumer's (or a consumer's guardian in some cases) permission.

Diversity:

The fact or quality of being diverse, to be unique and different from other people.

Emergency and Crisis Services:

A group of services that is available 24 hours a day, 7 days a week, to help during a mental health emergency. When a child is thinking about suicide, these services could save his or her life. Examples: telephone crisis hotlines, crisis counseling, crisis residential treatment services, crisis outreach teams, and crisis respite care.

Family Centered Services:

Help designed to keep the family together and to cope with mental health problems that affect them. These services may include consumer information workshops, in home supports, family therapy, parent training, crisis services, and respite care.

Fraud:

Deceit perpetrated for profit or to gain some unfair or dishonest advantage.

Guardian:

An individual who has temporary or ongoing legal responsibility to care for another person or to manage that person's property or affairs, in whole or in part.

Home Based Services:

Help provided in a family's home for either a defined time or for as long as necessary to deal with a mental health problem. Examples include parent training, counseling, and working with family members to identify, find, or provide other help they may need. The goal is to prevent the child from being placed out of the home. (Alternate term: in home supports)

Individualized Services:

Designed to meet the unique needs of each child and family. Services are individualized when the caregivers pay attention to the children and family's needs and strengths, ages, and stages of development. See appropriate services and family centered services.

Inpatient Hospitalization:

Mental health treatment in a hospital setting 24 hours a day. The purpose of inpatient hospitalization is: (1) short-term treatment in cases where a child is in crisis and possibly a danger to self or others, and (2) diagnosis and treatment when the patient cannot be evaluated or treated appropriately in an outpatient setting.

Life Skills Specialist (LSS):

LSSs provide therapeutic, skill building intervention services to a child or group of children.

Mental Health:

Mental health refers to how a person thinks, feels and acts when faced with life's situations. It is how people look at themselves, their lives, and the other people in their lives; evaluate the challenges and the problems; and they explore choices. This includes handling stress, relating to other people, and making decisions.

Mental Health Problems:

Mental health problems are real. These problems affect one's thoughts, body, feelings, and behavior. They can be severe. They can seriously interfere with a person's life. They're not just a passing phase. They can cause a person to become disabled. Some of these disorders are known as depression, bipolar disorder (manic-depressive illness), attention deficit hyperactivity disorder, anxiety disorders, eating disorders, schizophrenia and conduct disorder.

Mental Disorders:

Another term used for mental health problems.

Mental Illnesses:

This term is usually used to refer to server mental health problems in adults.

Plan of Care or Individualized Service Plan:

A treatment plan designed for each child or family. The caregiver(s) develop(s) the plan with the family. The plan identifies the child's and family's strengths and needs. It establishes goals and details appropriate treatment and services to meet his or her special needs.

Residential Treatment Centers:

Facilities that provide treatment 24 hours a day and can usually serve more than 12 young people at a time. Children with serious emotional disturbances receive constant supervision and care. Treatment may include individual, group, and family therapy; behavior therapy; special education; recreation therapy; and medical services. Residential treatment is usually more long term than inpatient hospitalization. Centers are also known as therapeutic group homes.

Respite Care:

A service that provides a break for parents who have a child with a serious emotional disturbance. Some parents may need this help every week. It can be provided in the home or in another location. Trained parents or counselors take care of the child for a brief period of time. This gives families relief from the strain of taking care of a child with a serious emotional disturbance.

Service:

A type of support or clinical intervention designed to address the specific mental health needs of a child and his or her family. A service could be received once or repeated over a course of time as determined by the child, family and service provider.

Sexual Orientation:

Inclination toward or preference for sexual activity with members of one's own sex (homosexual orientation), the opposite sex (heterosexual orientation), or both (bi-sexual orientation).

Therapeutic Foster Care:

A home where a child with a serious emotional disturbance lives with trained foster parents with access to other support services. These foster parents receive special support from organizations that provide crisis intervention, psychiatric, psychological, and social work services.

Treatment Plan:

At different agencies, the treatment plan is sometimes referred to as the case plan, case record, service plan, or medical record. At Denali Family Services, we refer to it as a treatment plan. The treatment plan contains information about the client situation, treatment goals and objectives, intervention strategies and outcomes, and the services that are received.

Transitional Services:

Services that help children leave the system that provides help for children and move into adulthood and the adult service system. Help includes mental health care, independent living services, supported housing, vocational services, and a range of other support services.

Wraparound Services:

A “full service” approach to developing help that meets the mental health needs of individual children and their families. Children and families may need a range of community support services to fully benefit from traditional mental health services such as family therapy and special education. See appropriate services, coordinated services, family centered services, and system of care.

Important Messages about Children's and Adolescent's Mental Health

- Every child's mental health is important.
- Many children have mental health problems.
- These problems are real and painful and can be severe.
- Mental health problems can be recognized and treated.
- Caring families and communities working together can help!
- For more information; call (907) 274-8281 or check out our website www.denalifs.org

Credits

Denali Family Services referenced Alaska Children Services Student Rights, with permission, to assist in developing this section of the Consumer Rights Guidebook.

Annie E. Casey Foundation: <http://www.aecf.org>

The Social Work Dictionary (1999) was referenced to construct the “Definition of Terms” section of this guidebook.

For free information about children’s and adolescent’s mental health – including publications, references, and referrals to local and national resources and organizations, call (800) 789-2647; (TDD) (301) 443-9066 or go to www.mentalhealth.org.