

	Fountain of Hope Family Services Inc.		<b>Policy and Procedures</b>	
	Policy Type:-	General Program Standards	Policy# <b>GSP-200</b>	
	Subject:-	Program Services Structure	Adopted:- <b>05/06/2014</b>	
	Section:-	<b>(2-A.1)</b>	Effective:- <b>06/11/2015</b>	
	Approval By:-	Michael Oladipo	Revised:- <b>08/15/2020</b>	

## ►Introduction

(**FOHFS Agency**) is an Outpatient mental health program specializing in individual and family services to individuals and families residing the Oklahoma City metropolitan area. **FOHFS Agency** provides services to all age groups without regard to race, color, citizenship status, national origin, ancestry, religion, gender, age, physical or mental disability, physical handicap, marital status, or veteran status. Intake interviews are provided to all persons inquiring about services. Services are provided in the **office** and **home** environment and frequency of services are determined by the needs of the **persons served**, and **level of care**. (**FOHFS Agency**) has contract with **The Oklahoma Health Care Authority** to accept **sooner care** as a **payment resource**, and other **private insurance**. (**FOHFS Agency**) will introduce the Agency, and the services provided to **DHS**, and other referral sources to build Patentee. **FOHFS Agency** office is located at **10326 Greenbriar Parkway Oklahoma City; Ok 73159** Appointments are set at the Client’s convenience whenever possible. The **Executive Director** of **FOHFS Agency** may be reached at **(405) 759-3860**.

1. Population
2. Setting
3. Hours of Services: - **FOHFS Agency** open from **(9:00 am to 5:00 pm)**
4. Day of Services: - **FOHFS Agency** open form **(Monday to Friday)**
5. Frequency of Services:-
6. Payer Source: **State Medicaid** and **Private Pay**
7. Fees
8. Referral Source
9. The specific services offered included

## ►Individual Counseling

Individual counseling will be conducted using face-to-face, one on one interaction between qualified staff and a Client to promote emotional or psychological change to alleviate disorders. Individual therapy will be provided in an appropriate, private, confidential setting. Individual counseling will be goal directed utilizing techniques appropriate to the treatment plan. Frequency of individual counseling will be as is

recommended in the individualized treatment plan according to the needs of each Client.

▶**Group Counseling**

Group counseling will be conducted by treating behavioral health disorders using the interaction between a therapist and two or more Clients to promote emotional and functional change to alleviate behavioral or emotional disorders. Group counseling will be directly related to the goals and objectives of the individual treatment plan. The frequency of this service shall be determined on an individual basis as recommended in the individual treatment plan.

▶**Family Therapy**

Family therapy will be conducted in a face-to-face interaction between a therapist, the Client, and/or family member(s) or significant others to facilitate emotional, psychological, or behavioral changes and to promote communication and understanding. Family Therapy will be goal directed utilizing techniques appropriate to the treatment plan. Family therapy shall be offered as often as is recommended in the treatment plan for each Client.

▶**Case Management**

Case Management will be conducted either in a face-to-face interaction between therapist and Client, or by telephone. Case management will be goal directed by utilizing techniques appropriate to the individualized treatment plan of each Client to assist with advocating purposes, personal growth, locating, recognizing, and utilizing needed resources, enhancing self-sufficiency/independence, and overall personal growth and maturity. Case management will be utilized within the perimeters outlined by the Oklahoma Health Care Authority and will be offered as recommended in the treatment plan for each Client.

▶**Social Rehabilitation**

Social rehabilitation services will be conducted face to face or in a group. This is designed to enhance social interactions between the Client and peers, adults, authority figures, etc. The rehab will be goal directed by utilizing techniques appropriate to the individual treatment plan of each Client to assist with personal growth, and maturity to be able to properly communicate and interact in a social setting in an appropriate manner.

- A. **(FOHFS Agency)** shares information regarding the scope of services to all persons served their family or authorized representative, referral and funding sources, stakeholders, and the general public upon request.
- B. **(FOHFS Agency)** completes quarterly reports to assess needs for services, population, trends, effectiveness, accuracy and satisfaction to assist with monitoring and reviewing the scope of services provided. These reports are

utilized to review the scope of services and update them as needed. This review is conducted on an annual basis.

**(2.a.2) (FOHFS Agency)** has five offices separate from the reception area to provide individual/family/group counseling. Both offices have locks on their doors to ensure no interruptions to protect the privacy and confidentiality of the person served. **FOHFS Agency** only employs credentialed Clinicians, whom are licensed or under supervision for licensure. The Agency has contract with **The Oklahoma Health Care Authority to accept sooner** care insurance, and to bill services through this entity for payment of services.

**(2.a.3.) (FOHFS Agency)** documents admissions of each **Client** on the Admission log, the log is utilized to document each person served beginning services with the Agency. This document will include referral date, Client name, date of birth, race, address, location, date of initial assessment, first visit, and treatment plan.

**(B/C) (FOHFS Agency)** documents **transitions/discharges** of each **Client** on the discharge log. This log is utilized to document length of services, reasons for discharge, and to evaluate effective of their counseling.

1). If services are deemed inappropriate, the person, family and/or referral source (with person's to be served consent) will be informed of the reason(s) and appropriate referrals will be made. The disposition shall be noted in writing in the screening form.

2). **Restrictions FOHFS Agency may place on Clients.** It is the intent of **FOHFS Agency** to never place restrictions on Clients by the Agency. However, the safety and welfare of the **Client, Clinician, staff,** other **Clients,** and the community must be a **priority.** The need for restrictions may be determined by the **Executive Director.** Restrictions by the Agency will be placed on Clients in the following order.

- ◀ Verbal request for alleviation of behaviors/events causing need for restriction.
- ◀ Change of environment where services are provided to the Client.
- ◀ If applicable, Client will be asked to see their physician for medication review to determine need for decrease/ increase, different medication or need for medications
- ◀ Discontinuation of services with **FOHFS Agency**, and a referral to a different Agency.

◀ Events, behaviors or attitudes that may lead to the loss of rights or privileges of Clients.

**FOHFS Agency** has created provisions of behaviors and events that may cause Clients to lose all rights and privileges of services within the Agency. These events/behaviors are as follows, but are not limited to.

- (1) Inappropriately dressed for session
- (2) Verbal abuses or threats
- (3) Physical Abuses to self or others
- (4) Verbal and/or physical sexual advances to others.

- (5) Presenting to session under the influence of drugs or alcohol
- (6) Failure to keep scheduled appointments with Clinician on a consistent basis.

Means by which Clients may regain rights or privileges that have been restricted.

**FOHFS Outpatient Agency** feels it necessary to allow Clients the availability to regain their rights to services within the Agency. Rights and privileges lost can be regained by the Clients by meeting the following provisions.

- (1) Compliance with all rules, policies, guidelines, and responsibilities of the Agency.
- (2) Removal of any threats or behaviors which may be harmful to Client, staff, Clinician, other Clients, and/or community.
- (3) Improved behaviors and compliance with all policies, rules and procedures of **FOHFS Agency**.

- While special populations are not identified at this time, **FOHFS Agency** requires Clinicians to only practice within the boundaries of their competence, based on their education, training, supervised experience, state and national professional credentials, and appropriate professional experience. Clinicians will also demonstrate a commitment to gain knowledge, personal awareness, sensitivity and skills pertinent to working with a diverse population.
  - **FOHFS Agency**, at a minimum, adheres to the staff to individual receiving services ratio required by applicable standards. In addition, **FOHFS Agency** considers the quality of services during the determination of staffing patterns. It is the policy of **FOHFS Agency** to provide services in a timely manner. For this reason, waiting lists are not maintained. Should **FOHFS Agency** be unable to provide services to an individual due to lack of staffing, appropriate referrals will be given to that individual to access services at another Agency.
6. All personnel of **FOHFS Agency** are required to adhere to the Standards of Practice. The Standards of Practice represent minimal behavioral statements of the Code of Ethics. Employees should refer to the applicable section of the Code of Ethics for further interpretation and amplification of the applicable Standard of Practice.
- **FOHFS Agency**' Personnel Policies and Procedures include the Standards of Practice for **FOHFS Agency**. The sessions included are:
    1. The Counseling Relationship
    2. Confidentiality
    3. Professional Responsibility
    4. Relationship with Other Professionals
    5. Evaluation, Assessment and Interpretation

6. Teaching, Training, and Supervision
7. Resolving Ethical Issues

**7. Services are designed and implemented:**

**(FOHFS Agency)** improves the quality of life for Clients by providing high quality and effective mental health services in an environment that maintains Client rights and dignity and enables them to achieve and maintain their highest level of functioning for the Client/families within the community.

Clients served by **FOHFS Agency** will receive services face to face by a licensed Clinician on an appointment basis only. Should an emergency occur, the person served will be directed to call **911** if he/she is unable to reach their Clinician? This information shall be communicated to the person in writing during their orientation.

8. **FOHFS Agency** provides services to persons served with the goal of enhancing each individuals level of functioning, and enabling them to reach their height of potential in their personal lives, family settings, and social relationships. The Agency provides services to persons of all ages in all community areas. **FOHFS Agency** only employs Clinicians whom are qualified to render these services.

1. Individual Counseling: -
2. Group Counseling:-
3. Family Therapy:-
4. Case Management:-
5. Social Rehabilitation:-

(8) The services at **FOHFS Agency** is designed and implemented to

- (a) Support the recovery, health, or well-being of the persons or family served
- (b) Enhance the quality of life of the person served
- (c) Reduce symptoms or needs and build resilience
- (d) Restore /improve daily functioning
- (e) Support the integration of the person served into the community.

9. Each program developed by the Agency will be administered utilizing appropriate treatment modalities as identified, and to be administered only by qualified staff.

10. It is the intent of **FOHFS Agency** while providing services to our Clients to strive for wellness and recovery. The Clinician will build a positive and trusting relationship with each Client. Clients will be assisted with improving positive and effective communication, problem solving and coping skills. Clients will also be encouraged to identify situations which may be harmful to their mental and/or physical health, identifying/implementing ways of handling them, identifying/implementing ways of making positive choices and setting personal boundaries in hopes of improving their quality of daily living and relationships with others.

**A-1 FOHFS Agency** does not serve mandated persons at this time.

**A-2** It is the intent of **FOHFS Agency** to never place restrictions on Clients by the Agency. However, the safety and welfare of the Client, Clinician, staff, other Clients, and the community must be a priority. The need for restrictions may be determined by the **Executive Director**. Restrictions by the Agency will be placed on Clients in the following order.

1. Verbal request for alleviation of behaviors/events causing need for restriction.
2. Change of environment where services are provided to the Client.
3. If applicable, Client will be asked to see their physician for medication review to determine need for decrease/ increase, different medication or need for medications. The Agency will also take into consideration the physical and developmental history of the person served when administering counseling session.

Discontinuation of services with **FOHFS Agency**, and a referral to a different Agency. Events, behaviors or attitudes that may lead to the loss of rights or privileges of Clients. **FOHFS Agency** has created provisions of behaviors and events that may cause Clients to lose all rights and privileges of services within the Agency. These events/behaviors are as follows, but are not limited to.

- (7) Inappropriately dressed for session
- (8) Verbal abuses or threats
- (9) Physical Abuses to self or others
- (10) Verbal and/or physical sexual advances to others.
- (11) Presenting to session under the influence of drugs or alcohol
- (12) Failure to keep scheduled appointments with Clinician on a consistent basis.

## **B. Not Applicable**

C. Means by which Clients may regain rights or privileges that have been restricted. **FOHFS Agency** feels it necessary to allow Clients the availability to regain their rights to services within the Agency. Rights and privileges lost can be regained by the Clients by meeting the following provisions.

- (4) Compliance with all rules, policies, guidelines, and responsibilities of **FOHFS Agency**.
- (5) Removal of any threats or behaviors which may be harmful to Client, staff, Clinician, other Clients, and/or community.
- (6) Improved behaviors and compliance with all policies, rules and procedures of **FOHFS Agency**.

**FOHFS Agency** feels these measures are necessary to assist Clients with controlling behaviors and preventing harm to self or others, and to improve anger management, control and coping skills.

13 **FOHFS Agency** refers all medical questions to the person's served primary health

care provider. **FOHFS Agency** does have access to MD, who is a Child, Adolescent, and Adult Psychiatrist for questions and training for Clinicians.

**14. Does not apply**

15. **FOHFS Agency** feels that part of recovery is integration into the community where the Client lives. **FOHFS Agency** refers persons served to groups within their communities. These groups include but are not limited to: Alcoholics Anonymous, Alanon, Alateen, Pro-Oklahoma, People First, Food Banks, Salvation Army, Department of Human Services, Jesus House, Infant Crisis Center, Mother to Mother, and Case Management Agencies

16 While special populations are not identified at this time, **FOHFS Agency** requires Clinicians to only practice within the boundaries of their competence, based on their education, training, supervised experience, state and national professional credentials, and appropriate professional experience. Clinicians will also demonstrate a commitment to gain knowledge, personal awareness, sensitivity and skills pertinent to working with a diverse population, and that the needs of the person served are being met.

17. **FOHFS Agency** does not provide any educational training programs for persons served or their families at this time.

18. **FOHFS Agency** refers Clients to call 911 when appropriate. **FOHFS Agency** also refers to the Crisis Intervention Center at **(405) 527-8300** for emergency mental health evaluations. Clinicians will call **911** in situations where the Client is unable or unwilling to call 911 or the Crisis Intervention Center as appropriate. The Clinician is required to complete an incident form within **24** hours of each incident

19. **FOHFS Agency** requires each Clinician to work within their boundaries of competence, and to only practice in specialty areas new to them after appropriate education, training and supervised experience, and to continually monitor their effectiveness as professionals and to take steps to improve when necessary.

⇒ Clinician and Clients work jointly in devising integrated, individual treatment plans that offer reasonable expectation of success and are consistent with abilities and circumstances of the Clients. Clinicians and Clients regularly review plans to ensure their continued viability and effectiveness, respecting person's served freedom of choice.

⇒ **FOHFS Agency** assessments are conducted by a licensed mental health professional or by a master level Clinician under professional supervision to ensure a high level of professionalisms and appropriate interviewing skills.

⇒ **Outpatient services** include **individual, family, group therapy**, and **rehab services** where Clinicians are able to access a variety of **research-based** treatment approaches that include but are not limited to: **Cognitive Behavioral Therapy; Client**

**Centered Therapy; Family Systems Therapy; social relationship direction.**

20. Persons served actively participate in developing their treatment plans, the goals are identified by the Clients, and objectives are agreed up by the Clients. Persons served are encouraged to provide feedback to the Clinician and to the Agency through the use of questionnaires and telephone surveys.

⇒ Services that would best benefit the Client are identified during the assessment progress and are reviewed during the treatment plan update process.

⇒ Clinician's recognize that culture affects the manner in which Clients' problems are defined and addressed.

⇒ Persons served socioeconomic and cultural experience is considered when diagnosing mental disorders and developing treatment plans.

⇒ Clinician's along with the person's served are responsible for implementing the individual plan of each Client.

⇒ Any team member, including the Client, may request special team meetings at any time.

**Document**

1. The attendance of assessments and treatment planning is documented with signatures on the assessment and treatment plan. Other meetings are documented within a progress note. Team meeting where persons other than the Client, family members, and Clinician are present are documented with signatures of each person present and included in the person's served records.

2. The results of team meeting will be documented and included in the person's served records.

**2.1** Each Clinician is designated to assist in coordinating services for each person they serve by

1. Assuming responsibility for ensuring the implementation of the person centered plan.
2. Ensuring that the person served is oriented to his/her services.
3. Promoting the participation of the person served in an ongoing basis in discussions of his/her plans, goals, and status.
4. Identifying and addressing gaps in service provision
5. Sharing information on how to access community resources relevant to his/her needs
6. Advocating for the person served, as necessary.
7. Communicating information regarding progress of the person served to the appropriate persons.
8. Facilitating the transition process, including arrangements for follow-up services.



9. Involving the family or legal guardian, when necessary and permitted.
10. Coordinating services provided outside the organization.

**22.** It is the responsibility of the **Executive Director** to oversee all functions and operations of the Agency, including, but not limited to reviewing paperwork, staffing Clients with therapists, and contacting the Clients themselves for feedback. This can also be accomplished through satisfaction surveys.

**23.** Persons requesting admission into **FOHFS Agency** treatment services are contacted within 24 hours for an initial screening assessment. A Clinician will conduct the initial screening which will include gathering of information on the presenting problem from referral sources, the potential Client and/or parents/guardians. The Clinician will identify any urgent needs on the screening form and referrals, if any. The initial screening will also include funding source information and/or financial information. The Clinician performing the initial assessment will assess the appropriateness of services from **FOHFS Agency** and staff with the **Executive Director** to determine appropriateness of services

- Specific services that would best benefit the Client are identified during the assessment progress are determined during the assessment phase of treatment. Each therapist utilizes modalities that will be essential to the benefit of each Client. This is determined on a Client to Client basis. The needs of the persons served will be identified during the assessment, and implemented in the Clients individual treatment plan.
- The goal of the **FOHFS Agency** is to improve the daily functioning of each person served. The Agency measures effectiveness through tracking car scores with each treatment plan update. This is done to determine if the Client's needs have changed, if more training is needed or if the **FOHFS Agency** is effective in the services we provide.
- **FOHFS Agency** encourages all Clients to provide the Agency with feedback. This is utilized to assess effectiveness of services, and the need for additional training, etc. Satisfaction surveys are given to Clients at numerous times during treatment. The results are compiled, assessed and utilized for the purpose of improving the effectiveness and satisfaction to the Client, regarding the services received.
- Each Clinician, upon hire and annually will be orientated on the Agency policy regarding ethics of Clinical practices, legal aspects, and professional standards, including boundaries. These policies will be followed and adhered to by all persons employed with the **FOHFS Agency**, including contract personnel
- Each employee/contract personnel will be evaluated annually. The evaluation will be based on their individual job performance, as well as compliance,

effectiveness and satisfaction of the persons served.

Clinician's recognize that culture affects the manner in which Clients' problems are defined and addressed. Persons served socioeconomic and cultural experience is considered when diagnosing mental disorders and developing treatment plans.

24. The agency implements policies and procedures that address the handling of items brought into the program by the Clients or personnel, including:

a. Illegal drugs. Should any staff member, person's served or any other person be known to possess an illegal substance, that substance may be confiscated. The police are to be notified of any and every instance of possession of illegal substances. In the case of a minor, his or her guardian shall also be immediately notified. Staff members will be dealt with in accordance to the provisions set out in the Human Resource Policies of **FOHFS Agency**.

b. legal drugs. Should any staff member, persons served, or any other person be known to possess a legal drug or prescription medications this person will be given a verbal reminder that these items are prohibited in the office environment.

c. Prescription medication.

d. Weapons. Should a Client possess a weapon, the weapon may be confiscated if it does not pose a risk to staff or other Clients.

The decision whether to call the police shall be made after staffing with the **Executive Director** or **Clinician Director**. Should a staff member bring a weapon onto **FOHFS Agency** property, he/she will face disciplinary procedures as set forth in the Human Resource Policy

- **FOHFS Agency** maintains a list of referral sources within the Oklahoma City area where person's served can access a variety of assistance. Oklahoma City also enjoys the 911 phone call where resources are identified by zip codes ensuring referrals are local to the Client.

**As appropriate, families are:**

- Provided with access to a list of referral sources within the Oklahoma City area.
- **FOHFS Agency** feels that maintaining the family unit is one way to gain physical and emotional support for the Client. **FOHFS Agency** provides family therapy for the family of the Clients as appropriate.
- When Clinician's learn that the Client is in a professional relationship with another mental health professional, they request release from Clients to inform the other professionals and strive to establish positive and collaborative professional relationship.

- Persons served actively participate in developing their treatment plans, the goals are identified by the Clients, and objectives are agreed up by the Clients. Persons served are encouraged to provide feedback to the Clinician and to the **FOHFS Agency** through the use of questionnaires and telephone surveys.
- Services that would best benefit the Client are identified during the assessment progress and are reviewed during the treatment plan update process.
- Clinician's recognize that culture affects the manner in which Clients' problems are defined and addressed.
- Persons served socioeconomic and cultural experience is considered when diagnosing mental disorders and developing treatment plans.
- Clinician's along with the person's served are responsible for implementing the individual plan of each Client.
- Any team member, including the Client, may request special team meetings at any time.
- Document:
  - The attendance of assessments and treatment planning is documented with signatures on the assessment and treatment plan. Other meetings are documented within a progress note. Team meeting where persons other than the Client, family members, and Clinician are present are documented with signatures of each person present and included in the person's served records.
  - The results of team meeting will be documented and included in the person's served records.

## Emergency Procedures

(**FOHFS Agency**) will familiarize all Clients with the layout of the Agency, emergency exits, fire extinguishers and their locations, and first aid kits.

- Should a Client need assistance with education regarding Advanced Directives, he/she will be referred to legal aid for counsel.

## Annual Goals and Objective 2.a.26. (A to I)

### → Policy Goals

The **FOHFS Agency** description is reviewed annually by the **Executive Director** who serves as the **Quality Performance Officer, (QPO)** to objectively and systematically **monitor, evaluate** and **improve** the quality of consumer care as it related to mental health, and trauma, the items following address. It is the goal of **FOHFS Agency** to make sure that all counselors and other direct staffs provide trauma counseling and case management services as needed per consumer:

- 1) Fiscal management of the facility;
- 2) Identity of a performance improvement team;
- 3) Capability of staff to address co-occurring disorders;
- 4) Cultural competency training

## 5) Trauma

### □ Objectives:

- To consider the needs of the specific age group(s) concerning trauma in the population served when implementing the quality assurance process.
- To focus on providing services that has a main objective of dealing with trauma
- To identify opportunities to improve counselor understanding of trauma.
- To identify opportunities to improve Client care as it relates to the concern trauma and correct problems that has the greatest (of an important) effect on consumer care.
- To integrate assessment and treatment of trauma into the quality assurance program into the ongoing operational activities of organized treatment and case management services.
- To continue to integrate the quality assurance program into the ongoing operational activities of the organized treatment and management staffs.
- To modify, when necessary, the quality assurance program to encourage improved identification of trauma issues and solutions of problems that significantly affect participant's/consumer's care.
- To provide a team approach concerning trauma toward total consumer care.
- To provide an ongoing continued assessment **Trauma** progression as it related to quality assurance approach with emphasis on current knowledge and Clinical experience, with a high potential to differentiate good from substandard performance with meaningful results.
- To assure that all consumers receive the same individualized quality of care from qualified Clinical and support staff through:

(a) Monitoring/evaluation of each treatment area objectively and systematically utilizing standardized criteria; and

(b) Clinical privileging activities.

\* To provide annually to the governing body, executive leadership, and Community, ongoing reports and evidence of staff involvement in the quality assurance program.

### □ Review Policy

A review of the **FOHFS Agency's** programs and services shall be conducted annually during the first governing board meeting for the fiscal year. This review shall include:

- Definition of overall target populations for services provided
- The organization mission statement
- Annual Report
- Agency and program goals and objectives

- Approval of the annual review shall be noted in the minutes of the governing board meeting.

**FOHFS Agency** is in accordance with state laws (Secretary of State) and shall submit in writing annually scheduled governing board meetings. The **FOHFS Agency** shall display to the public announcement and agenda to all governing board meetings held. The **FOHFS Agency** shall make all documents pertaining to the **FOHFS Agency** available to the general public upon request.

A written description of programs and services shall be maintained by the **FOHFS Agency** to include:

- Description of services, philosophy, and mission
- Identification of professional treatment
- Staff providing the services
- Written admission and exclusionary criteria to identify consumers for whom
- services are primarily intended goals and objectives

The **FOHFS Agency's** goals and objectives shall be presented to all staff personnel in the annual staff meeting held. All procedures, plans, tasks, target dates, and designated staff responsibilities regarding the implementation of the process shall be provided to all staff members. The goals and objectives are stated in the **FOHFS** Annual Report at the end of each program description and are to be completed within the next fiscal year. Each program coordinator is responsible for carrying out these plans.