



Psychosocial Support Services Service Standard

Texas Department of State Health Services, HIV Care Services Group — [HIV/STD Program | Texas DSHS](#)

Subcategories	Service Units
Other Counseling—Individual	Per 15 minutes
Other Counseling—Nutritional	Per 15 minutes
Other Counseling—Support Group	Per 15 minutes
Psychosocial Support Services	Per 15 minutes

Health Resources & Services Administration (HRSA)

Description:

Psychosocial Support Services provide group or individual support and counseling services to assist HRSA Ryan White HIV/AIDS Program (RWHAP)-eligible people living with HIV (PLWH) to address behavioral and physical health concerns.

Activities provided under the Psychosocial Support Services may include:

- Bereavement counseling
- Child abuse and neglect counseling
- HIV support groups
- Nutrition counseling provided by a non-licensed dietitian (see [Medical Nutrition Therapy](#) for services provided by a licensed dietitian)
- Pastoral care/counseling services

Limitations:

Recipients may not use Psychosocial Support Services to provide nutritional supplements (nutritional supplements may be allowable under Food Bank/Home

Delivered Meals or Medical Nutrition Therapy). HRSA RWHAP-funded pastoral counseling must be available to all eligible clients regardless of their religious denominational affiliation. Agencies may not use HRSA RWHAP funds for social or recreational activities or to pay for a client's gym membership.

A Texas licensed dietician (LD) may not provide nutritional counseling, assessment, or care planning under this service category. Services provided by an LD are [Medical Nutrition Therapy](#).

Services:

Psychosocial services provide support, either individually or through group settings, for eligible clients to maintain continuity in medical care and address physical health concerns.

Pastoral care and counseling services must be:

- Provided by an institutional pastoral care program (e.g., components of AIDS interfaith networks, separately incorporated pastoral care and counseling centers, or components of services provided by a Texas licensed provider such as a home care or hospice provider)
- Provided by a licensed or accredited provider wherever such licensure or accreditation is either required or available
- Available to all individuals eligible for Ryan White services, regardless of their religious denominational affiliation

Nutrition counseling provides nutritional education, assessment, and counseling by a nutritionist to persons living with HIV to assist clients in one or more of the following:

- Maintaining treatment regimens
- Remaining in primary medical care
- Improving overall client wellness and quality of life

This service helps clients use food products in the best way possible to maintain or improve health and maximize health benefits.

Universal Standards:

Service providers for Psychosocial Support Services must follow [HRSA and DSHS Universal Standards](#) 1-52 and 182-183.

Service Standards and Measures:

The following standards and measures are guides to improving health outcomes for people living with HIV throughout the State of Texas within the Ryan White Part B and State Services Program.

Standard	Measure
<p>Assessment and Plan of Care for Counseling Services: Staff should assess clients within 30 business days of the initial session for the following:</p> <ul style="list-style-type: none"> • Support system • Psychosocial support needs • History of accessing primary care and other services • Barriers to access, noting psychosocial support barriers in particular <p>Staff should offer available services to the client based on the needs identified during this initial assessment.</p> <p>Staff must developed a service plan with the agreement of the client within 30 business days of the assessment, outlining service goals, objectives, and interventions. This should include client-identified needs and plans for continuity of primary medical care and support services.</p> <p>Agencies should review and revise client needs and service plans a minimum of every 6 months.</p>	<ol style="list-style-type: none"> 1. Percentage of clients with a completed assessment within 30 business days of the initial session. 2. Percentage of clients with a service plan developed within 30 business days of the completed assessment. 3. Percentage of clients with service plans reviewed or revised every 6 months, at a minimum.
<p>Provision of Services for Counseling: Non-professional staff may provide counseling related to:</p> <ul style="list-style-type: none"> • Child abuse and neglect • Bereavement <p>Regardless of the type of counseling provided, counseling staff should include non-clinical, supportive discussion of</p>	<ol style="list-style-type: none"> 4. Percentage of clients receiving child abuse or neglect counseling with documentation of counseling sessions. 5. Percentage of clients receiving bereavement counseling with documentation of counseling sessions. 6. Percentage of clients receiving any counseling services with documentation of discussion on the importance of

<p>the importance of engagement in HIV care, including treatment adherence.</p> <p>Psychosocial services are limited in scope and not intended to address complex mental health or case management needs. Support staff should make appropriate referrals to other core and support services.</p>	<p>retention in care.</p>
<p>Provision of Services for Support Groups: HIV support groups address the needs of PLWH through group discussion and peer support. Staff or volunteers facilitating support groups should include non-clinical, supportive discussions of:</p> <ul style="list-style-type: none"> • Treatment adherence • Access to and engagement in primary care • Access to and engagement in case management, if appropriate <p>Within 30 business days of first attendance, the agency should establish a client record for all clients attending support groups, with goals for the client outlined. Progress toward meeting these goals should be documented, including attendance records and topics discussed.</p>	<p>7. Percentage of clients receiving support group services with a client record that includes goals for the client.</p> <p>8. Percentage of clients receiving support group services with documentation of group attendance and topics discussed.</p>
<p>Provision of Services for Pastoral Counseling and Care: Staff providing pastoral counseling and care must provide progress notes for all sessions.</p> <p>If the agency refers the client to another agency for pastoral counseling and care, staff should document the referral in the client’s record. Follow-up regarding outcome must also be documented.</p>	<p>9. Percentage of clients with documentation of pastoral care provided through progress notes.</p> <p>10. Percentage of clients with documented referral to an eligible pastoral care program, as applicable.</p> <p>11. Percentage of clients accessing pastoral care/counseling through referral with documentation of follow-up and outcomes.</p>
<p>Provision of Services for Nutrition Counseling: Staff providing nutritional counseling should develop a care plan</p>	<p>12. Percentage of clients receiving nutrition counseling with a care plan to include client goals.</p>

<p>at the time of intake that includes the goals of nutritional counseling.</p> <p>Staff should complete progress notes for each session attended that include a brief description of topics discussed and progress toward meeting the objectives outlined in the care plan.</p>	<p>13. Percentage of clients receiving nutrition counseling with progress notes present for each session attended.</p>
<p>Closure: Agencies may determine that an individual no longer needs psychosocial support services if one or more of these criteria is met:</p> <ul style="list-style-type: none"> • Counseling or group attendance is no longer necessary • Client elects to discontinue participation • Client demonstrates non-attendance, as defined by agency policy and procedure • Client is deceased <p>Staff should document case closure in the client record, including the reason for case closure.</p>	<p>14. Percentage of closed cases with documentation in the client record of case closure, including the reason for the closure.</p>

References:

Division of Metropolitan HIV/AIDS Programs, HIV/AIDS Bureau (HAB). [Ryan White HIV/AIDS Program \(RWHAP\) National Monitoring Standards for RWHAP Part A Recipients](#). Health Resources and Services Administration, June 2023.

Division of State HIV/AIDS Programs, HIV/AIDS Bureau (HAB). [Ryan White HIV/AIDS Program \(RWHAP\) National Monitoring Standards for RWHAP Part B Recipients](#). Health Resources and Services Administration, June 2023.

Ryan White HIV/AIDS Program. [Policy Notice 16-02: Eligible Individuals & Allowable Uses of Funds](#). Health Resources & Services Administration, 22 Oct. 2018.