

CCBHC

Standards

Section 4: State Certification Guide:

Scope of Services Part 2

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January 22, 2019

Disclaimer

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Attribution Statement

Funding for CASAT coordinated workshops was provided in whole or in part by the Nevada Department of Health and Human Services, Division of Public and Behavioral Health, Substance Abuse Prevention and Treatment Agency (SAPTA) through the Substance Abuse Prevention and Treatment (SAPT) Block Grant from the Department of Health and Human Services (DHHS), Substance Abuse and Mental Health Services Administration (SAMHSA). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the U.S. DHHS, SAMHSA, or the State of Nevada.

10,000 foot view



Section 4: Scope of Services

4.F through 4.K

- 4.F. Outpatient Mental Health and Substance Use Services
- 4.G. Outpatient Clinical Primary Care Screening and Monitoring
- 4.H. Targeted Case Management Services
- 4.I. Psychiatric Rehabilitation Services
- 4.J. Peer Supports, Peer Counseling, and Family/Caregiver Supports
- 4.K. Intensive, Community-Based Mental Health Care for Members of the Armed Services and Veterans

4. F. Outpatient Mental Health and Substance Use Services

- 4f.1.

- A. Are the evidence-based or best practices in outpatient mental and substance use disorder services offered by the clinic consistent with the CCBHC's needs assessment and state requirements?
- B. Does the clinic make available specialized services for purposes of outpatient mental and substance use disorder treatment, through referral or formal arrangement with other providers or, where necessary and appropriate, through the use of telehealth/telemedicine services?

4. F. Outpatient Mental Health and Substance Use Services

- 4.f.2.

A. Does the clinic comply with the state-established minimum set of evidence-based practices required of the clinic?

4. F. Outpatient Mental Health and Substance Use Services

4.f.3.

- A. Does the clinic provide evidenced-based services that are developmentally appropriate, youth-guided, and family/caregiver-driven with respect to children and adolescents?
- B. When treating older adults, does the clinic consider the individual consumer's desires and functioning and appropriate evidenced-based treatments?

4. F. Outpatient Mental Health and Substance Use Services

- 4.f.3 continued:
 - C. When treating individuals with developmental or other cognitive disabilities, does the clinic consider the level of functioning and appropriate evidenced-based treatments?
 - D. Are all treatments delivered by staff members with specific training in treating the segment of the population being served?

4. F. Outpatient Mental Health and Substance Use Services

- 4.f.4.

- A. Does the clinic use a family/caregiver-driven, youth-guided, and developmentally appropriate approach when treating children and adolescents?
- B. Does the approach that the clinic uses when addressing the needs of children comprehensively address family/caregiver, school, medical, mental health, substance misuse, psychosocial, and environmental issues?

4.G: Outpatient Clinic Primary Care Screening and Monitoring

- 4.g.1.
 - A. Does the clinic or a DCO provide outpatient clinic primary care screening and monitoring of key health indicators and health risk?
 - B. Whether provided by the clinic directly or by a DCO, does the clinic ensure the provision of outpatient clinic primary care screening and monitoring of key health indicators and health risk?

4.G: Outpatient Clinic Primary Care Screening and Monitoring

- 4.g.1. continued
- C. Does the clinic screening and monitoring of key health indicators and health risk include those for which the clinic will be accountable to the state, including but not limited to those identified in Appendix A? Specific screening and assessment related to key health indicators and health risk required by the state include:
- D. Regardless of whether they are provided directly by the clinic or through a DCO, are outpatient clinic primary care screening and monitoring of key health indicators and health risk received in a timely fashion?

4.G: Outpatient Clinic Primary Care Screening and Monitoring

- 4.g.1.

E. Does the clinic ensure that children and older adults receive age-appropriate screening and prevention interventions?

4.H: Targeted Case Management

4.h.1.

- A. Does the clinic or a DCO provide high-quality targeted case management services that will assist individuals in sustaining recovery and in gaining access to needed medical, social, legal, educational, and other services and supports?
- B. Regardless of whether they are provided by the clinic directly or by a DCO, does the clinic ensure high-quality targeted case management services that will assist individuals in sustaining recovery and in gaining access to needed medical, social, legal, educational, and other services and supports?

4.H: Targeted Case Management

4.h.1. continued:

C. Do the clinic targeted case management services include supports for persons deemed at high risk of suicide, particularly during times of transitions such as from an emergency department or psychiatric hospitalization?

D. Does the targeted case management provided by the clinic meet state standards for scope of services to address specific populations? Specific targeted case management services required by the state and population addressed.

4.I. Psychiatric Rehabilitation Services

- 4.i.1.
 - A. Does the clinic or a DCO provide high-quality evidence-based and other psychiatric rehabilitation services, based on the CCBHC needs assessment?
 - B. Do the psychiatric rehabilitation services provided by the clinic meet state requirements for psychiatric rehabilitation services?

4.J. Peer Supports, Peer Counseling, and Family/Caregiving Supports

- 4.j.1.
 - A. Does the clinic or a DCO provide peer specialist and recovery coaches, peer consulting, and family/caregiver supports, based on the needs of the population served?
 - B. Regardless of whether they are provided by the clinic directly or by a DCO, does the clinic ensure the provision of high-quality peer specialist and recovery coaches, peer consulting, and family/caregiver supports, based on the needs of the population served?

4.J. Peer Supports, Peer Counseling, and Family/Caregiving Supports

4.j.1. continued.

- C. Does the clinic provide state-specified services that incorporate peer specialist and recovery coaches, peer consulting, and family/caregiver supports? Do the peer specialist and recovery coaches, peer consulting, and family/caregiver support services provided by the clinic meet state requirements for peer and family services?

4.k. Intensive, Community-Based Mental Health Care, for Members of Armed Forces and Veterans

4.k.1

- A. Does the clinic or a DCO provide intensive, community-based behavioral health care for certain* members of the U.S. Armed Forces and veterans, particularly those Armed Forces members who are located 50 miles or more (or 1 hour drive time) from a Military Treatment Facility (MTF) and veterans living 40 miles or more (driving distance) from a VA medical facility, or as otherwise required by federal law?

4.k. Intensive, Community-Based Mental Health Care, for Members of Armed Forces and Veterans

4.k.1

- B. Whether provided by the clinic directly or by a DCO, does the clinic ensure that care to veterans is consistent with minimum clinical mental health guidelines promulgated by the Veterans Health Administration (VHA), including clinical guidelines contained in the Uniform Mental Health Services Handbook of such Administration?

4.k. Intensive, Community-Based Mental Health Care, for Members of Armed Forces and Veterans

4.k.2

- A. Does the clinic ask and document asking all individuals who inquire about services whether they have ever served in the U.S. military?
- B. Are those affirming current military service directed to care in accordance with criterion 4.k.2 and provided services at the clinic or elsewhere as those standards require?

4.k. Intensive, Community-Based Mental Health Care, for Members of Armed Forces and Veterans

4.k.2

- C. Does the clinic offer assistance to enroll in the VHA for the delivery of medical and behavioral health services to persons affirming former military service?
- D. Does the clinic provide services consistent with minimum clinical mental health guidelines promulgated by the VHA to veterans who decline or are ineligible for VHA services?

4.k. Intensive, Community-Based Mental Health Care, for Members of Armed Forces and Veterans

4.k.3

- A. Does the clinic provide coordination between the care of substance use disorders and other mental health conditions for veterans and active duty military personnel who experience both to the extent that those services are appropriately provided by the clinic in accordance with criteria 4.k.1 and 4.k.2?
- B. Does the clinic provide for the integration or coordination of care for behavioral health conditions and other components of health care for all veterans and active duty military personnel who experience both to the extent that those services are appropriately provided by the clinic in accordance with criteria 4.k.1 and 4.k.2?

4.k. Intensive, Community-Based Mental Health Care, for Members of Armed Forces and Veterans

4.k.4

- A. Does the clinic assign a Principal Behavioral Health Provider to every veteran seen, unless the VHA has already assigned a Principal Behavioral Health Provider?
- B. When veterans are seeing more than one behavioral health provider and when they are involved in more than one program, is the identity of the Principal Behavioral Health Provider made clear to the veteran and identified in the medical record?

4.k. Intensive, Community-Based Mental Health Care, for Members of Armed Forces and Veterans

4.k.4.

- C. Are the roles and responsibilities of the Principal Behavioral Health Provider clearly defined and consistent with the requirements of criterion 4.k.4?

4.k. Intensive, Community-Based Mental Health Care, for Members of Armed Forces and Veterans

4.k.5.

- A. Do clinic care and services for veterans adhere to the guiding principles of recovery, VHA recovery, and other VHA guidelines?

4.k. Intensive, Community-Based Mental Health Care, for Members of Armed Forces and Veterans

4.k.6.

- A. Are clinic staff members trained in cultural competency and specifically in military and veterans' culture?
- B. Do clinic staff members who work with veterans receive cultural competency training on issues of race, ethnicity, age, sexual orientation and gender identity?

4.k. Intensive, Community-Based Mental Health Care, for Members of Armed Forces and Veterans

4.k.7

- A. Does the clinic require a behavioral health treatment plan for all veterans receiving behavioral health services?
- B. Does the behavioral health treatment plan for veterans include the veteran's diagnosis or diagnoses and document consideration of each type of evidence-based intervention for each diagnosis?

4.k. Intensive, Community-Based Mental Health Care, for Members of Armed Forces and Veterans

4.k.7

- C. Does the behavioral health treatment plan for veterans include approaches to monitoring the outcomes (therapeutic benefits and adverse effects) of care, and milestones for reevaluation of interventions and of the plan itself?
- D. Does the behavioral health treatment plan for veterans consider interventions intended to reduce/manage symptoms, improve functioning, and prevent relapses or recurrences of episodes of illness?

4.k. Intensive, Community-Based Mental Health Care, for Members of Armed Forces and Veterans

4.k.7

- E. Is the behavioral health treatment plan for veterans recovery-oriented, attentive to the veteran's values and preferences, and evidence-based, regarding what constitutes effective and safe treatments?
- F. Is the behavioral health treatment plan for veterans developed with input from the veteran and when the veteran consents, appropriate family members?
- G. Is the veteran's verbal consent to the treatment plan documented?

Questions?

Thank you for participating!

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