



Primary Therapist Competencies

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First 10 Minutes of a Session

- A Primary Therapist is a Leader
 - First open the chart and review the Tplan with the patient.
 - If the patient doesn't know what is on their Tplan you are not doing a good job as a primary therapist.
 - If the Tplan does not include comprehensive services you are not doing a good job as a primary therapist
 - If all the required signatures are not on the Tplan you are not doing a good job as a primary therapist.
 - If there are roadblocks to implementing the Tplan, develop ways to remove them or modify Tplan

First 10 Minutes of Every Session

- A Primary Therapist is a Leader
 - Second, scan the Pt Schedule and Pnotes to see if all the services on the Tplan Services are being delivered as planned. You are responsible to see that the Tplan is accomplished and to remove obstacles.
 - First check for weekly CSW, Family Therapist, Co-dependency counseling, scheduled times and progress notes. If they are not there immediately contact and confront that responsible professional and get the problem resolved. If this happens consistently, fire the team member and get a more competent professional to provide that function for your patients.
 - You are the boss on your case and you are the advocate that ensures that your patient gets the Comprehensive (C) in the CSTAR Program. At staff meeting let the team leader and staff know who you have replaced on your case so they can see if there is an emerging staff competency or commitment problem.

First 10 Minutes of Every Session

- The final function in the first 10 minutes of a session is to start a Pnotes that summarizes progress on the Tplan and the work occurring in the associated therapies.
 - As you have taken stock of the entire case, you are now in a position to do one sentence which points out the successes and roadblocks in the entire Tplan and techniques applied for removing roadblocks.

The Middle Part of Every Session

- The Middle of a Session is spent on the delivery of specific techniques directed at specific Tplan goals.
 - The therapist, having just reviewed the Tplan with the patient moves in on the specific Goals and has the patient reiterate them, explains the technique being used for that goal, and applies the technique.
 - In this part of the session the patient may be asked to reiterate the “harmful consequences of substance use”, to “take stock of their traditional triggers for relapse and the action plans to avoid or dissipate them”, practice specific “relaxation and stress management techniques”, etc. as outlined on the Tplan.
 - Thus, the second sentence of the Pnotes would list the specific Tplan Goal and the Technique applied and the patient’s response and any homework assigned.

The End of Every Session

- The end of every session is a vital summary of the Tplan, techniques applied, patient progress and accomplishment in the session, review of the homework assignment, and establishment of the next week's schedule and any emergency reporting or contact plans.
 - For the third time the Tplan is recanted (repetition is essential to learning), the schedule related to the Tplan is checked and agreed upon, homework assignment is checked for understanding, and the Primary Therapist indicates that they want to know if any part of the Schedule of Tplan is not accomplished or becomes a problem during the week.
 - Any emergency numbers of service requirements are reviewed in cases of danger or high potential for relapse.

Documentation

- You are paid, and required by company policy and procedure, contract, and law to document each session. Your documentation must have the: 1. Date, 2. Time in and out of the session, 3. All of the content noted in the slides above, 4. Your professional signature with your credentials and discipline noted, 5. All turned in at the time of your session.
- You are given a 50 minute therapy hour so that you are paid for 10 minutes each hour to do your session.
- You should be noting the Beginning, Middle, and End sentence or two during the session.

Team Meetings

- Primary Therapists using this session format will be ready to summarize the Tplan, teams performance, ongoing assessment of the patient and family, and effects of linkages with collaborating systems at the Team Meeting.
- The Primary Therapist must identify problem members of the team and suggested changes when team members are under performing. The team members work for the primary therapist as well as the agency and the patient, and the primary therapist must be enough of a leader to confront team members when performance or dependability is sagging. Ownership of their cases is a key dynamic in a good Primary therapist.

Referral Source Development

- Primary Therapists are responsible to maintain a positive relationship with old referral sources and develop new ones (this is one of the components of evaluation of a therapist).
- During patient openings and down time the competent primary therapist is calling, writing letters, and responding to referral sources to maintain a positive and strong linkage.

CARF Expectations

- Psychologist or Physician involvement in the diagnosis, development and supervision of the Tplan, and admission and discharge.
- QI review of Admissions, dx, Tplans, discharge summaries, and medication management.
- H&Ps, Psych Diagnostics, and Medications monitored and core part of program.