

**JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY
COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM**

Section: 9 CSR 10-7.060

Subject: BEHAVIOR MANAGEMENT

Policy

The JFCAC Outpatient Mental Health program does not permit behavior management such as physical, mechanical or chemical restraint, seclusion or time-out. Behavior management plans are not developed. Also prohibited is aversive conditioning, withholding of food, water or bathroom privileges, painful stimuli and all forms of corporal punishment.

Any employee who violates this policy is subject to disciplinary action, up to and including discharge.

Procedure

In any instance when a consumer or visitor exhibits behavior that may be dangerous to self or others, law enforcement is to be contacted for assistance.

Any employee who witnesses a violation of this policy must immediately report the incident to his/her direct supervisor.

10/2017

JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM

Section: 9 CSR 10-7.040

Subject: Clinical Utilization Review

Policy:

It is the policy of JFCAC to ensure that services provided are in the best interest of the individual and specifically designed to meet the individual's treatment needs. To facilitate this process, quarterly reviews are completed to assess the following:

- Accurateness, completeness, and timeliness of clinical documentation.
- Whether the services are necessary, appropriate and likely to benefit the individual.
- The medical necessity of services and the need for alternative treatment options, especially as related to exceptional or problem areas.

CLINICAL UTILIZATION REVIEW COMMITTEE STRUCTURE

These reviews employ a committee approach to assess the appropriateness of the services being provided including the intensity/level of services, and whether continued services for the individual are necessary as indicated by the mental health assessment, the treatment plan and the case notes. Ten per cent of the caseload is reviewed quarterly. The cases are identified through a random selection completed by JFCAC Quality Improvement staff. The supervisor of Quality Improvement oversees the process, serving as the Committee Chairperson, and identifies JFCAC employees who have at a minimum a Master's degree in Social work or related field and least three years of related experience to participate in the review. No review may be conducted by a person providing direct services to the individual selected.

Procedures

The Utilization Review Committee will meet quarterly to review the agency's cases. At least 10% of the individuals served annually will be reviewed by the end of the calendar year. These reviews will focus on:

- Compliance with documentation requirements.
- Clinical eligibility for services.
- Adequacy of assessment and program planning.
- Appropriateness of goals and objectives targeted.
- The likelihood that the treatment program will produce the desired outcome.

- Other areas of the file as deemed necessary.

Each review will include and summarize the individual's progress over the previous 90 days. The review will be focused in the area of diagnosis, treatment plan, actual treatment, documentation, or other areas as needed. The review will be documented on a standardized form.

DOCUMENTATION/NOTIFICATION OF FINDINGS

Committee minutes will be kept for each quarterly review, which will include:

- Name of the committee
- Date of the meeting
- Names of the reviewers and their disciplines
- Number of cases reviewed
- Case identifiers
- Period under review
- Summary of findings

The committee chairperson will be responsible for the committee meeting notes. The individual therapist and his/her supervisor will receive a copy of the review notes and the corrective action plan. The therapist will have up to 30 days to complete corrections in response to the Corrective Action Plan, and to return the form to the committee chairperson. The committee chairperson will be responsible for ensuring that this procedure is followed.

When the Utilization Review Committee agrees, by consensus, that modification in treatment direction, frequency, or service delivery should be required, such recommendations will be recorded on the review form and will be signed only by the committee chairperson. Modifications in treatment will be forwarded to the billing department as well.

When the review and the Corrective Action Plan have been returned and the deficiencies are corrected, the date of the return will be noted and the original will be filed in the permanent committee records, which is kept by the Quality Improvement department. A copy will be forwarded to the individual's file and another will be kept by the Chairperson.

Utilization Review records will contain packets that include the original review, the minutes of meetings, and the Corrective Plan. Packets will be filed by date completed. When not in use, the Utilization Review records will be kept in a locked area and will be treated as confidential documents, as required by the Department of Mental Health rules and regulation, HIPPA and Confidentiality Act.

APPEALS

An individual served, employee, or guardian in disagreement with a decision made by the Utilization Review Committee has the right to appeal the decision using the appropriate agency grievance procedure, to the highest level of appeal allowable.

DMH Street Address:

South Carolina Department of Mental Health
Administration Building
2414 Bull Street
Columbia, South Carolina 29201

DMH Mailing Address:

South Carolina Department of Mental Health
Administration Building
PO Box 485
Columbia, SC 29202

DMH Phone:

Public Information: (803) 898 - 8581
TTY: (864) 297-5130 for Deaf Services
TTY and Voice : (866) 246-0129 for Deaf Services Upstate
TTY and Voice : (866) 246-0130 for Deaf Services Midlands

A Clinical Utilization Review report will be included in the broader Quality Improvement report that is made to the Board of Directors at each meeting. All identifying information about clients will be deleted.

10/2017

**JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY
COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM**

Section: 9 CSR 10-5.220

Subject: CONFIDENTIALITY OF CONSUMER INFORMATION

Policy

As a covered entity, JFCAC complies with regulations related to the Health Insurance Portability and Accountability Act of 1996 and does not release confidential information without proper consent unless the release is within the exceptions allowed by federal or state statute. This includes information, including demographic data, that relates to:

- the individual's past, present or future physical or mental health or condition;
- the provision of health care to the individual, or the past, present, or future;
- payment for the provision of health care to the individual.

Prior to disclosure of private information, clients are informed of the circumstances in which there may be ethical or legal obligations to release the information. These include:

- The client provides written informed consent;
- The disclosure is allowed by court order, or required under state statute;
- The disclosure is made to medical personnel in a medical emergency;
- The disclosure is made to qualified personnel for research, audit or program evaluation. To the extent possible, information released is to be non-identifying.

When a request for confidential information about a person served through a JFCAC program is received or the release of such information is important to the delivery of proper services, he/she is asked to complete a written Release of Confidential Information form. In the case of a minor receiving services or an adult client incapable of providing authorization to release the information, the informed, written consent is obtained from the parent or legal guardian.

All staff must follow strict rules and all laws and regulations about releasing consumer information. Every consumer has the right to confidentiality of information and records in accordance with federal and state law and regulation. A consumer must give their written approval before information is released. Training and supervision are required for staff, all of whom must fulfill the obligation of maintaining confidentiality of the client information to which they have access. Clients and families must be provided with information on confidentiality/security of information, their access to records, their rights to consent to the release of information, and any limitations on the confidentiality of information.

Legal counsel is available as needed concerning issues of confidentiality, requests for the release of information or information sought through court subpoena

Procedures

Consent forms for release of information must be fully completed and contain the following information:

1. Name of person granting consent.
2. Name and address of the person/organization holding the information.
3. Name and date of birth of person whose records will be released.
4. Name and address of the person/organization to which the information will be released.
5. The *specific* information to be released.
6. The reason for requesting the information.
7. The consequences that will occur/be imposed if the person refuses to consent.
8. The date the consent form is signed. *Note:* The consent will expire one year from the date signed.
9. Signature of person giving consent. *Note:* The form should not be signed until all information has been completely filled out on the form.
10. The address of the consenting party.
11. The signature and relationship of the parent/guardian, as necessary.
12. Signature of witness (someone other than the assigned therapist) when mental health information is being requested.

**JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY
COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM**

Section: 9 CSR 10-5.190

Subject: CRIMINAL RECORD REVIEW

Policy

JFCAC does not conduct criminal record reviews on any persons served by the Outpatient Mental Health Program. If JFCAC becomes aware that a person receiving services has a criminal record, services will still be provided unless it becomes clear that the person presents a danger to JFCAC staff or other persons being served by JFCAC.

10/2017

**JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY
COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM**

Section: 9 CSR 10.080

Subject: DIETARY SERVICES

Policy

The JFCAC Outpatient Mental Health program does not offer any dietary service for consumers served in the program.

10/2017

JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM

Section: 9 CSR 10-7.120

Subject: EMERGENCY PREPAREDNESS PROCEDURES

Weather Related Emergencies:

- Listen to the radio and follow instructions.
- The senior staff person on site will direct others to locate in the pre-determined “safe room” in the event of a tornado warning.
- After the weather event has passed, verify whereabouts of all employees and visitors; determine if medical treatment is required.
- Review all facilities for structural damage; make decisions about facility safety. Determine if alternative facilities are required.
- Designate staff persons to make calls to other JFCAC sites; to receive calls from off duty staff; to notify critical stakeholders, for example governing board.
- Initiate calls to vendors for repairs or supplies as needed

Fire Emergencies:

- Senior staff on site shall call 911 and evacuate the building; a fire extinguisher can be used on a small fire but the number one consideration is to assure the safety of everyone in the building.
- Do not assume that the fire alarm is calling the Fire Department or the 911 system. All fires must be reported to the 911 authorities even if the fire has been extinguished.
- Each office or building shall identify a “reunion site” near the building so that each person’s safety can be determined.
- Staff involved should contact a member of the Executive Team immediately.
- If any injury has occurred, Emergency Medical assistance should also be contacted.

Earthquakes:

- Staff and clients should be familiar with the concept of “drop, cover and hold on.” Anyone who is present in an earth quake should immediately drop to the floor, seek protection under a table, desk or doorway and hold on to the most permanent object within reach.
- When the quake ends, all staff must immediately evacuate the building and gather at a location that is not adjacent to any building.

Serious Injuries, Accidents or Illnesses:

- The senior staff person on site will be immediately notified and will determine what actions will be taken.
- In the instance of suspected ingestion of toxic substances, the Poison Control Center should be contacted.
- Emergency medical assistance should be immediately contacted if medical evaluation or treatment is needed.
- Staff will not attempt to move, treat or transport the individual.

Threats of Harm or Violence:

- Any threat of harm or violence shall be taken seriously and be immediately reported to 911 and the senior staff person that is available.
- Staff that work outside the office or those who transport clients are encouraged to have cell phones available, and will be reimbursed for all business-related calls.
- Bomb threats, fire alarms and other warnings are to be taken seriously and the building evacuated.
- Assaultive behavior displayed by clients shall be responded to in such a way as to reduce or minimize the harm caused to self or others. The assistance of law enforcement will be immediately sought.
- When threats to JFCAC personnel or facilities are communicated to external authorities, the direction of those authorities shall be complied with.

Follow Up

- Injuries that may result in Worker's Compensation claims must be immediately reported to Human Resources and recorded on the appropriate reporting forms.

**JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY
COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM**

Section: 9 CSR 10-7.020

Subject: RESPONDING TO GRIEVANCES OR ALLEGED VIOLATION OF RIGHTS

Policy:

JFCAC shall ensure a prompt, responsive, impartial review of any grievance filed by a consumer or allegation by a consumer of a violation of his/her rights. All consumers will be notified of their right to file a grievance at their intake interview. Notice of their rights will be given to them in writing and reviewed by the intake worker to assure full understanding.

JFCAC employees shall not discourage a consumer from filing a grievance, nor retaliate against any consumer for doing so.

All grievances will be reviewed by the employee's supervisor who will attempt to resolve the grievance through discussion and/or meeting with the consumer and the employee. If there is no resolution through this process, the issue will be submitted to the program manager who will make the final decision.

The final decision will be made within 30 business days unless there are extraordinary circumstances.

Decisions that are made by the program manager will be in writing, and sent to the consumer by either email or postal mail.

Procedures:

The notification of the right to file a grievance or to allege a violation of consumer rights will be included in the intake packet that is reviewed with the consumer during the initial intake interview. The following information will be included:

- Consumers have the right to be treated with consideration and respect.
- Consumers have the right to self-determination
- Consumers have the right to access their record.
- JFCAC abides by local, state and federal laws regarding discrimination practices.
- No JFCAC staff person will retaliate against a consumer for filing a grievance.
- If desired, a staff person will assist a consumer to file a grievance.

Whenever a consumer notifies a JFCAC employee of their desire to file a grievance or alleges that their rights have been violated, the employee will inquire whether they wish to file a formal grievance or prefer to attempt to resolve the issue by discussion with the employee or with the employees' supervisor.

If they express the desire to file a formal grievance, the employee will offer to provide them with paper and pen and/or otherwise assist them to submit a written grievance.

When a formal grievance is received, the employee will provide his/her supervisor with a copy of the grievance. The employee and supervisor will have 10 business days to discuss the grievance, meet with the consumer or develop a resolution of the grievance.

If no resolution is achieved, the program manager is informed of the issue, provided with a copy of the grievance and can discuss the matter with the employee and supervisor. The program manager will make a decision about the validity of the grievance and how it will be resolved and notify the consumer in writing.

If this notification is not sent within 30 days of the date the grievance was filed, the program manager will notify the consumer of the delay and provide an estimate of when the final decision will be received.

10/2017

**JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY
COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM**

Section: 9 CSR 10-7.070

Subject: MEDICATION ADMINISTRATION

Policy

The JFCAC program does not provide any type of medication service or administration. This includes prescribing, obtaining, storing, administering and disposing medication. If a consumer may be in need of medication, he/she will be referred to a certified community agency for this service.

10/2017

**JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY
COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM**

Section: 9 CSR 10-7.020(8)

Subject: PROMOTING CONSUMER SAFETY AND WELL-BEING

Policy

JFCAC is committed to promoting the safety and well-being of all consumers it serves. This goal is achieved through implementation of the following policies:

1. **Medication Compliance:** JFCAC does not prescribe nor administer medications to the consumers served. However, if the JFCAC therapist is aware that the consumer has been prescribed medication, he/she may inquire about whether the medication is being utilized as prescribed and whether any negative side effects have been noted. If the consumer indicates there is either a problem with taking the medication as prescribed or is experiencing any side effects, the therapist will encourage the person served or parent/guardian to contact the prescribing doctor; as an alternative, and with proper consent, the therapist may discuss the matter with the prescribing physician and obtain his/her recommendation about how to proceed in the best interest of the consumer.
2. **Missed Appointments:** At the time of initial contact, the individual will be informed that they are required to notify the agency 24 hours in advance if they will be unable to keep an appointment and that failure to do so may cause them to be discharged from the program. In the instance of a missed appointment, the therapist will attempt to contact the individual within 48 hours. If there are special circumstances that cause significant concern about the safety and well-being of the consumer, the attempted contact must be made as soon as practicable. All attempts to contact the individual will be noted in the case file.

At the first interview following the missed appointment, the therapist will discuss what occurred with the consumer. Based on the circumstances that prevented the consumer from either attending the appointment or canceling in advance, the therapist may take no further action or inform the individual that if there is another missed appointment, he/she may be terminated from treatment.

3. **Alcohol and Drugs:** A consumer who arrives at the agency and appears to be under the influence of drugs or alcohol will be asked to leave the premises. If he/she has driven to the facility, the therapist will ask that he arrange for other transportation. At the next scheduled appointment, the therapist will

- discuss the event and explore the consumer's use of alcohol and drugs. If appropriate, the individual will be referred for a substance abuse assessment. In any case, the individual will be informed that he/she will not be able to continue receiving services if there are other instances of arriving at the facility under the influence of drugs or alcohol.
4. **Program Rules:** JFCAC will encourage appropriate behavior and therapeutic progress through providing positive instruction and guidance. Program Rules will be simply written and prominently displayed in order that participants will be able to understand and remember the rules. Violation of program rules will be corrected but not result in expulsion from the program unless they endanger self or others or otherwise interfere with the services being provided to others.
 5. **Threats of Suicide, Violence or Harm:** Any JFCAC employee who becomes aware of a threat of suicide, violence or harm by a consumer will immediately take appropriate action to intervene. If the employee is the individual's therapist, he/she will assess the level of risk and make a clinical determination of what type of action should be taken. Options include reassurance and support, the development of a safety plan, making a referral for a psychiatric evaluation, notifying law enforcement or other appropriate actions depending on the severity of the level of risk. If the employee who is aware of the threat is not the individual's therapist, he/she must immediately notify the individuals' therapist and/or the direct supervisor to determine what action should be taken.
 6. **Use of Restraint:** JFCAC does not use restraint with any of its consumers. In any instance when a visitor to the facility demonstrates violent behavior toward self or other, law enforcement will be called to respond to the situation. If a situation occurs when the employee is working in the community, he/she will immediately leave the situation, and notify law enforcement of the event, if appropriate.
 7. **Reporting Client Death:** Upon learning of a client's death, JFCAC will complete form 9719 and fax to the appropriate division of the Department of Mental Health within 24 hours.

Procedures

The policies listed above are to be implemented with a focus on the best interest of the consumers served. Services must be provided to individuals with respect for their rights to dignity, a prompt evaluation, to be served in the least restrictive environment, to be free of abuse, neglect or other maltreatment and to medical care and treatment that is in accord with accepted standards of medical practice.

**JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY
COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM**

Section: 9 CSR 10-5.200

Subject: RESPONDING TO ALLEGATIONS OF ABUSE AND NEGLECT

Policy:

Jefferson Franklin Community Action Agency does not tolerate any incident of physical abuse, sexual abuse, neglect or misuse of funds/property of any consumer by any employee or contractor of JFCAC.

Any employee or contractor who becomes aware or is suspicious that such an event has or may have occurred is required to immediately notify his/her supervisor and assure that the agency Chief Executive Officer or designee is also notified. If the alleged victim is a child under the age of 18, the employee must also report the allegation to the Missouri Department of Social Services in accordance with the Missouri mandatory reporting statute. The CEO shall file the report with the Regional Administrator of the Department of Mental Health who will determine if the allegation will be investigated by the Department. If the report may involve criminal violations, the JFCAC CEO will also file a report with local law enforcement.

The CEO will assure the safety of all consumers and determine if the alleged perpetrator will be put on paid or unpaid leave or moved to a position that does not involved consumer contact.

All JFCAC employees will cooperate with the Department's investigation and the law enforcement investigation, if any.

If the Department of Mental Health declines to investigate the allegation, an internal investigation may also be conducted under the direction of the Manager of Human Resources.

The confidentiality of both the employee and the consumer will be protected.

Procedures:

Incidents that must be reported to the Department include:

- Misuse of funds/property: The misappropriation or conversion for any purpose of a consumer's funds or property by an employee or employees with or without the consent of the consumer or the purchase of property or services from a consumer in which the purchase price substantially varies from the market value;
- Neglect: Failure of an employee to provide reasonable or necessary services to maintain the physical and mental health of any consumer when that failure presents either imminent danger to the health, safety, or welfare of a consumer or a substantial probability that death or serious physical injury would result. This

would include, but is not limited to, failure to provide adequate supervision during an event in which one consumer causes serious injury to another consumer;

- Physical abuse: 1. An employee purposefully beating, striking, wounding, or injuring any consumer; 2. In any manner whatsoever, an employee mistreating or maltreating a consumer in a brutal or inhumane manner; or 3. An employee handling a consumer with any more force than is reasonable for a consumer's proper control, treatment, or management;
- Sexual abuse: Any touching, directly or through clothing, of a consumer by an employee for sexual purpose or in a sexual manner. This includes, but is not limited to: 1. Kissing; 2. Touching of the genitals, buttocks, or breasts; 3. Causing a consumer to touch the employee for sexual purposes; 4. Promoting or observing for sexual purpose any activity or performance involving consumers including any play, motion picture, photography, dance, or other visual or written representation; 5. Failing to intervene or attempting to stop inappropriate sexual activity or performance between consumers; and/or 6. Encouraging inappropriate sexual activity or performance between consumers;
- Verbal abuse: An employee making a threat of physical violence to a consumer, when such threats are made directly to a consumer or about a consumer in the presence of a consumer.

The CEO will also forward the allegation to the Children's Division if the alleged victim is under the age of eighteen (18); or the Division of Senior Services and Regulation if the alleged victim is a resident or client of a facility licensed by the Division of Senior Services and Regulation or receiving services from an entity under contract with the Division of Senior Services and Regulation.

At the conclusion of the investigation, CEO and Manager of Human Resources will take appropriate action based on the findings and consistent with JFCAC Human Resource disciplinary policy.

10/2017

**JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY
COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM**

Section: 9 CSR 10-7.040

Subject: RESEARCH

Policy

JFCAC permits research which involves past or present persons served when the research will benefit the field, is consistent with JFCAC's mission, clearly does not violate ethical practice and will not unduly consume staff time or other resources. JFCAC will not approve any research proposal that may reveal the identity of participants or compromise their confidentiality. The identity and privacy of participants is safeguarded in all phases of research, including the completion of an Informed Consent by the subject of the research or the parent/guardian. Research proposals will be accepted from current staff, student interns or external professionals.

Procedures

The Executive Team, led by the Chief Executive Officer, receives, reviews and recommends approval or denial of research proposals. In all instances when a research proposal is approved, a member of the Executive Team or designee is responsible to monitor the ongoing research activities and to report any issues or concerns to the Chief Executive Officer, or designee.

All potential participants are informed in advance of the procedures and their option to participate or not participate without any impact on their reception of service. JFCAC forbids the use of financial incentives for research participants and all participants must sign an informed consent. In the case of minors, parents or legal guardian will provide informed consent.

10/2017

**JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY
COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM**

Section: 9 CSR 10-7.030

Subject: SERVICE DELIVERY AND DOCUMENTATION

Policy Regarding Missed Appointments:

JFCAC staff will impress upon all applicants for service that they must keep scheduled appointments and if they will be unable to keep a scheduled appointment, they must cancel the appointment 24 hours in advance. In any instance when a client misses an appointment without notification, the therapist must attempt to contact him/her within 48 hours. If the client has special needs or there are other circumstances that warrant earlier intervention, the therapist must contact the client as soon as possible. All attempts to contact the client must be documented in writing in the case record.

Following a missed appointment, the therapist will discuss the reasons for the missed appointment with the client, informing him/her that a pattern of missed appointments may result in services being discontinued.

Procedures:

The decision to terminate services due to missed appointments is to be made carefully with consideration for the client's needs and circumstances, consideration for clients who may be on a waiting list and the loss of the therapist time.

In instances when a pattern of missed appointments is developing, the therapist will consult with his/her supervisor concerning strategies to prevent missed appointments. If those strategies do not interrupt the pattern, the therapist will inform the client that if any further missed appointments occur, services will be terminated.

Policy regarding Crisis Intervention:

JFCAC has established a Memorandum of Understanding with a certified provider of Access Crisis Intervention Services for 24 hours, 7 days per week services. The organization has qualified staff who are able to make face-to-face contact when clinically indicated. JFCAC Consumers will be provided with a special telephone number that will be forwarded to the ACI provider whenever JFCAC is closed.

JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM

Section: 9 CSR 10-7.110

Subject: ROLE AND OVERSIGHT OF STUDENTS/INTERNS

Policy

JFCAC is committed to assisting students to achieve educational goals through providing opportunities for students as interns or to complete a practicum. In all such instances, a JFCAC employee must be willing to provide close supervision; the student must undergo a background screening as required for all JFCAC employees and comply with other JFCAC employee policies and practices. The JFCAC supervisor will familiarize themselves with the expectations of the educational institution including the types of assignments, the frequency of supervision and the completion of evaluations.

Procedures

Any employee who has been asked to serve as a student's supervisor must obtain approval from the Department head and then refer the individual to Human Resources to complete the required background screening and complete other informational forms. The JFCAC supervisor will assign work commensurate with the student's education, experience and educational requirements. The supervisor shall meet with the student on a regular basis and provide feedback to the student regarding the quality of their work and comply with other requirements of the educational institution.

Outpatient Mental Health Services Department

Special provisions apply to all students who seek to work in the Outpatient Mental Health Services Department. Practicum/intern students must be enrolled and participating in an accredited college/university in a field of study such as social work, psychology, sociology, nursing or related field.

A written plan must be developed between the student and JFCAC that includes:

1. Name of the individual, educational institution, and degree program;
2. Brief description of the status of the individual's education including the expected degree completion date, the semester/hours remaining, and time period of the practicum or internship;
3. A description of the specific job expectations of the individual in the program and client population to be served;
4. A specific plan for supervision of the student, including name and title of the direct supervisor.
5. The frequency and duration of the supervision activities, the scope of case/record reviews, the location of the supervisor with respect to the service delivery locations, and emergency backup supervision arrangements;

6. A list of the specific services the agency has approved for the student to deliver.

- Students may not deliver Medicaid-eligible services unless they meet the provider eligibility requirements through prior experience and education.
- The student must have a letter from their academic advisor attesting to their qualifications and eligibility for the proposed practicum.
- The student must be under the close supervision of the Director of the Outpatient Mental Health department.
 - To provide counseling services, the student must be in a master's program and the practicum must be approved by the college/university.
 - To provide case management and community support work or other support services, the student must be, at a minimum, in the final year of a bachelor's program.
 - A student may be assigned a limited caseload based on background and prior experience.

Students must be background screened, oriented and trained as consistent with the agency's policies for new employees. The services being provided must be documented as required by JFCAC's standards and policies. The documentation must be reviewed and approved by an individual who meets the qualifications of a mental health professional, supervisor of counselors or a community support/case manager as appropriate.

Services may be billed using appropriate existing service codes and reimbursed at the established contract rate for the anticipated degree, unless a student rate has been established for the service.

12/2017

**JEFFERSON FRANKLIN COMMUNITY ACTION AGENCY
COMMUNITY MENTAL HEALTH OUTPATIENT PROGRAM**

Section: 9 CSR 10-7.110

Subject: THE ROLE AND MANAGEMENT OF VOLUNTEERS

Policy

JFCAC welcomes volunteers in all its programs. They perform a variety of tasks on an intermittent or regular schedule including assistance with special events, clerical work, classroom supervision and other program needs. All volunteers are provided an overview of the agency, are informed of important agency policies relating to client confidentiality, undergo a background screening and receive supervision appropriate to the assignments they have undertaken.

Procedures

Any person who inquiries about volunteering opportunities will be referred to the Department head if the person indicates a particular area of interest; if no area is indicated, the call will be referred to Human Resources staff. They will explore volunteer possibilities and then arrange for the individual to meet with Department heads who are interested in working with a volunteer. When a decision is made, the Department head will refer the person to Human Resources to obtain a background screening in accordance with 9 CSR 10-5.190 and complete other required forms.

The Department head of the area where the volunteer will be working will designate a staff member who will serve as the volunteer's supervisor. This person will orient the volunteer to the department, discuss confidentiality requirements, develop a work schedule and assign the volunteer the tasks he or she will be responsible for. The supervisor will maintain documentation of the volunteer's attendance and note any problems or concerns.

The supervisor will discuss any performance or attendance problems directly with the individual and provide regular feedback about the quality of work that is being provided.

12/2017

