

## Hope Family Health Center Counseling Services Department Scope of Practice

The purpose of Hope Family Health Center Counseling Department is to support the vision and mission of Hope FHC in providing quality integrated medical, mental and educational health care services to the uninsured living in the Lower Rio Grande Valley. These holistic services aim to strengthen families, foster personal dignity and empower each person to take responsibility for his or her own well-being. Moreover, we strive to improve our community's physical health and emotional well being for a lifetime by providing comprehensive, affordable quality health care services while responding to the changing needs of our community and respecting the dignity, values, and culture of the individual. Our scope of practice incorporates the above in order to provide all our patients with an integrated outpatient counseling program.

In following Hope FHC's requirements, all patients requesting counseling services will have completed the application process to determine financial eligibility. Once this process is completed, a face to face or telephone screening will be administered by the counseling staff and evaluated to determine if client meets criteria for counseling services. If a patient is being referred by Hope FHC's providers, a screening will be completed the same day if the patient is on the premises and a counseling staff member is available at that time.

Our counseling staff will be working in collaboration with the medical providers and outside referring agencies to ensure that we meet our patients' needs by ensuring that patients referred are within our scope and can be appropriately managed in an outpatient counseling program. The counseling staff is well trained to provide a number of behavioral health services to our patients, which include but are not limited to, the following type of diagnosis:

1. Anxiety/depression
2. Marital/relationship issues
3. Adjustment Disorders to Major Life Stressors
4. Consult with educational professionals, parents, and community members regarding childhood disorders (e.g. Pervasive Developmental Disorders and Attention Deficit Hyperactivity Disorder in Children)
5. Disseminate information regarding psychological issues to the community

The following is a list of the patient diagnoses or situations that are beyond our Scope of Practice and therefore, will be provided with referrals to at a minimum of two community resources which provide mental health services. Furthermore, client may be discharged once treatment has begun if he/she presents any of the following:

1. Children under the age of 6
2. Diagnosis in the Autism Spectrum
3. Any patient assessed to present a GAF score of 50 or below

4. Schizophrenia with negative symptoms and other psychotic disorders (Adult and Child)
5. Bipolar Disorders Type I with active psychotic features
6. Major Depressive Disorders with Psychotic features
7. Suicidal ideation with a plan
8. Active and persistent Non-Suicidal Self-Injury
9. Actively using illicit drugs and alcohol
10. Eating disorders: Anorexia Nervosa and Bulimia if condition is assessed by counselor to be life threatening.
11. Dementia, specifically if patient is unable to pass Mini Mental Status Exam
12. Active CPS or APS cases
13. Custody cases
14. Current criminal charges

Occasionally, a patient may present in acute mental health distress which will require immediate referral to the Mobile Crisis Outpatient Team (MCOT):

The following are situations that will require immediate referral:

1. Suicidal and homicidal ideation with a plan
2. Actively psychotic behavior or ideation such as auditory or visual hallucinations which have been assessed to be commanding and threatening in nature

Patient referred by our primary care providers and outside agencies may present with psychosocial problems including:

1. Child abuse (sexual, physical, or emotional abuse and/or neglect)
2. Domestic violence
3. Elder abuse

If during our assessment and treatment of our patient we uncover reasons or situations that require reporting to either Child or Adult Protective Services, our staff will comply with these reporting requirements immediately.