

## **ATLANTA EMA QUALITY MANAGEMENT STANDARDS AND MEASURES MENTAL HEALTH COUNSELING AND TREATMENT SERVICES**

### **Purpose**

The purpose of the Ryan White Part A quality management standards and measures is to ensure that a uniformity of service exists in the Atlanta Eligible Metropolitan Area (EMA) such that the consumers of a service receive the same quality of service regardless of where the service is rendered. If an agency is unable to meet a particular standard, the agency must document why the standard was unable to be met and explain the steps it is taking to meet that standard.

### **Definition**

Mental health services are psychological and psychiatric treatment and counseling services, to individuals with a diagnosed mental illness, conducted in a group or individual setting, and provided by a mental health professional licensed or authorized within the State to render such services. Please refer to standard II.C for the qualifications of program staff providing mental health services.

### **Standards Development Process**

The standards were developed through extensive background research on quality management standards, a review of existing standards from other Ryan White Part A EMAs, meetings of the Mental Health and Substance Abuse Task Force and meetings with the Ryan White Part A Grantee.

### **Application of Standards**

These standards apply to any agency receiving Part A funds to provide Primary Care, Substance Abuse, Mental Health, or Case Management services. All of these funded agencies must administer the screening questions; however, assessment, case management, and treatment services are required to be provided only by agencies funded to provide these services. All other agencies are required to provide appropriate referrals and linkages to services per the standards.

### **Mental Health, Substance Abuse and Case Management Standardized Screening Questions**

The standards include standardized case management, mental health and substance abuse screening questions that all applicable agencies must use. The purpose of the questions is to provide a uniform way to identify consumers who need an assessment conducted. Given this standardized approach, clients will receive the same follow-up for assessment, treatment and/or referrals based on their responses, regardless of the agency. Please note that agencies may decide to add more questions to their screening tool; however, the questions listed in these standards must be asked first before an agency's additional questions.

### **Acknowledgements**

Fulton County would like to thank all of the EMAs that shared their standards, as well as the members of the Mental Health and Substance Abuse Task Force who gave generously of their time to provide valuable input to the development of these quality management standards and measures.

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<b>I. Policies and Procedures</b>	
<b>Standard</b>	<b>Measure</b>
A. Agency must have policies and procedures in place that address confidentiality (HIPAA), grievance procedures and supervision requirements per federal and state law.	<ul style="list-style-type: none"> <li>• Policy and procedure manual</li> <li>• Grievance procedure posted in visible location</li> </ul>
B. Agency has eligibility requirements for services in written form. This is inclusive of: <ul style="list-style-type: none"> <li>✓ Clients rights and responsibilities</li> <li>✓ Release of information/confidentiality</li> <li>✓ Eligibility for services</li> </ul>	<ul style="list-style-type: none"> <li>• Policy on file</li> </ul>
C. Agency is licensed and/or accredited by the appropriate city/county/state/federal agency.	<ul style="list-style-type: none"> <li>• Current licensure on file from appropriate city/county/state/federal agency</li> </ul>
D. Agency has written policies and procedures in place that protect the physical safety and well-being of staff and clients. This is inclusive of: <ul style="list-style-type: none"> <li>✓ Physical agency safety <ul style="list-style-type: none"> <li>• Meets fire safety requirements</li> <li>• Complies with Americans with Disabilities Act (ADA)</li> <li>• Is clean, comfortable and free from hazards</li> <li>• Complies with Occupational Safety and Health Administration (OSHA) infection control practices</li> </ul> </li> <li>✓ Crisis management and psychiatric emergencies <ul style="list-style-type: none"> <li>• How to assess emergent/urgent vs. routine need</li> <li>• Verbal intervention</li> <li>• Non-violent physical intervention</li> <li>• Emergency medical contact information</li> <li>• Incident reporting</li> <li>• Voluntary and involuntary inpatient admission</li> </ul> </li> <li>✓ Refusal of services</li> <li>✓ Personnel <ul style="list-style-type: none"> <li>• Roles and responsibilities of staff, including supervision responsibilities and caseload or staff/client ratio</li> </ul> </li> <li>✓ Client/Parent/Guardian Rights and Responsibilities (see Standard VII)</li> </ul>	<ul style="list-style-type: none"> <li>• Policy on file</li> <li>• Site visit</li> </ul>
E. Agency has private, confidential office space for seeing clients with mental health treatment needs (e.g. no half-walls or cubicles, all rooms must have doors).	<ul style="list-style-type: none"> <li>• Site visit</li> </ul>

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<b>II. Program Staff</b>	
<b>Standard</b>	<b>Measure</b>
A. Staff are trained and knowledgeable about HIV/AIDS and available resources.	<ul style="list-style-type: none"> <li>● Training records</li> </ul>
B. Staff have appropriate skills, relevant experience and licensure to care for HIV infected clients with mental health issues. All professionals providing mental health assessment and treatment services are properly trained and meet the staff qualifications for mental health professionals, as defined in the attached document based on the Georgia Medicaid Community Mental Health Center Program Manual.	<ul style="list-style-type: none"> <li>● Current certifications on file</li> <li>● Training attendance in the past year on current mental health and substance abuse issues and approaches. This may include ASAM trainings.</li> </ul>
C. Agency staff administering screening questions must have completed training for using the screening tool.	<ul style="list-style-type: none"> <li>● Training records</li> </ul>
D. Staff receive supervision as required by licensure/certification.	<ul style="list-style-type: none"> <li>● Personnel records</li> <li>● Training records</li> </ul>
<b>III. Access to Services</b>	
A. Agency is accessible to desired target populations. Accessibility includes: <ul style="list-style-type: none"> <li>✓ Proximity to community</li> <li>✓ Proximity to mass transit</li> <li>✓ Proximity to low-income individuals</li> <li>✓ Proximity to underinsured/uninsured individuals</li> <li>✓ Proximity to HIV infected individuals</li> </ul>	<ul style="list-style-type: none"> <li>● Site visit</li> </ul>
B. Agency is compliant with ADA requirements for non-discriminatory policies and practices and for the provision of reasonable accommodations to address communication (e.g. sign language interpreter).	<ul style="list-style-type: none"> <li>● Policy on file</li> </ul>
C. Agency demonstrates the ability to provide culturally and linguistically appropriate care according to the Atlanta EMA standards for desired target population.	<ul style="list-style-type: none"> <li>● Personnel and training records</li> <li>● Site visit</li> <li>● Client satisfaction survey</li> </ul>
D. Agency demonstrates input from clients in service design and delivery.	<ul style="list-style-type: none"> <li>● Client satisfaction survey</li> <li>● Existence of Consumer Advisory Board</li> </ul>

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<b>IV. Eligibility Determination/Screening</b>	
<b>Standard</b>	<b>Measure</b>
A. Upon initial contact with client, agency will assess client for emergent/urgent or routine mental health and substance abuse needs.	<ul style="list-style-type: none"> <li>• Client record</li> </ul>
B. Provider determines client eligibility for services. The process to determine client eligibility must be completed in a time frame so that screening is not delayed.	<ul style="list-style-type: none"> <li>• Client record</li> <li>• Agency client data report consistent with funding requirements</li> </ul>
C. Client is informed of the client confidentiality policy and grievance policy at first face to face contact.	<ul style="list-style-type: none"> <li>• Client record</li> <li>• Client satisfaction survey</li> </ul>
D. Clients receive standardized screening questions during a face to face contact from an appropriate program staff immediately following eligibility determination.	<ul style="list-style-type: none"> <li>• Client record</li> <li>• Agency client data report consistent with funding requirements</li> </ul>
E. Agencies will inform clients of their screening disposition in writing, specifically whether or not they are being referred for a mental health and/or substance abuse assessment.	<ul style="list-style-type: none"> <li>• Client record</li> <li>• Agency client data report consistent with funding requirements</li> </ul>
F. Agencies that are referring a client for a mental health and/or substance abuse assessment must send a copy of the screen within two business days to the substance abuse entity that will be completing the assessment.	<ul style="list-style-type: none"> <li>• Screen in client record</li> </ul>

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<b>V. Assessment/Treatment</b>	
<b>Standard</b>	<b>Measure</b>
<p>A. Clients who are referred from screening shall receive an assessment within seven days of screening. Assessment includes at a minimum:</p> <ul style="list-style-type: none"> <li>✓ Medical history and current health status (records/clearance from medical provider)</li> <li>✓ HIV risk behavior</li> <li>✓ Available financial resources</li> <li>✓ Available support system</li> <li>✓ Legal/custody issues</li> <li>✓ Substance abuse issues</li> <li>✓ Referrals</li> <li>✓ Agency standardized mental health assessment</li> </ul>	<ul style="list-style-type: none"> <li>• Client record</li> <li>• Agency client data report consistent with funding requirements</li> </ul>
<p>B. Clients with a current mental health problem as determined by the standardized assessment who want treatment will be provided either a referral from the agency within forty-eight hours or will be seen for treatment within two weeks after the assessment is completed.</p>	<ul style="list-style-type: none"> <li>• Client record</li> <li>• Agency client data report consistent with funding requirements</li> </ul>
<p>C. Develop treatment plan with client within one month of intake encompassing continuum of care (working with medical and case management). An appropriate treatment plan must include at a minimum:</p> <ul style="list-style-type: none"> <li>✓ Risk reduction counseling on possible HIV re-infection and avoiding transmission to their partners</li> <li>✓ Documentation of current medications if applicable</li> <li>✓ Recommended mental health treatment and client's willingness to participate in such treatment</li> <li>✓ Plans for continuity of primary medical care for those clients who are currently receiving medical care</li> <li>✓ Plans to link client into primary medical care with a designated time frame that is coordinated with client's mental health treatment needs</li> </ul>	<ul style="list-style-type: none"> <li>• Client record including completed treatment plan signed by client</li> <li>• Client satisfaction survey</li> </ul>
<p>D. Client's needs and treatment plan are reviewed and revised a minimum of every 12 months.</p>	<ul style="list-style-type: none"> <li>• Client record</li> <li>• Agency client data report consistent with funding requirements</li> </ul>

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<b>VI. Service Coordination/Referral</b>	
<b>Standard</b>	<b>Measure</b>
A. Agency staff act as a liaison between the client and other service providers to support coordination and delivery of high quality care. For those clients not in primary medical care, agency staff must note progress towards linking the client into primary medical care.	<ul style="list-style-type: none"> <li>• Client record – documentation of with whom staff are communicating and progress to linking client to primary care if appropriate</li> </ul>
B. Agency staff implement discharge plan when appropriate in client treatment plan. The discharge plan shall be inclusive of: <ul style="list-style-type: none"> <li>✓ Summary of needs at admission</li> <li>✓ Summary of services provided</li> <li>✓ Goals completed during counseling</li> <li>✓ Circumstances of discharge</li> <li>✓ Disposition</li> </ul>	<ul style="list-style-type: none"> <li>• Client record</li> </ul>
C. Referral sources should be provided with a minimum of the following: <ul style="list-style-type: none"> <li>✓ Authorization form from client to provide records to referral source</li> <li>✓ Concise problem statement</li> <li>✓ Helpful/relevant lab tests</li> </ul>	<ul style="list-style-type: none"> <li>• Client record</li> </ul>
<b>VII. Clients' Rights and Responsibilities</b>	
A. Client confidentiality policy exists for all service settings.	<ul style="list-style-type: none"> <li>• Policy on file</li> </ul>
B. Grievance policy exists.	<ul style="list-style-type: none"> <li>• Policy on file</li> </ul>
C. A current (in the last year) release of information form exists for each specific request for information and each request is signed by the client.	<ul style="list-style-type: none"> <li>• Client record</li> </ul>
D. The agency has a formal policy as governed by Georgia law for clients who may be incapable of making their own treatment or care decisions.	<ul style="list-style-type: none"> <li>• Policy on file</li> <li>• Legal/medical consultation policy</li> </ul>
E. Client will be informed of the client confidentiality policy, grievance policy, their rights and responsibilities and their eligibility for services.	<ul style="list-style-type: none"> <li>• Documentation in client chart initialed or signed by client (chart review) showing that they have read or been informed</li> </ul>

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**Mental Health and Substance Abuse Treatment Staff Professionals<sup>1</sup>**

**Mental Health Professional (MHP)**

The following are considered to be Mental Health Professionals:

1. Psychiatrist – A physician licensed to practice medicine or osteopathy in Georgia, who has completed a residency in psychiatry approved by the American Board of Psychiatry and Neurology.
2. Psychiatric Nurse – A registered nurse, licensed in Georgia, who holds a master’s degree from a school of nursing or a university with a specialty in psychiatry or mental health.
3. Advanced Practice Nurse or Registered Nurse – An advanced practice nurse or registered nurse with a bachelor’s degree in nursing with one year experience in psychiatry or mental health.
4. Registered Nurse (Associate Degree) – A registered nurse with an associate’s degree in nursing with three years of experience, two of which are in psychiatry or mental health.
5. Physician – A person who is licensed to practice medicine or osteopathy in Georgia and with specialized training or one year of experience in treating persons with mental illness.
6. Social Worker – The holder of a master’s degree in social work from an accredited university or college, and with documentation of supervised clinical experience in field placements.
7. Clinical Chaplain – A graduate of a school of theology who has completed at least one year (four quarters) of training as a clinical chaplain in a program accredited by the Association for Clinical Pastoral Education, American Association of Pastoral Counselors, or American Association of Mental Health Chaplains.
8. Psychologist – A holder of a doctoral degree from an accredited university or college and who is licensed in the State of Georgia.
9. Master’s or Doctoral Degree Holders – In one of the behavioral or social sciences that is primarily psychological in nature, and documentation of supervised clinical experience in an internship or practicum placement program, or those licensed in Georgia to practice independently.

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<sup>1</sup> Adapted from the Georgia Medicaid Community Mental Health Center Program Manual

### **Mental Health Clinician (MHC)**

Note: Mental Health Clinicians must work under the supervision of a Mental Health Professional (MHP). Their clinical work must be reviewed and signed by the MHP supervisor.

The following are considered to be Mental Health Clinicians:

1. Bachelor Degree holders in one of the behavioral or social sciences, from an accredited university or college, that is primarily psychological in nature who have documentation of two (2) years supervised clinical/work experience in the field of mental health.
2. Registered Nurse, licensed to practice in the State of Georgia.
3. Clinical Interns or Practicum Students in a Master's degree program in one of the behavioral or social sciences at an accredited university or college, that is primarily psychological in nature.
4. Master's Degree holders in one of the behavioral or social sciences, from an accredited university or college, that is primarily psychological in nature. Documented experience is not a requirement.

### **Substance Abuse Professional (SAP)**

The following are considered to be Substance Abuse Professionals:

1. Physician – A physician licensed to practice medicine or osteopathy in Georgia, who has specialized training/certification in addiction or one year of experience treating persons with addictive diseases.
2. Psychologist – A psychologist licensed in the State of Georgia with specialized training/certification in addiction or one year of experience treating persons with addictive diseases.
3. Social Worker, Professional Counselor or Marriage and Family Therapist – A social worker, professional counselor or marriage and family therapist licensed in Georgia with specialized training/certification in addiction or one year of experience treating persons with addictive diseases.
4. Advanced Practice Nurse or Registered Nurse – An advanced Practice Nurse or Registered Nurse with a bachelor's degree in nursing with specialized training/certification in addiction or one year of experience treating persons with addictive diseases.
5. Bachelor's, Master's or Doctoral Degree Holders – In one of the behavioral or social sciences that is primarily psychological in nature and certification as a Certified Addiction Counselor II by the Georgia Addiction Counselors Association, or certification by the National Association of Alcoholism and Drug Abuse.
6. Certified Addiction Counselor I or higher – Individuals with certification as a Certified Addiction Counselor I or II by the Georgia Addiction Counselors Association, or certification by the National Association of Alcoholism and Drug Consortium as a Certified Alcohol and Drug Counselor, or certification by the International Credentialing Reciprocity Consortium as a Certified Alcohol and Drug Counselor.
7. Substance Abuse Manager – Any individual designed as a Substance Abuse Manager also meets the requirements for designation as a Substance Abuse Professional