Caseload Report		
Reported Service Dates: 2023-08-20 through 2023-08-26		
Counselor Name	Last Name, First Name	Date:
Caseload as of 08/28/2023 09:11		
Continuing Care Clients	0	
SUD Clients	3	
CCBHC Clients	3	
Active Group Assignments	16	
Individual Sessions	OP: 3; CCBHC:0; OPCC:0	
Group Sessions		
SUD Assessments	0	
CCBHC Assessments	0	
Same Day Visits	0	
Client Contacts	2	
Briefs	0	
No Shows	CCBHC: 0; OP: 0; Other: 0	
No Show Reasons		
# clients no actual/scheduled services in last/next 14 days	29 as of 08/28/2023 09:11	
Staff Event Hours - Overlapping Events Included	Administrative:3.5, Meeting:1.8, Paperwork:6.8, Personal:10.0, Staff Meeting:0.5, Supervision:1.0, Treatment Team:1.0	
	Total Countable Sessions	3
	Total Billable Sessions	3
	Total CCBHC Sessions	0

Counselor Signature: _____

Supervisor Signature: _____

Definitions

Continuing Care\SUD\CCBHC\Group Clients

Clients assigned to you from Outpatient, Outpatient - Continuing Care\CCBHC programs at time of report creation. Group assignments are those listed in Netsmart - Groups > Group > Information > General Information - "Schedules" section

Individual Sessions

OP = Services = * Individual Therapy,* Brief Treatment: CCBHC = CCBHC - Individual Therapy Note: OPCC = * Individual Therapy; NoShow = False;Duration > 0;Program name aligns with service

Group Sessions

Services = Group Therapy, Group Therapy - Multi Family;NoShow = False; Duration >=60; Program = Outpatient: Each client counts as 1, must be more than 1 client present

SUD Assessments

Services = 1A CCHBC Client Adult Assessment,1B CCBHC CHILD ASSESSMENT,NOMS Assessment; NoShow = False

CCBHC Assessments

Services = 2 CCBHC BMI Assessment and Follow-Up,3 CCBHC - Child Weight Assessment,4 CCBHC Tobacco Counseling,5A CCBHC Adult Discharge Assessment,5B CCBHC CHILD Discharge Assessment,6 CCBHC Adult Suicide Risk,7 CCBHC - Depression Screening,9 CCBHC Child Suicide Risk Assessment,10 A CCBHC Adult Reassessment W/Client,10 B CCBHC CHILD REASSESSMENT w/Client,11 CCBHC Alcohol Screen/Counseling,~ 12 CCBHC - PHQ-9,~ CCBHC - Mental Health Brief Assessment,Mental Status Exam - CCBHC,~ GAD 7;NoShow = False

Same Day Visits

Services = * Brief Intervention,* Brief Treatment* Crisis Intervention,* Family Collateral (Client Not Present),* Family Counseling - Client Present,* Family Therapy - Client Present Telehealth,* Individual Therapy,* Injection - (only),* Medication Induction,* Medication Management,Contact - Individual less than 25 minutes,Group Therapy,Initial Psychiatric Evaluation,Intensive Outpatient Therapy - Group,Nurses Note,Physicians Note,Psychiatry Follow-up Note; NoShow = False; Duration > 0, Program = Outpatient; Facilty = any OP facility; Multiple same day visit to same counselor counts as 1

Client Contacts

Services = Client Communication Note,CCBHC - Client Communication Note; NoShow = False; Facility = any OP facility

Briefs

Services = * Brief Intervention; NoShow = False; Duration > 0; Program = Outpatient or Intake; Facility = any OP facility

No Shows

Services = Any; NoShow = True; Facility = Any OP facility

No Show Reasons

Services = Any; NoShow = True; Facility = Any OP facility; Program = Outpatient,Intake,CCBHC,Outpatient - Continuing Care

clients no actual/scheduled services in last 14 days

of clients on caseload that have not had a service in the last 14 days or do not have a scheduled service in the next 14 days

Staff Event Hours

Staff event time scheduled in clinicians calendar by category. All events, even overlapping ones, are included.

Total Countable Sessions

Services = Same as SDV above, all visits (even same day) count; NoShow = False; Duration > 0; Program = Outpatient; Facility = any OP facility

Total Billable Sessions

Services = Services starting with *, Group Therapy; NoShow = False; Duration > 0; Facility = any OP facility

Total CCBHC Sessions

Services = any; NoShow = False, Duration > 0; Program = CCBHC; Facility = any OP facility