Outpatient Services

Service Name	INTENSIVE COMMUNITY SERVICES
Funding Source	Behavioral Health Service Only
Setting	Community Based – Most frequently provided in an agreed upon community setting or the consumer's home, not office or facility-based.
Facility License	N/A
Basic Definition	Intensive Community Services are designed to support consumers to develop independent and community living skills and prevent the need for a higher level of care. Services are designed for consumers with a high rate of inpatient use, including consumers with co-occurring disorders.
Service Expectations	• A diagnostic interview conducted by a licensed, qualified clinician AND a bio-psychosocial assessment by a licensed and credentialed mental health professional prior to admission OR completed within 12 months prior to the date of admission. • If the diagnostic interview and/or the bio-psychosocial assessment were completed within 12 months prior to admission, a licensed professional should review and update as necessary via an addendum, to ensure information is reflective of the client's current status and functioning. The review and update should be completed within 10 days of admission. • A strengths-based assessment which may include skills inventories, interviews and/or use of other tools for the purpose of identifying treatment and rehabilitation goals and plans with the client, should be completed within 10 days of admission and may be completed by non-licensed or licensed individuals on the client's team. • Development of a treatment/rehabilitation/recovery team including formal and informal support providers as chosen by the consumer. • A treatment/rehabilitation/recovery plan developed with the consumer, integrating individual strengths & needs, considering community, family, and other supports, stating measurable goals and specific interventions, that includes a documented discharge and crisis/relapse prevention plan, completed within 30 days of admission, reviewed, approved and signed by the Clinical Supervisor, or other licensed person. • Review the treatment/rehabilitation/recovery and discharge plan with the consumer's team, including the consumer, every 90 days, making necessary changes then, or as indicated. Each review should be signed by members of the team. • Provide service coordination and case management activities, including coordination or assistance in accessing medical, psychiatric, psychopharmacological, psychological, social, education, housing, transportation or other appropriate treatment/support services as well as linkage to other community services identified. • Provision of active rehabilitation and support interventions with focus on activities of daily living, education, budgeting, medication compliance and self-administration (as appropriate and part of the overall treatment/rehabilitation/recovery plan), crisis/relapse prevention, social skills, and other independent living skills that enable the consumer to reside in the community. • Provide education, support, and coordination with the appropriate services prior, during, and after crisis interventions.

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	• Work with the consumer to develop a crisis/relapse prevention plan. • If hospitalization or residential care is necessary, facilitate, in cooperation with the treatment provider, the consumer's transition back into the community upon discharge. • Service must be trauma-informed and culturally/linguistically sensitive. • Frequency of contacts as needed to address the presenting problem(s) with a minimum of face-to-face contact 6 times per month or 6 total hours of contact per month
Length of Services	• Average length of service is 6 to 12 months.
Staffing	• Program Director: Demonstrated experience, skills, and competencies in behavioral health management. A master's degree in a human service field preferred. • Clinical Supervisor: Clinical Supervision by a licensed person (APRN, RN, LMHP, PLMHP, LIMHP, Psychologist, Provisionally Licensed Psychologist) working with the program to provide clinical consultation on the individualized treatment/rehabilitation/recovery plan at least once a month. • Direct Care Worker, holding a bachelor's degree or higher in psychology, sociology or a related human service field are preferred but two years of coursework in a human services field and/or two years experience/training or two years of lived recovery experience with demonstrated skills and competencies in treatment with individuals with a behavioral health diagnoses is acceptable.
Staffing Ratio	1 Intensive Community Services Worker to 10 consumers
Hours of Operation	24/7 Access to service during weekend/evening hours, or in time of crisis with the support of a mental health professional
Desired Consumer Outcome	• Successful transition to a less intensive level of care • Individualized goals and objectives substantially met. • Crisis/relapse prevention plan is in place. • Precipitating condition and relapse potential stabilized for management at lower level of care. • Decreased frequency and duration of hospital stays, increased community tenure. • Formal and informal support system in place. • Sustained, stable housing.
Rate	Non Fee For Service