

# **Innovations in Counseling (Part 10 Session 4)**

# **Higher Level of Care Guidelines for Children and Adolescents**

Webinar Follow-up Question and Answer Session With Kristin Cheshire, MS, LCMHC, LCAS

# Question from N. Schamberger:

Do you know of any intensive outpatient services that are trauma focused?

## **Answer from Presenter:**

Most IOP programs have a component of being "trauma-informed" but trauma-focused is less common for this level of care. IOP is typically recommended for stabilization of acute symptoms that are not being managed effectively at a lower level of care. While PTSD can have some acute symptoms that are exacerbated by outside circumstances this diagnosis is typically seen as "long-term and chronic" and therefore does not always meet medical necessity for this level of care. The most common diagnosis treated in IOP are depression, anxiety, bipolar disorder, and other mood disorders that can have an episodic component.

### Question from B. Werner:

How is IOP different from partial hospitalization other than length of group time and program length?

#### **Answer from Presenter:**

The level of acuity that the client presents with is a big differentiator between what level of care would be recommended. In IOP the client may have mild disruptions in functioning and less severe symptoms overall. PHP is a step up in support and the acuity must support this recommendation. A client needing PHP services must have some level of acute dangerousness either passive suicidal or homicidal ideations, self-harming behaviors or symptoms of psychosis that interferes in their several areas of their life. They must present with significant disturbance in ability to function at school and at home which could look like multiple absences, decline in grades and withdrawal from family and peers.

# Question from A. Vosburg:

You talked about the use of group therapy. How many is a group and does the group size influence your success?

### **Answer from Presenter:**

Group size and engagement is an important indicator for group cohesion to happen and can impact level of comfort in folks speaking up in the group. The best therapeutic range for group therapy is 8-10 clients max per group. This number allows to a variety of perspectives but is small enough for the clients to get to know each other on a more intimate level. When trust and support is established in the group there is more opportunity for insightful conversations to happen and clients to learn more from each other.

# **Question from N. Schamberger:**

Do you know of ways of searching for intensive in-home services?

## **Answer from Presenter:**

Intensive in-home services can be searched by using google and typing in "intensive in-home services and your county and state." You should see a few options pop up that are available to folks in your community. I also suggest getting involved in local networking groups to learn more about what is offered in your community and meet the folks who are facilitating the services. Knowing some of the key players offering these services can offer peace of mind when referring a client out for a higher level of care. You can also instruct the client to reach out to their insurance company as well to see what services are covered by their specific insurance plan.