



## ***Probation Service Definition***

ADMINISTRATIVE OFFICE OF PROBATION

<b>SERVICE NAME</b>	<b>Mental Health / Co-Occurring Outpatient Counseling (Individual/Group/Family)</b> <input checked="" type="checkbox"/> Adult <input type="checkbox"/> Juvenile
<b>Category</b>	Treatment
<b>Setting</b>	Professional office environment, clinic, mental health substance use center, private practice, teleservice or other setting appropriate to the provision of outpatient services.
<b>Facility License</b>	As required by the Nebraska Department of Health and Human Services (DHHS) – Division of Public Health.
<b>Service Description</b>	Based on a recommendation from a Mental Health or Co-Occurring Evaluation, Mental Health / Co-Occurring Outpatient Counseling is a scheduled therapeutic encounter between the licensed clinician and the client for the purposes of treating mental health or co-occurring mental health and substance use disorders. The focus of Mental Health Outpatient/Co-Occurring Counseling is to improve or alleviate symptoms that may significantly interfere with functioning in at least one life domain (e.g., familial, social, occupational, educational, etc.). The goals, frequency, and duration of outpatient treatment will vary according to individual needs and response to treatment. Specializations can include psychotherapy for clients with co-occurring disorders, eating disorders, trauma, individuals who sexually harm and other areas.
<b>Service Expectations</b>	<ul style="list-style-type: none"> <li>• A comprehensive biopsychosocial evaluation (Mental Health or Co-Occurring Evaluation) must be completed prior to the beginning of treatment.</li> <li>• If a recent Mental Health/Co-Occurring Evaluation is determined to be clinically relevant and includes a current diagnosis and level of care recommendation, it can serve as the admission assessment. If the prior assessment is not relevant or does not contain the necessary information, then the clinical record shall reflect that such evaluations have been reviewed and updated as appropriate prior to the initiation of services.</li> <li>• The treatment plan, developed with the client at the onset of services, must be individualized and must include the specific problems, behaviors or skills to be addressed; clear and realistic goals and objectives; services, strategies and methods of intervention to be implemented; criteria for achieving goals; target dates; and methods for evaluating the client’s progress. Review and update of the treatment plan, under clinical guidance and with the client, should occur at least monthly or more often as clinically indicated, and should be signed by the client and the treatment team.</li> <li>• The treating clinician must consult with and/or refer to other providers for general medical, psychiatric, psychological and/or psychopharmacological needs as indicated.</li> </ul>

	<ul style="list-style-type: none"> <li>Services must be trauma informed, culturally sensitive, age and developmentally appropriate and incorporate evidence-based practices when appropriate.</li> </ul>
<b>Service Frequency</b>	The frequency and duration of Mental Health/Co-Occurring Outpatient Counseling will vary according to individual needs and response to treatment. Outpatient services are typically offered one time per week; however, the service can be offered more or less frequently depending on client need.
<b>Length of Stay</b>	Length of treatment is individualized and based on clinical need for continued services, as well as the client's ability to benefit from individual treatment/recovery goals.
<b>Staffing</b>	<ul style="list-style-type: none"> <li>Psychiatrist</li> <li>Physician Assistant (PA)</li> <li>Advanced Practice Registered Nurse (APRN-NP)</li> <li>Licensed Psychologist</li> <li>Provisionally Licensed Psychologist</li> <li>Licensed Independent Mental Health Practitioner (LIMHP)</li> <li>Licensed Mental Health Practitioner (LMHP)</li> <li>Provisionally Licensed Mental Health Practitioner (PLMHP)</li> <li>All providers must hold a current, valid Nebraska license through the Nebraska Department of Health and Human Services (DHHS) – Division of Public Health and must act within their scope of practice.</li> <li>All providers must be trained in trauma-informed care, recovery principles and crisis management</li> </ul>
<b>Staff to Client Ratio</b>	<p>Individual Counseling = 1 therapist to 1 client</p> <p>Group Counseling = 1 therapist to a group of at least 3 and no more than 12 individual participants</p> <p>Family Counseling = 1 therapist to 1 family</p>
<b>Hours of Operation</b>	Providers are expected to be flexible in scheduling and be available evenings and/or weekends to accommodate the service needs.
<b>Service Desired Outcomes</b>	<ul style="list-style-type: none"> <li>Client has substantially met treatment plan goals and objectives.</li> <li>Client has identified support systems to help maintain stability in the community.</li> <li>Client has improved functioning and behavior changes in life domains.</li> <li>Medication management referral to prescribing clinician is ongoing, as deemed appropriate.</li> <li>Risk reduction plan has been established; client knows how to implement this plan.</li> <li>Clinician has coordinated with other treating professionals, as needed.</li> </ul>
<b>Unit and Rate</b>	<ul style="list-style-type: none"> <li>Per session; see rate sheet</li> </ul>