


# TEXAS CIVIL COMMITMENT OFFICE

 <b>POLICY AND PROCEDURE</b>	<b>NUMBER:</b>	<b>3.25</b>
	<b>EFFECTIVE:</b>	<b>7/1/2020</b>
	<b>SUPERCEDES:</b>	<b>9/30/2019</b>

**SUBJECT: TREATMENT TEAM MEETINGS**

**PURPOSE:** To establish minimum requirements for Treatment Team Meetings. Treatment Team Meetings shall be conducted to ensure effective communication between all parties with an interest in the client’s supervision and treatment.

**DEFINITIONS:**

“**Community Residential Facility**” - is a facility, under contract with TCCO that provides housing, supervision and other programs to the client.

“**Treatment Team**” consists of the client’s Case Manager, the Treatment Provider and may include mental health staff and the community supervision officer/parole officer, if applicable. Other members such as facility staff, as approved by the Case Manager, may also be involved.

**PROCEDURE:**

**I. Treatment Team Meeting Frequency**

- A.** Treatment Team Meetings for clients residing at the Texas Civil Commitment Center (TCCC) shall be conducted:
  - 1.** Within thirty (30) calendar days of arrival;
  - 2.** At least one (1) time per quarter for clients in Tiers 1-3;
  - 3.** At least one (1) time per month for clients in Tier 4; and
  - 4.** As needed, as determined by the Case Manager and/or Treatment Provider.
  
- B.** Treatment Team Meetings shall be conducted at least one (1) time per month and as needed for clients residing in a home plan, Community Residential Facility, or nursing home.

## **II. Treatment Team Meetings**

- A.** The Treatment Team Meeting shall be conducted face-to-face unless otherwise approved by the Civil Commitment Manager (CCM).
- B.** Treatment Team Meetings for clients residing at the TCCC shall be scheduled through the Unit Supervisor and CCM. The TCCC Clinical Director or designee shall submit a proposed schedule for the following month to the Unit Supervisor and CCM via email by the third (3<sup>rd</sup>) Monday of the month. The Unit Supervisor and CCM shall review the schedule within three (3) working days to determine whether the schedule is approved. If approved, the CCM shall notify the TCCC Clinical Director or designee via email that the schedule has been approved. The Unit Supervisor shall provide the TCCC Case Managers with a copy of the approved schedule via email.
- C.** Any requested changes by the Treatment Provider, other than emergency situations, to the approved TCCC Treatment Team Meeting schedule shall be submitted to the CCM via email for review and approval at least five (5) working days prior to the scheduled meeting. A requested change due to an emergency situation shall be submitted to the CCM upon becoming aware of the emergency situation. The CCM shall update the Unit Supervisor of the schedule change and the Unit Supervisor shall update the TCCC Case Managers.
- D.** The Case Manager and Treatment Provider shall co-lead the Treatment Team Meeting. Information obtained during the Treatment Team Meeting shall be included in the client's progress reports submitted by the Case Manager and the Treatment Provider.
- E.** Treatment Team Meetings give the Treatment Team the opportunity to discuss the client's progress. Discussion of the client's progress shall include, but is not limited to:
  - 1.** The client's behavior and progress in treatment;
  - 2.** The client's tier level;
  - 3.** The client's pending targets and goals;
  - 4.** The client's interaction with other clients;
  - 5.** Incident reports;
  - 6.** Collateral contacts;
  - 7.** Treatment assignments;
  - 8.** Polygraph results and disclosures;
  - 9.** Plethysmograph results;
  - 10.** Mental health;
  - 11.** Any additional assessments taken by the client;
  - 12.** Recommendations for areas of improvement, if applicable;
  - 13.** Additional referrals, if applicable; and

**14. Any other important information regarding the client.**

- F.** The Treatment Team shall discuss the client’s tier level during the Treatment Team Meeting and make any adjustment necessary to the client’s tier level. Any adjustments made to the client’s tier level shall be agreed upon within the Treatment Team in accordance with TCCO Policy 4.1 *Tiered Programming and Movement Between Tiers*. If a change is made to the client’s tier level, the Case Manager shall notify the Unit Supervisor via email the same business day. If the Treatment Team cannot come to a consensus regarding the client’s tier level, the Case Manager shall notify the Unit Supervisor and CCM. The CCM shall schedule a meeting with the Unit Supervisor, TCCC Clinical Director and the Treatment Team to reach an agreement.
  
- G.** The Case Manager shall document the Treatment Team Meeting within two (2) working days in the case management automated system. The Community-Based Treatment Provider shall document the Treatment Team Meeting in the case management automated system within two (2) calendar days or as required by the contract. A Treatment Provider at the TCCC shall document the Treatment Team Meeting in the case management automated system within five (5) working days of the Treatment Team Meeting. The Case Manager and Treatment Provider shall enter the Treatment Team meeting in the chronological record in the case management automated system as a “Monthly Staffing” for community-based clients or “TCCC Treatment Team Staffing” for TCCC clients.

**SIGNATURE ON FILE**

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Marsha McLane  
Executive Director