



## Services Proposed Template

Content Relevant to: All Clinical & Alternative Clinical CAHCs and  
School Wellness Programs



### Service Delivery Plan

The template below outlines the basic, required services of the Child and Adolescent Health Center (CAHC) Programs. The CAHC Minimum Program Requirements (MPR), community and school needs assessments and Community Advisory Council (CAC) should have impact on the documentation below. Please respond to each question below and submit to your assigned consultant via email by **October 23, 2020**.

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1. List the services to be provided at your site.
2. Explain how proposed services respond to the identified needs of the target population. Since you have been funded and started working with your school partners and clients, what issues are emerging and how have/will you respond(ed) to those needs with the services listed above.
3. Explain how the CAHC or SWP will inform youth about “confidential services” (services that minors can legally consent to on their own accord by law) provided at your site. How will confidential services be assured, particularly in relation to services provided under minor consent? (Information on [Michigan Minor Privacy Laws](#))
4. Describe how services will be youth-specific, youth-friendly, and acceptable to youth.
5. List any formal collaborative and referral arrangements with other organizations that will be utilized for the proposed programming.
6. Describe how internal client referrals and follow-up (those between clinic staff at your program site) will occur.
7. Describe how external client referrals (including referrals back to another location within your sponsoring agency) and follow-up to services not offered at the site will occur.



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8. Describe your plan for coordinated care between all providers (clinical and mental health) in the site (e.g. staff meetings, huddles, case coordination, CQI, etc.).
  9. How will the site ensure meeting the projected minimum number of unduplicated clients for the next fiscal year, once you are fully operational?
  10. List your proposed hours of operation. Hours of operation must meet minimum program requirements for your model. (Refer to Minimum Program Requirements for [Clinical](#) or [SWP](#) sites.)
  11. Describe arrangements for 24/7 after-hours coverage and how youth will be notified of this.
  12. If not already provided to your assigned MDHHS consultant, provide documentation that the CAC has or will approve the proposed services (e.g. CAC meeting minutes or upcoming agenda for CAC meeting and plans for how that will occur).
  13. Describe how youth will be meaningfully involved in the site.
  14. What potential activities will your CAHC or SWP staff perform to inform eligible or potentially eligible individuals about Medicaid covered benefits and how to access them?