## Considerations for Group, Concurrent, and Individual Therapy

The Centers for Medicare & Medicard Services (CMS) supports the clinical judgement of the practitioner. Refer to coverage rules by the payer for more details.

red vidual Decapy	Group Therapy	Concurrent Therapy
	Clinical & Regulatory Overview	
hould be the primary mode of evaluation and intervention.	Appropriate for clients when its plemented to address client specific goals.	Way be appropriate for some clients and some poels.
	Clinical Consideracions	
The typical DF intervention session should be individual.  My occupation be and intervention that includes safety concerns a likely best own pleted in an individual setting.	Provide interventions in group to the right cleans, at the right time.  Meet identifying cleants for group interventions, provide an activity analysis of the group intervention considering the cleants:  Individual graft is current functional capacity.  Psychosocial meets and benefits of treatment in group.  Auritional cognition is sensors impriments in group those cleants or cleants with lower functional capacity may benefit from a smaller group.  Coemist at different stages of establishation may benefit from being together in groups to alone the fixed experience and recovery through substitution.  The group intervention should be directed at a specific goal in each cleants plantal care. (The goals do not need to be the same or eventuals for its all cleans.)  Each cleant in the group should be able to meaningfully participate with the assistance of the practitioner throughout the count interventions and be able to willful and meeting in reschairs of the group should be able to willful and meeting in reschairs of the group should be able to willful and meeting in reschairs.	Interventions should be directed at a specific goal to each cite.  The interventions must be skilled and medically recessary.  Best used when clients are working on readering a skill or occupation. Should be avoided for novel interventions and any time hands on a scalarnow is needed.  Concurrent therapy may only be a portion of an intervention section and is adjunct to individual interventions.  ADIA policipates concurrent interventions to be the least often implemented mode of occupational therapy.  Wedcare Part E-does not recognize concurrent interventions.
	Docume martien Considerations	
Documentation should demonstrate the skill and distinct solve of occupational therapy.  The ADNs Documentation & feelshursement flescustration measures and the solutions of the	Documentation of group intersection should include:  - how the prescribed shifted therapy services costs bute to the patient's anticipated progression toward individualized grads.  - who group is the most appropriate mode of therapy for the person.  - how the group therapy is medically recessary and appropriate to the needs of each beneficiary.  When groups are provided in a shifted nursing facility (SWF) setting, there is a requirement for an explicit patification for the use of group softer than individual or concurrent therapy. The description should include, but need not be limited to:  - the specific terrelity to that particular person.  - the documented type and amount of group therapy.  - how the prescribed type and amount of group therapy will meet the patient's needs and assist the patient in eaching the documented quals.	Dearly document the portion of therapy in the intervention sessions that was provided concurrently.  Dearly document the time that is skilled intervention and is directly connected to at least one individualized goal in the plan of care. Note that a client performing tasks independently reprisely and skilled therapy.
A CONTRACTOR OF THE PARTY OF TH	Skilled Nursing Facilities. New Definitions and Egental Considerations for Wedicare Part A.	Charles and the same of the sa
I minimum of this of theopy must be provided one-on-one. Individual theopy is the preferred mode of theory a movicion and should be considered the standard of care in heopy services provided to DVF moderns." (DVS, Nr Fed less, 1870s, 1874s, 1875s, 2076).	A maximum of 20% of Decupy may be provided in preservand consument therapy combined.  "Under the SWI PFS, group therapy will be defined as [an individual] gus lifed what litution therapy associant treating two to six patients at the same tree who are performing the same or similar activities."  (DMS, 14 Fed. Rep. 38728, 3674-38758, 2019)	A maximum of 23% of the app may be provided in group and encourant combined.  "therapy is provided to their patients by one the rapid or therap asserted doing different activities." (DKS, NA had bug 36735, 3696-36760, 2016.

# **Group Therapy Documentation Requirements**

Regina Morrow Robinson, Safa Kemal Kaptan

#### **Group Therapy Documentation Requirements:**

The Clinical Documentation Sourcebook Donald E. Wiger, 2005-03-04 All the forms handouts and records mental health professionals need to meet documentation requirements The paperwork required when providing mental health services continues to mount Keeping records for managed care reimbursement accreditation agencies protection in the event of lawsuits and to help streamline patient care in solo and group practices inpatient facilities and hospitals has become increasingly important This updated and revised Third Edition provides you with a full range of forms checklists and clinical records essential for effectively and efficiently managing your practice From intake to diagnosis and treatment through discharge and outcome assessment The Clinical Documentation Sourcebook Third Edition offers sample forms for every stage of the treatment process Greatly expanded from the second edition the book now includes twenty six fully completed forms illustrating the proper way to fill them out as well as fifty two ready to copy blank forms The included CD ROM also provides these forms in Word format so you can easily customize them to suit your practice With The Clinical Documentation Sourcebook Third Edition you ll spend less time on paperwork and more time with clients Includes documentation for child family and couples counseling Updated for HIPAA compliance as well as to reflect the latest JCAHO and CARF regulations New focus on clinical outcomes supports the latest innovations in evidence based practice Documentation for Physical Therapist Practice Jacqueline A. Osborne, 2015-07-31 Documentation for Physical Therapist Practice A Clinical Decision Making Approach provides the framework for successful documentation It is synchronous with Medicare standards as well as the American Physical Therapy Association's recommendations for defensible documentation It identifies documentation basics which can be readily applied to a broad spectrum of documentation formats including paper based and electronic systems This key resource utilizes a practical clinical decision making approach and applies this framework to all aspects of documentation This text emphasizes how the common and standard language of the Guide to Physical Therapist Practice and the International Classification of Functioning Disability and Health ICF model can be integrated with a physical therapist s clinical reasoning process and a physical therapist assistant s skill set to produce successful documentation Includes content on documentation formations Initial Evaluations Re examination Notes Daily Notes Conclusion of the Episode of Care Summaries Home Exercise Program Reviews all the important issues related to style types of documentation and utilization of documentation Covers documentation relevant in different settings inpatient home health skilled nursing facility outpatient Helps students learn how to report findings and demonstrate an appropriate interpretation of results Includes up to date information in line with APTA Guidelines for Defensible Documentation World Health Organization International Classification of Functioning Disability and Health Mode and Medicare Reviews electronic documentation ICD 9 ICD 10 and CPT codes Includes important chapters on Interprofessional Communication Legal Aspects Principles of Measurement

Standards and Guidelines for the Psychotherapies Paul M. Cameron, Jon Ennis, John Deadman, 1998-01-01 A

comprehensive overview of the art and science of psychotherapy and a set of practice guidelines for psychiatrist developed from a report by the Joint Task Force on Standards and Guidelines for Medical Psychiatric Psychotherapy of the OPA and The Casebook of a Residential Care Psychiatrist Martin Fleishman, 2014-03-18 Discover an alternative realm of **OMA** psychiatrywithout offices or couches The Casebook of a Residential Care Psychiatrist Psychopharmacosocioeconomics and the Treatment of Schizophrenia in Residential Care Facilities addresses the problems involved in the onsite treatment of mentally ill patients in residential care facilities. This book is the first to identify the need for psychiatrists to be available to individuals in such facilities as adult homes community care homes transitional living facilities and rest homes This vital resource also contains specific recommendations as to how these visits should be conducted with regard to frequency duration space and the types of Medicare procedure codes to utilize In The Casebook of a Residential Care Psychiatrist Dr Fleishman uses his 40 years of experience as a psychiatrist to show you the ins and outs of practicing psychiatry in residential facilities. The book also discusses the profound changes psychiatric drugs have produced in the social economic and legal arenas Using anecdotes personal stories and actual documents from Dr Fleishman's files this book provides you with a wealth of knowledge not found anywhere else With this book you ll learn more about time saving interview assessment techniques the importance of psychopharmacology in residential care and how it has changed the practice of psychiatry Dr Fleishman's method for appropriately creating and using progress notes and other records during treatment ways to work with other members of the residential facility professional communityincluding psychologists social workers pharmacists and administrators to make everyone s job easier the best ways to control paperwork obligations the impact that federal state and local government agencies have had on mental health spending services and practitioners In The Casebook of a Residential Care Psychiatrist you will find wisdom knowledge and advice along with case studies tables and examples While focused on psychiatry and schizophrenia this book will be of interest to mental health workers long term caregivers and residential facility administrators as well as psychiatrists and psychologists **EMDR Group Therapy** Regina Morrow Robinson, Safa Kemal Kaptan, 2023-11-04 Delivers an EMDR model that can expand access to urgently needed mental health services while maintaining affordability This innovative handbook is the first to present EMDR Group Therapy as a pragmatic approach to trauma care that enables practitioners to scale up mental health services while ensuring cost and time efficiency It delivers step by step guidance supported by real life case examples for practicing this safe effective and culturally adaptable modality in a wide range of situations and conditions EMDR group protocols are applicable to inpatient and outpatient settings strangers experiencing similar or different events families and a wide range of ages The book explores how and why EMDR group protocols are applicable to disaster response addictions schools medical challenges grief families refugees victims of sexual violence emergency responders and more The text describes the theoretical underpinnings and practical applications of EMDR Group Therapy comparing nine group protocols through the lens of the eight phases of EMDR therapy and early

intervention principles It emphasizes the concept of task sharing allowing nonspecialist facilitators to deliver low intensity EMDR treatment options effectively To promote in depth understanding chapters provide Learning Objectives Learned Through Experience boxes Case Examples focusing on a variety of specific groups and problems Discussion Questions to reinforce knowledge and unique Pocket Guides refining protocols and derived techniques in a clear snapshot A full Glossary of terms is also provided at the end of the book Key Features The first book to disseminate the principles and applications of Group EMDR Therapy Delivers the knowledge of 36 contributing EMDR experts and researchers from 11 countries Follows the eight phases of standard EMDR protocol Offers a window into EMDR practice with a broad variety of specific groups and topics Detailed cultural competence checklist for practitioners to provide care with respect for diversity Includes multiple Case Examples Learning Objectives Learned Through Experience boxes figures and charts and much more Provides Pocket Guides for a clear easy to follow snapshot of group EMDR protocols **Group Schema Therapy for Complex Trauma** Sandoval Sherri Williamson, Ann Ruben McDowelland, Transform trauma recovery through the power of group healing with this comprehensive guide to schema therapy for complex trauma survivors This groundbreaking manual integrates cutting edge neuroscience research with practical group therapy techniques offering mental health professionals a structured approach to treating developmental trauma PTSD and attachment wounds Discover how to create safe therapeutic environments where survivors can process traumatic memories develop healthy relationships and build lasting resilience This evidence based framework combines schema therapy principles with polyvagal theory providing detailed session by session protocols for addressing dissociation shame and relational trauma through group intervention Key features include Comprehensive assessment tools and screening instruments Session materials and reproducible handouts Crisis management protocols for group settings Cultural adaptations for diverse populations Technology integration strategies for hybrid delivery Supervision models and training requirements Research evidence and outcome measurement tools Perfect for therapists counselors social workers and mental health professionals seeking specialized training in group trauma treatment This manual provides practical guidance for establishing trauma informed programs while maintaining therapeutic fidelity and ensuring client safety Learn to facilitate powerful healing experiences that address the interpersonal nature of trauma through community support corrective relationships and evidence based interventions that promote post traumatic growth Occupational Therapy for Mental Health Catana Brown, Jaime Muñoz, Virginia Stoffel, 2025-03-14 and lasting recovery Person centered recovery oriented occupation based Here's practical information on the theories evidence assessments and interventions that are crucial to effective occupational therapy mental health practice Students will gain an understanding of the lived experience and an evidence based recovery oriented perspective with guidance on how to be a psychosocial practitioner in any setting They ll understand the recovery process for all areas of an individual s life physical emotional spiritual and mental and know how to manage co occurring conditions Geropsychology and Long Term Care Erlene

Rosowsky, Joseph M. Casciani, Merla Arnold, 2010-01-23 It is with great pride that the Psychologists in Long Term Care PLTC have sponsored The Professional Educational Long Term Care Training Manual and now its second iteration Geropsychology and Long Term Care A Practitioner's Guide Education of psychologists working in long term care settings is consistent with PLTC s mission to assure the provision of high quality psychological services for a neglected sector of the population i e residents in nursing homes and assisted living communities To this end direct training of generalist psychologists in the nuances of psychological care delivery in long term care settings has been a major priority It is a tribute to the accelerating nature of research in long term care settings that a revision is now necessary After all the Professional Educational Training Manual s initial publication date was only in 2001 However in the intervening years much progress has been made in addressing assessment and intervention strategies tailored to the needs of this frail but guite diverse population It is so gratifying to be able to say that there is now a corpus of scientific knowledge to guide long term care service delivery in long term care settings Clinical Documentation with Children and Adolescents Amy Marschall, 2023-08-29 This book addresses the unique challenges therapists face when documenting their clinical work with children providing insight into what ethical appropriate and culturally competent practice looks like Clinical documentation is vital for ethical and legal practice and good documentation helps clinicians leave room for client centered and age appropriate interventions such as play therapy Beginning with an overview of the important considerations unique to providers working with children Amy Marschall offers guidance on all aspects of clinical documentation such as intakes treatment plans mental status examinations progress notes safety plans and more Each chapter includes specific examples of clinical situations with guidance on how to document these situations effectively With chapters on client confidentiality and telehealth as well as special attention being paid to cultural awareness including race ethnicity gender sexual orientation and socioeconomic status this book includes blank templates of treatment plans progress notes and risk assessments for therapists to use in their practice This book is essential for any mental health professional who works with children in both individual and family work including psychologists licensed clinical social workers licensed professional counselors mental health counselors marriage and family therapists play therapists school counselors and therapist interns Handbook of Quality Assurance in Mental Health Alex R. Rodriguez, Sharon A. Shueman, 2013-11-09 professional standards review organizations PSRO in defining quality of care for the Medicare program it is a shared responsibility of health professionals and government to provide a reasonable basis for confidence that action will be taken both to assess whether services meet professionally recognized standards and to correct any deficiencies that may be found p 14 Similar pronouncements have been made for the quality assurance activities of the Department of Defense's CHAMPUS program and of the 1980s successor to the PSROs the federally designated peer review organizations PROs established to ensure quality and utilization efficient care for Medicare Links between the federal and state gov ernments and between professional associations and private review entities have

been developed to make this shared responsibility manifest in the delivery and reimbursement of health services This responsibility is seen in light of both pro fessional and legal accountability a view noted by Gibson and Singhas 1978 and Alger 1980 Accountability then becomes a concentric concept that elaborates on the pure view of quality and reflects the federal government s consumer protection activities during the 1970s The Joint Commission on Accreditation of Hospitals JCAH which has pro vided another primary historical leadership role in defining quality assurance has promoted the evolution of the concept of resource limitations as a part of the definition of quality assurance

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web dietary aide 03 2010 08 2016 phoenix az s poplar st medical dental vision life and short term disability paid days off vacation sick holiday delivers patient meal trays and food items to floors and units in a timely manner maintain quality standards and sanitary food practices while preparing salads desserts cold plates

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web prepare a dietary aide resume that demonstrates your competency with our free template by dillon price monster contributor you understand the value of preparation and planning when creating a meal plan that meets your clients health needs finding a new job as a dietary aide requires those exact same skills

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web dietary aide resume examples samples serves meals timely and that are palatable and appetizing in appearance performs proper setting of tables set up meal trays food cards dining room etc serves resident meals in the dining room private dining room and delivers trays to resident s rooms apartments

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web dietary aide supervisor resume objective friendly and enthusiastic food and nutritionist with 5 years of specialization in

## **Group Therapy Documentation Requirements**

patient diets and food service able to learn new tasks quickly and proficient in growing key customer relationships represent establishment with friendly professional demeanor at all times