

MENTAL HEALTH

(Approved by Planning Council 6/24/13)

I. DEFINITION/OVERVIEW

Mental health services are the provision of psychological and psychiatric treatment and counseling services, for individuals with a diagnosed mental illness, conducted individually and provided by a mental health professional licensed or authorized within the State to render such services. This typically includes psychiatrists, psychologists, and licensed mental health professionals.

II. SERVICES

Mental health counseling services include intensive mental health therapy and counseling provided solely by state-qualified mental health professionals.

III. ELIGIBILITY

Eligibility is established per requirements of Eligibility in the Universal Standards of Care for All Ryan White Part A Services section. Ryan White Part A funds are funds of last resort. Contractors are responsible for doing routine screening for third party payer.

IV. SECTIONS

In this document you will find:

- Personnel
- Referral to Mental Health
- Intake into Mental Health
- Assessment/Service Planning
- Collaboration and Referral
- Discharge and Transition
- Quality Assurance

V. STANDARDS OF CARE AND MEASURES

#	Standard	Measure
1.0	PERSONNEL	
1.1	Staff Qualification	
1.11	<p>Minimum qualifications: All staff providing direct mental health services to clients must be qualified within the laws of the State of Louisiana to provide mental health services in one of the following professions:</p> <ul style="list-style-type: none"> a. Clinical social worker b. Marriage and family therapist c. License professional counselor d. Psychologist e. Psychiatrist f. Psychiatric nurse g. Psychotherapist 	<p>A. Personnel files/resumes/applications for employment reflect requisite experience/education B. Current License will also be maintained.</p>
1.12	<p>Minimum Supervisory qualifications: A mental health supervisor must be a licensed clinical mental health professional.</p>	<p>A. Personnel files/resumes/applications for employment reflect requisite experience/education B. Current License will also be maintained.</p>
1.2	Orientation	
	<p>Orientation: shall be provided to all staff within ten (10) working days of employment including at minimum:</p> <ul style="list-style-type: none"> a. Crisis intervention procedures b. Louisiana Mental Health Code c. Confidentiality d. Documentation in case records e. Consumer rights and responsibilities f. Consumer abuse and neglect reporting policies and procedures 	<p>Personnel file reflects completion of orientation and signed job description.</p>

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	<ul style="list-style-type: none"> g. Professional ethics h. Emergency and safety procedures i. Data management and record keeping j. Infection control and universal precautions k. Review of job description l. Programmatic requirements including applicable Standards of Care 	
1.3	Training	
1.31	<p>Additional training required during the first ninety (90) days of employment. In addition to the required initial orientation, during the first ninety (90) calendar days of employment all new employees must receive additional training related to the target group to be served and specific knowledge, skills and techniques necessary to provide services to the target group. This training must be provided by an individual with demonstrated knowledge of both the training topics and the target group and must include at minimum:</p> <ul style="list-style-type: none"> A. HIV basic science B. Insurance, disability and financial access issues C. Psychosocial issues of the HIV-infected client D. Resource identification E. Cultural competency 	Documentation to include in the employee file that reflects date of training, contents, name of trainer, topic, length of training and signature of employee.
1.32	Continuing education/in-service training: Staff participating in the direct provision of services to clients must satisfactorily complete a minimum of eight (8) hours of job-related educational programs/in-service annually, as determined by agency personnel policy	Documentation to include in the employee file that reflects date of training, contents, name of trainer, topic, length of training and signature of employee.
1.4	Supervision	
	<p>Minimum components of mental health care supervision:</p> <ul style="list-style-type: none"> A. Each mental health service provider must have and implement a written plan for 	<ul style="list-style-type: none"> 1. Agency has written plan of supervision. 2. Supervisors' files reflect notes of

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	regular supervision of all unlicensed staff. B. Notes of weekly supervisory conferences shall be maintained for such staff. C. Staff subject to formal supervision must be evaluated at least annually by their supervisor according to written provider policy on performance appraisals.	weekly supervisory conferences. 3. Personnel files contain annual performance evaluations.
2.0	REFERRAL TO MENTAL HEALTH	
2.1	Referral into Mental Health shall be accessed by referral from a Ryan White Part A case manager.	Documentation of eligibility verification provided by referring agency is maintained in client's file.
3.0	INTAKE INTO MENTAL HEALTH	
3.1	Presentation to the client of information regarding the HIV service delivery system, including: <ul style="list-style-type: none"> a. Confidentiality and release of information b. Statement of Consumer Rights and Responsibilities c. Agency grievance/complaint procedures d. Alternative service providers e. After-hours emergency/crisis intervention contact procedures 	Client's central file contains the appropriate intake documentation required of the agency.
3.2	An appointment will be scheduled within three (3) working days of a client's request for mental health services. In emergency circumstances, an appointment will be scheduled within twenty-four (24) hours. If service cannot be provided within these time frames, the Agency will offer to refer the client to another organization that can provide the requested services in a more timely manner.	Client chart contains documentation of each item listed above
3.3	Financial resources, insurance and/or Medicaid/Medicare status of all clients shall be documented and payment shall be sought from any and all third party payers before using Ryan White Part A funds.	Documentation in client's file.
4.0	ASSESSMENT/SERVICE PLANNING	

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4.1	Initial assessment protocols shall provide screening of individuals to determine needs and appropriate service plan.	Documentation individual client service plan.
4.2	The Agency shall arrange 24-hour crisis response by qualified crisis intervention staff for active clients who may experience emotional emergencies. The protocol will require documentation in client's file.	Agency written protocol for crisis intervention.
4.3	A service plan shall be completed within 30 days that is specific to individual client needs. The service plan shall be prepared and documented for each client. Individual, and family case records will include documentation of the following: a. Eligibility b. Psychosocial assessment c. Treatment plans, including goals and objectives d. Progress notes e. Referrals f. Discharge summary	Documentation in client's file.
4.4	Client and family participation in service planning shall be maximized.	Client's service plan.
4.5	Agency shall not exceed caseload set forth for licensing guideline for mental health by the Office of Mental Health.	The Agency maintains records of staff caseloads and staffing provided for each case and licensing.
5.0	COORDINATION AND REFERRAL	
5.1	Providers shall show ongoing collaboration/linkages with HIV/AIDS service organizations within the Greater New Orleans EMA.	Documentation reflects collaboration and referral system.
5.2	Providers shall have a documented referral system in place.	Referral list and policy.
5.3	Case conferences with members of the client's multi-disciplinary care team shall be held	Client records include

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	with client's consent and as appropriate.	documentation of multi-disciplinary case conferences.
5.4	In the event that a funded agency is unable to adequately communicate in the client's preferred language, it is then the agency's responsibility to refer the client to an agency with the appropriate language capacity. If no such agency exists, interpretative services will be provided at no cost to the client.	Agency maintains updated documentation of staff's language capabilities, including the names and job titles of the specific staff with those skills. A list will be provided to OHP and updated as needed.
6.0	DISCHARGE/TRANSITION	
6.1	The objective of discharge/transition planning is to ensure a smooth transition for a client no longer needing services at the provider agency.	Not Applicable
6.2	<p>A client may be discharged from mental health services through a systematic process that includes a discharge or case closure summary in the client's record. The discharge/case closure summary will include a reason for the discharge/closure and a transition plan to other services or other provider agencies, if applicable. If client does not agree with the reason for discharge, s/he should be informed again of the provider agency's grievance procedure. A client may be discharged from HIV mental health services for the following reasons:</p> <ol style="list-style-type: none"> a. death; b. at the request of the client (client no longer needs or desires services); c. if a client's actions put the agency, case manager, or other clients at risk; d. if client moves out of the service area; if possible an attempt should be made to connect client to services in the new service area; or; e. if after repeated and documented attempts, a mental health worker is unable to reach a client for a period of twelve (12) months. This criterion recognized that some clients require only minimal services, such as information and referral; thus, may be having 	<p>Documentation of case closure in client's record.</p> <p>Documentation of reason for discharge/case closure (e.g., case closure summary)</p>

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	only periodic contact with the mental health worker. Ideally a mental health worker should check in with their clients monthly as determined by client need, but at a minimum of every six (6) months. If after a maximum of twelve (12) months, the mental health worker has made repeated attempts to reach a client and is unsuccessful, the client should be discharged from mental health services at the agency.	

VI. QUALITY ASSURANCE

#	Standard	Measure
7.0	Professional standards of practice and ethics shall be followed by all mental health professionals in accordance with licensing for the individual discipline represented.	The Agency has a written quality assurance/performance improvement (QA/PI) plan. Staff personnel files reflect training in QA/PI as appropriate.
7.1	Agency shall maintain a quality assurance/improvement program designed to monitor the quality of services delivered to the client.	Written QA/QI plan and documentation of implementation.