Hope Network Behavioral Health – East

Program Description – Outpatient Services (Children)

Mission Statement/Program Philosophy

In Christian service, Hope Network empowers people to overcome challenges and achieve their highest level of independence.

Program Goal

The overall goal of the Outpatient treatment services is to enhance the functioning of individuals served and their families through the provision of individual, family, or group treatment.

Program Description/ Philosophy

Outpatient Treatment Services provide individual therapy, group therapy, family counseling, management and family psycho-education services. Outpatient Programs offer comprehensive and coordinated services that may vary in level of intensity from person served to person served. Outpatient Programs address a variety of needs including, but not limited to situational stressors, family relationship, interpersonal relationships, mental and physical health issues, life span issues, psychiatric illnesses, addiction, eating disorders, sexual disorders, and the special needs of victims of abuse, domestic violence, and other types of stress and trauma.

Outpatient Treatment Services are based on the principles of recovery and person-centered planning practices and services are individually tailored to meet the needs of the person served(s). Persons served by Outpatient Treatment Programs, may have co-occurring issues such as substance use, HIV, AIDS, homelessness, criminal justice system obligations, sexual offenses, and/or chronic medical conditions. Hope Network welcomes persons with co-occurring (mental health and substance use) disorders. Persons with co-occurring issues will receive an integrated care plan to address care needs and relevant health, safety, and risk issues. At no time will an individual presenting for mental health services be told that they must/should address substance use issues first before accessing mental health services. There will be no arbitrary imposition of a length of sobriety requirement before accessing mental health or substance use services. At no time will individuals presenting for substance use services be told that they must/should address mental health issues before accessing substance use services. At no time should an individual presenting for substance or mental health services be arbitrarily excluded based on class of medicine used. When special populations are served, their specific needs are addressed in the psychiatric assessment and treatment planning processes as well as through on-going service provisions.

An intake assessment within 7-14 days of a request for services is offered. Following the assessment, individuals and/or families work with the clinician to jointly develop a treatment plan that represents their needs, goals, and desires. The need for and use of supports from possibly family and friends, and the community, as well as considerations of health and safety are routinely discussed in the development of the plan. The treatment plan guides the type and intensity of services to be provided and is reviewed related to progress being made and possible revisions during the course of treatment. Treatment is coordinated with persons served other health care and/or service providers.

All clinicians are master level clinicians with either a Masters in Social Work, Masters in Counseling or a Masters in Psychology. Every attempt possible will be made to match personnel's demographic characteristics to those of the persons served. Personnel will be culturally and linguistically competent relative to the current person served caseload. Personnel will promote recovery and/or well being, provide

services consistent with the needs of individual persons served implement and monitor the treatment plan, and react to service provisions as persons served needs change.

Days & Hours of Services

Genesee County Childrens Outpatient Treatment office hours (Flint): Monday to Friday 8:00am to 5:00pm with evenings and Saturday appointments by request.

Macomb County Outpatient Treatment office hours (Mt Clemens): Monday to Friday 8:00am to 5:00pm, with evenings and Saturday appointments by request.

Critical after hour situations are to be directed to emergency services unless otherwise stated in the individual's treatment plan.

Service Locations

Services are provided in Outpatient Treatment facilities located in Macomb and Genesee Counties. The Outpatient Treatment facilities are located in accessible areas. Additionally, Outpatient Services can be provided to anyone within the State of Michigan via telehealth.

Frequency of Services

Services are individually tailored to meet the needs of the person served. The amount, scope, and expected duration of services are outlined in each persons served individual treatment plan.

Target Population

- Children, adolescents and/or families experiencing situational stressors.
- Children, adolescents, and/or families experience mental health and/or addictions related issues.
- Children, adolescents and/or families experiencing trauma.
- Children, adolescents, and/or families requiring medication services in conjunction with therapy services.

Credentialing & Training

- Personnel will be trained in First Aid, CPR, OSHA, Recipient Rights, Crisis Intervention, HIPAA, LEP, Cultural Competency, and Compliance and Integrity related issues.
- Continuing education/orientation will include at least an additional 38 continuing education hours annually, with a minimum of 24 hours specific to children services:
 - Assessment and Referral
 - o Person-Centered Planning and Self-Determination
 - Treatment and Service
 - Relapse and Recovery
 - Medication administration, monitoring, and education
 - Addiction counseling and prevention
 - Crisis management and intervention
 - Clinical Documentation
 - o Children's Mental Health services
 - Co-Occurring disorders
 - o Other areas as needed to provide high quality services.
 - Zero Suicide initiative with training in AMSR and the CSSRS training
- On-going professional and clinical supervision
- On-going access to a medical doctor, fully licensed master's level qualified mental health professional, and addictions specialist

Service Approach/Modality

- Cognitive Behavioral Approach
- Person Centered Planning
- Self Determination
- Multidisciplinary Team
- Access to needed services—service continuum
- Stage-Wise Interventions
- Outreach
- Motivational Interviewing
- Individual and group treatment
- Pharmacological treatment
- Interventions to promote overall health
- Secondary interventions for non-IDDT responders
- Illness Management and Recovery
- Relapse Prevention
- Family Psycho-education
- Play Therapy

Services Provided

- Assessment
- Psychiatric evaluation
- Psychiatric testing services
- Treatment planning
- Service reviews
- Pharmacological
- Medication management and support
- Individual therapy
- Group therapy
- Family/conjoint therapy
- Integrated Dual Diagnosis Treatment
- Skill development related to community living, social skills and supports
- Community/natural supports
- Coordination of care with primary care physician and health plan
- Coordination with education provider, such as public and private schools
- As needed, assistance with development of individuals IEP and/or behavioral plans
- Transition services
- 30-Day post service follow-up
- Arranges for crisis intervention services

Service Outcomes

- Support, recovery, or a better quality of life
- Greater self-determination
- Reduction of symptoms or needs
- Integrated Dual Disorder Treatment (IDDT)
 - Reduces
 - o Relapse of substance abuse and mental illness
 - o Hospitalization
 - Arrest
 - Incarceration

- Duplication of services
- Service Costs
- Utilization of high-cost services
- Increases
 - Continuity of care
 - Person served quality of life outcomes
 - Stable housing
 - Independent Living
- Restoration or improvement in levels of functioning
- Community integration
- Greater use of natural supports

Program Access

Persons served are referred to Outpatient services through the local CMH, private insurance, or individuals. A person served may also contact Hope Network and engage in services independently if they have an ability to privately pay for the services available. An intake assessment will be completed within 14 days for the access center and for other agencies as required by the funder.

Admission and Readmission Criteria

- Admission is defined by authorizing reimbursement source
- May be private pay
- Under age 18.

The referring agency, insurance provider, and Hope Network Behavioral Health - East work together in making access, referral, transition, and/or discharge decisions.

The referring agency manages admission priorities and any wait lists for services.

Exclusionary Criteria

- A. Person served is in an institution or Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) and is not expected to be discharged within the next 180 days.
- B. The Person Served has a mental illness but does not meet the criteria for severity of illness/intensity of service to be admitted for Targeted Case Management.

Transition/Discharge Criteria

- Achieves/obtains treatment goals.
- Ability to maintain adequate physical, mental, and emotional health and stability.
- Moves outside of geographic area of the therapist's responsibility.
- When the person served requests termination of services.
- Requires higher level of care.
- When the therapists cannot locate the person served.

When services are denied, persons served will be informed as to the reason for the service denial. Recommendations for alternative services will be summarized with the person served. Where appropriate, service denials and/or service recommendations will be communicated to the referring agency.

When services are transitioned and/or discharged, persons served will be provided a transition/discharge summary and a copy of the summary will be provided to the persons served designated representative and responsible agency.

When services are denied, reduced, and/or suspended, persons served will be provided due process notices including but not limited to adequate notice, advanced notice, Office of Recipient Rights Complaint Form, and/or internal grievance procedures and associated forms.

Payer Sources/Fees

Generally, this service is paid for by Medicare and/or Medicaid. This service provision may be covered by commercial insurance. The insurance card/number will indicate the reimbursement source. Fees associated with this program.

Funding Source

These programs are generally funded through various contracts with Community Mental Health agencies and individual contribution, which is based upon the individual's ability to pay. Persons served may be private pay.

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