

M E M O R A N D U M

Date: 7/18/19
To: Full Service Partnership staff
From: Ana Vicuna, Division Chief Clinical Operations
Subject: FSP Consent Forms
CC: Pam Fisher, Deputy Director, Clinical Operations

Full Service Partnership (FSP) programs, such as ACT, SPIRIT, New Heights TAY, and Community Services and Support programs are designed to provide services needed for our clients to remain fully integrated into the community, doing “whatever it takes” to help individuals on their path to recovery and wellness. Full Service Partnership programs embrace client and family driven services within the context of a partnership between the client and a provider. Services are designed to be accessible, individualized and with supports tailored to a client’s readiness for change. Services are aimed to leverage community partnerships, deliver services in a culturally competent manner, and focus on wellness, outcomes and accountability.

To ensure that clients fully understand the program they are enrolling in and determine the additional domain specific collaborative services clients wish to address while in treatment, all staff will immediately begin providing and reviewing, the “Consent for FSP Services” form to every FSP client.

1. **For new FSP clients** - Review and complete the FSP consent form with each client. Ensure that clients understand their role as collaborative partners in their treatment and request clients to agree to participate as a full service partner.
2. **For existing FSP clients** - Review and complete the FSP consent form with each existing client. Ensure that clients understand their role as collaborative partners in their treatment and request clients to agree to continue to participate in this voluntary FSP program.
3. **If the client chooses not to sign but agrees to participate in services**, please indicate the date you spoke with the client on the bottom of the form. If the client is conserved, you may request the conservator’s signature (legal guardian).

**This consent form will be completed only once per client.

Once FSP Consent Form is completed, scan form into the client’s chart. For all existing clients these forms must be completed by **8/31/19**. The Department is working to ensure an electronic copy in Gateway, until then, you must complete the paper version.

Instruction for the FSP Consent form:

Enter/complete the name of the Full Service Partner (Client).

The FSP point person is the client’s primary case manager.

TBC (Team-based care) members include the client’s secondary case manager and other staff who meet with the client on a regular basis.