

**READJUSTMENT COUNSELING SERVICE (RCS)
VET CENTER PROGRAM**

- 1. REASON FOR ISSUE.** This Veterans Health Administration (VHA) Handbook establishes procedures for the Department of Veterans Affairs (VA) Readjustment Counseling Service (RCS).
- 2. MAJOR CHANGES.** This Handbook provides guidance for the administration of the Readjustment Counseling Services.
- 3. RELATED ISSUES.** VHA Directive 1500.
- 4. RESPONSIBLE OFFICE.** The Office of the Chief Readjustment Counseling Officer (15) is responsible for the content of this Directive. Questions may be directed to (202) 461-6525.
- 5. RESCISSIONS.** VHA Manual M-12, Parts I and II are rescinded.
- 6. RECERTIFICATION.** This VHA Handbook is scheduled for recertification on or before the last working day of September 2015.

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CONTENTS

READJUSTMENT COUNSELING SERVICE

PARAGRAPH	PAGE
1. Purpose.....	1
2. Background and Authority.....	1
3. Scope.....	1
4. Mission, Values and Services	2
5. Responsibilities of the Chief Readjustment Counseling Officer	4
6. Responsibilities of the Regional Manager	4
7. Responsibilities of the Team Leader.....	4
8. Readjustment Counseling Service Administration	4
9. Vet Center Administrative Responsibilities.....	6
10. Vet Center Quality Management	8
11. Suicide Prevention and Critical Event Monitoring.....	9
12. Specifications of Vet Center Readjustment Services.....	10
13. Vet Center Record Documentation	11
14. Contract for Fee Program.....	11

READJUSTMENT COUNSELING SERVICE

1. PURPOSE

This Veterans Health Administration (VHA) Handbook outlines requirements for VHA Readjustment Counseling Services (RCS) provided at Vet Centers nationwide. It delineates the salient components of readjustment counseling to facilitate quality services to combat Veterans and their families and other eligible Veterans. Vet Center services are Veteran centric and located in safe, confidential, and easy to access locations. *NOTE: The requirements outlined within this Handbook are supported by three documents specific to RCS titled: Guidelines and Instructions for Vet Center Administration; Guidelines and Instructions for Vet Center Client Record; and Guidelines and Instructions for Vet Center Contract for Fee Program. Appropriate sections of these guidelines and instructions are referenced within the Handbook for further information. The guidelines and instructions are available to RCS staff only at this internal VA Web site <https://rcs.med.va.gov>, not available to the public.*

2. BACKGROUND AND AUTHORITY

The Vet Center Program is recognized as the first program to address the psychological and social sequela of combat and armed conflict related problems. Before the official recognition of Post-Traumatic Stress Disorder (PTSD) by the American Psychiatric Association in 1980, the Vet Center Program set the course for leading the Department of Veterans Affairs (VA) recognition and treatment of war-related PTSD. Authority for Readjustment Counseling to Vietnam Veterans originated from Public Law 96-22 and subsequent legislation amends readjustment counseling services. Current law authorizing readjustment counseling is contained in title 38 U.S.C. § 1712A. Under 38 U.S.C. § 1712(e)(3), contracting authority for readjustment counseling and related mental health services is effective for any fiscal year only to the extent and amounts that are provided for in appropriations Acts.

3. SCOPE

a. This Handbook delineates core components of readjustment counseling services available at every VA Vet Center to serve war Veterans and their immediate family members. A Vet Center is a VHA program and is a community-based site of care that is under the line authority of the RCS. Each Vet Center has a multi-disciplinary staff with at least one staff member that is a VHA mental health professional.

b. Vet Centers provide outreach, direct readjustment counseling services, and refer Veterans to local services. The program is designed to provide easy to access services with minimal bureaucratic barriers to counter the effects of stigma in accessing mental health services. These services are provided in confidential (separate system of records: Federal Register, Volume 74, Number 116, 6/18/2009), easy to access, Veteran friendly community-based locations. This Handbook describes the services, staff qualifications, and the quality review procedures used to ensure Veterans receive quality care.

4. MISSION, VALUES, AND SERVICES

a. **Vet Center Mission Statement.** "We are the people in VA who welcome home war Veterans with honor by providing readjustment counseling in a caring manner. Vet Centers understand and appreciate Veterans' war experiences while assisting them and their family members toward a successful post-war adjustment in or near their community."

b. **Vet Center Values**

(1) **Veteran Centric Care** - Extend Vet Center capacity to provide quality readjustment counseling services to eligible Veterans and their families in or near their respective communities.

(2) **Quality of Care** - Optimize outreach and services to transitioning military and all eligible Veterans.

(3) **Community-Based Care** - Promote Veteran health care information, education, and access to care.

(4) **Delivery of Cost Effective & Accountable Services** - Continuously improve Vet Center psychosocial services that go beyond medical care by optimizing the availability and efficient use of resources and services.

(5) **Health, Wellness, and Preventive Services** - Maintain and augment collaborative relationships with VA agencies and organizations beyond VA to ensure optimal and holistic services for Veterans and their families.

(6) **Culturally Competent Services** - Enhance outreach and delivery of services by maintaining and promoting a diverse work force that reflects the local Veteran community and their respective needs for service.

c. **Vet Center Services**

(1) Vet Centers serve Veterans and their families by providing a continuum of quality care that adds value for Veterans, families, and communities. Vet Centers play a crucial role in VA Veteran focused/centric spectrum of care. Fulfillment of the mission is contingent on the presence of war or conflict Veteran staff on Vet Center teams. Services include:

- (a) Individual and group counseling for Veterans and their families;
- (b) Family counseling for military-related issues;
- (c) Bereavement counseling for families who experience an active duty death;
- (d) Counseling and referral for conditions related to Military Sexual Trauma;

(e) Outreach and education including Post-Deployment Health Reassessment (PDHRA) events, other community events, etc;

(f) Substance abuse assessment and referral;

(g) Employment assessment and referral;

(h) Referral to the Veterans Benefits Administration (VBA) for benefits assistance; and

(i) Screening and referral for medical and mental health issues.

(2) The Vet Center service mission goes beyond, and complements traditional medical care, by addressing all of the Veteran's war-related psychosocial service needs, including employment, career, and family readjustment issues.

(3) Based on legislative intent, the Vet Center service mission is designed to remove all unnecessary barriers to care for combat Veterans and their family members.

(4) Vet Centers are the forefront in VA for providing quality outreach to war Veterans whether they are current Servicemembers or those who will need readjustment services in the future. The "post" in PTSD indicates that the onset may occur at a later date so continuum of care is essential. The outreach provides a personal contact with many Veterans who may not be accessing care due to the effects of PTSD, sexual trauma, or stigma of accessing mental health care.

(5) Vet Centers maintain a positive "welcome home" attitude that promotes customer service in a Veteran friendly, non-bureaucratic environment.

(6) Veterans are welcomed to the Vet Center without an appointment. All Veterans need to be assessed on their current status. Clinical emergencies need to be treated immediately, however, if no emergent needs are identified, a follow up appointment will be set up for the Veteran.

(7) Upon request from Veterans, Vet Centers will maintain non-traditional appointment schedules, after normal business hours during the week and on weekends, to accommodate working Veterans and family members.

(8) Vet Center services and staff composition need to reflect the community they serve in a culturally competent fashion.

(9) Vet Centers provide a safe and confidential place for Veterans to talk that helps mitigate the effects of stigma on combat and sexually traumatized Veterans.

5. RESPONSIBILITIES OF THE CHIEF READJUSTMENT COUNSELING OFFICER

The Chief Readjustment Counseling Officer reports to the Principle Deputy Under Secretary for Health in VA Central Office and functions as the national chief operating officer for the Vet Center Program. In this capacity, the Chief Officer stewards the Vet Center Program through strategic planning activities with senior level VA officials and ensures appropriate coordination of readjustment counseling services with other VA service functions. The Chief Officer serves as the primary policy expert for the Veterans Health Administration on combat trauma and readjustment counseling issues. The Chief Officer maintains direct line authority over all Vet Center staff. **NOTE:** See *Guidelines and Instructions for Vet Center Administration, Section 1, part A*.

6. RESPONSIBILITIES OF THE REGIONAL MANAGER

RCS Regional Managers (RMs) report to the Chief Officer and are responsible for supervising all Vet Center clinical, administrative, and contracting operations in their respective regions. They are responsible for selecting and supervising Vet Center Team Leaders (TLs), fiscal management and execution of Vet Center budgets, and monitoring Vet Center performance for compliance with national VA, VHA and RCS Handbooks and Directives. **NOTE:** See *Guidelines and Instructions for Vet Center Administration, Section 1, part B*.

7. RESPONSIBILITIES OF THE TL

The TL reports to the RM and is charged with the overall responsibility for Vet Center operations including staff supervision, administrative and fiscal operations, outreach events, community relations, and clinical programs. Additionally, TLs recruit and select all subordinate staff with second-level approval from the RM. **NOTE:** See *Guidelines and Instructions for Vet Center Administration, Section 1, part C*.

8. READJUSTMENT COUNSELING SERVICE ADMINISTRATION

a. **Vet Center Collaboration with VA Medical Facilities.** Vet Centers promote collaborative partnerships with the medical facilities to better serve the Veteran and their families by a Veteran-focused and centered model. Vet Centers rely on the medical facilities for supportive liaisons.

(1) Every Vet Center is aligned with a VA medical facility for support with fiscal, human resources, contracting, acquisition, and engineering service functions.

(2) The local VA Chief Information Officer has the responsibility to provide Information Technology (IT) support for all tenant organization, including Vet Centers.

(3) All Vet Centers must have both an administrative and a clinical liaison official from the support VA medical facility. **NOTE:** See *Guidelines and Instructions for Vet Center Administration, Section 1, part D, Subsection 1*.

b. **VA Medical Center Mental Health Councils.** Vet Center staff need to participate on all VA Medical Center Mental Health Councils. *NOTE: VHA Handbook 1160.01, "Uniform Mental Health Services in VA Medical Centers and Clinics," directs each VA medical facility to establish a Mental Health Executive Council and encourages facilities to include representation from Vet Centers.* Because of the importance of coordinating the care for Veterans served by VA medical facilities and Vet Centers, the Patient Care Services Office of Mental Health Services requires Vet Center participation on Mental Health Councils. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 1, part D, Subsection 2.*

c. **Vet Center Facilities.** Vet Centers are charged by law with providing readjustment counseling to eligible combat Veterans who request such services to assist them in achieving a successful readjustment and transition to civilian life.

(1) **Staffing.** Vet Centers are staffed by multi-disciplinary teams consisting of a TL, an office manager, and one or more counselors. Depending on local Veteran need, the Vet Center may be augmented by specialized staff to support the Vet Center Mission. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, part A, Subsection 1B.*

(2) **Staffing Composition.** To maximize the service delivery potential of a small multi-disciplinary team, RCS selecting officials are responsible to critically review educational background, experience, licensure, training and skills to ensure that recruitment efforts are in balance with the service needs of the local Veteran population. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, part A, Subsection 1B.*

(3) **Site Selection.** Vet Centers are located within the community they serve in order to maximize Veterans' ease of access to readjustment counseling services. Vet Centers are strategically located to provide maximum access to Veterans and families within their Veterans Service Area (VSA). RCS utilizes Veteran population by county found in VetPop2007, VA's official estimate and projection of the Veteran population and their characteristics from 4/1/2000 to 9/30/2036, when evaluating potential Vet Center sites. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, Part D.*

(4) **Lease Requirement.** Each Vet Center must have private office space for each counselor and the TL suitable for confidential counseling, at least one group counseling room, an office for the office manager, which affords privacy for sensitive administrative functions, and a waiting area that is comfortable for Veterans and family members. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, Part A, Subsection 1C & 1D.*

(5) **Record Security.** The Vet Center must have a secure double locked room for the storage of confidential client records that meets the physical requirements in VA Handbook 0730. The Vet Center must have locked space within the facility to support IT equipment. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, Part A, Subsection 1E.*

(6) **Appearance.** The interior décor of Vet Centers needs to convey a welcoming and safe environment. Display of military artwork and/or memorabilia may be used to promote appreciation of military service. Vet Center waiting areas need to devote space for displaying a

wide variety of information to assist Veterans and their families. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, Part A, Subsection 1F.*

d. **Vet Center Community Outstations and Satellites.** To promote additional points of access to better serve Veterans, RCS has developed community outstations sites. These locations provide additional access to services for Veterans and their families. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, Part A, Subsection 2.*

e. **Vet Center Veterans Service Areas (VSA).** Each Vet Center has an assigned VSA and is responsible for developing a comprehensive plan for providing outreach and readjustment counseling to the Veteran population within its VSA. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, Part B.*

f. **Mobile Vet Centers (MVC).** RCS maintains a fleet of MVCs to support readjustment counseling services for combat Veterans and their families. These vehicles are utilized to provide outreach and direct readjustment counseling at active military, Reserve, and National Guard demobilization activities. Although maintained by a specific Vet Center the MVC is assigned a VSA larger than the host Vet Center in order to cover the entire continental United States. The RM is responsible for the appropriate and effective utilization of the MVCs assigned to their region. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, part C.*

g. **Vet Center Combat Veteran Call Center.** The Call Center is staffed 24 hours a day, 7 days a week by combat Veteran peers to provide support and referral information for Veterans and family members regarding the full range of readjustment issues following service in a combat zone. All calls are treated in a confidential environment. The Call Center has the capability to provide immediate phone connection (warm transfer) to the VA National Suicide Hotline for crises, and to the VA Tele-Nurse Hotline for medical issues. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, part E.*

9. VET CENTER ADMINISTRATIVE RESPONSIBILITIES

a. **Eligibility Determination.** As prescribed by law, the Secretary of Veterans Affairs is required to provide readjustment counseling to eligible Veterans and families of all combat theaters and areas of hostilities who request such services to assist them in readjusting to civilian life. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, Part F, Subsection 1.*

b. **Recruitment and Selection of Vet Center Staff.** Recruitment and selection of RCS personnel is established through VA personnel regulations and procedures (VA Handbook 5005), and is fully vetted through Human Resources Management Service (HRMS) at the VA support facility. In addition, RCS requires second-level approval for all selections (regional approval for all non-supervisory field staff, national approval for all TLs and regional staff). **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, Part F, Subsection 2.*

c. **Auxiliary Staff Placements.** To promote quality, ease of access, and coordination of care to local Veterans, the Vet Centers may provide on-site accommodations for additional authorized community service providers. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, Part F, Subsection 4.*

d. **Memorandum of Understanding (MOU).** The Vet Center needs to develop an MOU with the VA medical facility when co-locating with a community-based outpatient clinic (CBOC) and when establishing internships outside of established psychology and social work agreements. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, Part F, Subsection 4.*

e. **Fiscal Management.** RCS is responsible for the full and effective utilization of the program's annually assigned budget. The budget is allocated at the beginning of each fiscal year and distributed to VA field facilities that support Vet Center operations. Each Vet Center is supported by Fiscal Service at the local VA support facility for day-to-day management of the operating budget. TLs are responsible for the appropriate formulation and complete utilization of the individual Vet Center budget. The RM is responsible for the appropriate formulation and complete utilization of the overall regional budget. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, Part F, Subsection 5.*

f. **Management of Administrative Critical Events.** Vet Centers report Critical Events that have national administrative implications for Vet Center operations. Critical Events include natural disasters, significant public relations events that involve the media, serious vandalism or theft, and requests for visits by Congressional officials, Senior Veterans' Service Organization (VSO) officials, or by Senior VA officials, or any actions by Vet Center employees that have implications for client abuse and the potential for adverse personnel actions against the employee. Staff must use VA Form 119, *Report of Contact*, and submit to their respective Regional Offices for review and communicating with RCS Central Office. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, Part F, Subsection 6.*

g. **General Services Administration Vehicles.** Each Vet Center is assigned at least one GSA vehicle for outreach and other functions. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, Part F, Subsection 7.*

h. **Vet Center Leases.** In general, Vet Centers operated in leased space and sites are chosen to maximize access to care for the greatest number of Veterans in the VSA. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, Part F, Subsection 8.*

i. **Vet Center Relocation.** RCS will initiate proceedings to relocate a Vet Center when a change in the character of the lease, the leased space or in the adjacent neighborhood impairs access to and/or the quality of care to Veterans. **NOTE:** *See Guidelines and Instructions for Vet Center Administration, Section 2, Part F, Subsection 9.*

j. **Client Confidentiality and the Management of Protected Health Information.** Vet Centers have a legislated system of records that ensures confidentiality for Vet Center clients. The Vet Center system of records is published in the Federal Register, Volume 74, Number 116, 6/18/2009. **NOTE:** See *Guidelines and Instructions for Vet Center Administration, Section 2, Part F, Subsection 10.*

k. **Vet Center VIP Briefing Package.** Each Vet Center is required to maintain an updated standard briefing package to be furnished to visitors, elected officials, top VA officials, media representatives, and other distinguished visitors, as appropriate. **NOTE:** See *Guidelines and Instructions for Vet Center Administration, Section 2, Part F, Subsection 11.*

l. **Regional Personnel Report.** RMs are required to submit a monthly Personnel Report to the Chief Officer, RCS, detailing personnel and adverse actions within their region. **NOTE:** See *Guidelines and Instructions for Vet Center Administration, Section 2, Part F, Subsection 12.*

10. VET CENTER QUALITY MANAGEMENT

a. **Quality Management (QM) and Patient Safety.** The QM and Patient Safety Program offices have issued policy regarding QM and Patient Safety activities that can generate confidential documents. This policy provides information about which quality management activities are automatically protected by 38 U.S.C. § 5705 and which require affirmative action on the part of the facility in order to be protected. Additional guidance for each quality management activity is provided in Directives and Handbooks on VHA publications web sites, internet site <http://www1.va.gov/vhapublications/index.cfm> and intranet site <http://vaww1.va.gov/vhapublications/index.cfm>.

b. **Ethical Standards for Vet Center Staff Interactions with Veteran Clients.** All Vet Center staff must adhere to federal government, VA, and any applicable professional ethical standards. **NOTE:** See *Guidelines and Instructions for Vet Center Administration, Section 2, Part G, Subsection 1.*

c. **Vet Center Quality Reviews.** Each Vet Center is required to have an administrative and clinical quality assurance site visit annually. Vet Centers with a contract for fee program are required to have an additional site visit. **NOTE:** See *Guidelines and Instructions for Vet Center Administration, Section 2, Part G, Subsection 2.*

d. **Mental Health Professional Staffing.** Every Vet Center is required to have at least one VHA qualified mental health professional on staff. **NOTE:** See *Guidelines and Instructions for Vet Center Administration, Section 2, Part G, Subsection 3.*

e. **Clinical Supervision.** The TL, or clinical designee (if the TL is not a VHA Mental Health Professional), is responsible for providing individual counseling supervision to Vet Center counselors on an ongoing and regularly recurring basis. It is the responsibility of the individual staff member to maintain a professional license in situations when it is a condition of employment. **NOTE:** See *Guidelines and Instructions for Vet Center Administration, Section G, Part E, Subsection 4.*

f. **External Clinical Consultation.** Every Vet Center is required to have an assigned external clinical consultant. External consultants must be VHA-qualified mental health professionals who are licensed and have completed the credentialing process. *NOTE: A staff member at the supporting VA medical facility is preferred.* RCS will pursue the services of a private sector professional in situations where a VA medical facility professional is logistically not feasible. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, Part G, Subsection 5.*

g. **Vet Center Client Follow-up Questionnaire.** Follow-up questionnaires are required to be sent to Veteran clients at the time of case closing. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section G, Part E, Subsection 6.*

h. **Staff Training and Experience Profiles (STEP).** A STEP must be completed on all Vet Center staff providing services to Veterans. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, Part G, Subsection 7.*

i. **Staff In-Service Training.** All Vet Center staff must receive readjustment counseling training annually. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, Part G, Subsection 8.*

j. **Staff Credentialing and Privileging.** RMs must ensure credentialing of VHA mental health professionals in their region. To ensure compliance with VHA policy regarding credentialing and privileging, supporting VA medical facilities need to work with RCS to ensure credentialing of all appropriate Vet Center staff. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, Part G, Subsection 9.*

11. SUICIDE PREVENTION AND CRITICAL EVENT MONITORING

a. **Vet Center Critical Event Plans.** Every Vet Center must develop an internal plan outlining guidance regarding critical events. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, Part G, Subsection 10A.*

b. **Vet Center After Business Hours Plan.** Every Vet Center is required to have, at a minimum, a telephone answering machine, providing a 24-hour response when the Vet Center is not in operation. The recorded message must provide Veteran callers with a telephone number to be called in case of crisis and may include one or more of the following:

- (1) Local VA medical facility with Emergency Response;
- (2) VHA National Suicide Prevention Hotline; and
- (3) Vet Center Combat Call Center.

NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, Part G, Subsection 10B.

c. **Clinical Critical Event Reporting.** Upon knowledge of a critical event, the Vet Center staff must immediately report to the Regional Office. The Crisis Reporting Form must be completed within 24 hours and reported to the RM and RCS Central Office within 48 hours. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, Part G, Subsection 10C.*

d. **Vet Center Suicide and Serious Attempt Critical Incident Quality Reviews.** A Critical Incident Quality Review must be conducted for active clients when the Vet Center or a RCS contract provider is the only VA care provider. For Veterans accessing care only at the Vet Center, the support VA medical facility must assist by providing a staff psychiatrist, or appropriate designee from outside the VA, to participate on the review board. Quality reviews for suicide or serious suicide attempts for clients shared with VA medical facilities are the responsibility of the VA medical facility. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, Part G, Subsection 10C.*

e. **Procedures for Participation on a Root Cause Analysis (RCA) for Shared Clients with VA Medical Facilities.** RCA is the quality improvement procedure for reviewing suicide completions of Veteran patients in VA medical facilities. For clients accessing care at a VA medical facility and a Vet Center, Vet Center staff need to assist by participating on the RCA panel. When an RCA is conducted on a mutual client, the VA medical facility needs to provide the relevant outcomes of the review to Vet Center staff. *NOTE: See Guidelines and Instructions for Vet Center Administration, Section 2, Part G, Subsection 10C.*

12. SPECIFICATION OF VET CENTER READJUSTMENT SERVICES

All Vet Centers and outstations must provide outreach, counseling, and referral services. Vet Center providers base their practice on evidence of treatment effectiveness. Providers receive continuing education to maintain clinical expertise in their area of practice:

- a. PTSD Counseling;
- b. Individual Counseling;
- c. Group Counseling;
- d. Family Counseling;
- e. Counseling for mental health conditions related to Military Sexual Trauma;
- f. Bereavement Counseling;
- g. Employment and Educational Counseling;
- h. Referral Services;
- i. Community Networking;

- j. Outreach;
- k. Crisis Response;
- l. Emergency Response (natural or man made disasters);
- m. Homeless Assessment and Referral; and
- n. Substance Abuse Assessment and Referral.

13. VET CENTER RECORD DOCUMENTATION

a. **Vet Center Client Record.** The Vet Center client record is the method of tracking the Veteran client's course of treatment, level of functioning, and progressive readjustment problem resolution. To ensure quality assurance, the client record must be properly documented and maintained in compliance with established clinical standards. **NOTE:** *See Guidelines and Instructions for Vet Center Client Records, Appendix A and B.*

b. **Vet Center Client Record Contents.** The Vet Center client record must contain:

(1) **A Psychosocial Assessment.** **NOTE:** *See Guidelines and Instructions for Vet Center Client Records, Appendix A3.*

(2) **A Treatment Plan.** **NOTE:** *See Guidelines and Instructions for Vet Center Client Records, Section A3.*

(3) **The Veteran Information Form (VIF).** **NOTE:** *See Guidelines and Instructions for Vet Center Client Records, Appendix B2.*

(4) **Quality Indicators.** The quality indicators used for Vet Center clients are The Psycho-Social Focus Severity Rating (PFSR) and the Global Assessment of Functioning (GAF) Follow-up Contact and Questionnaire. **NOTE:** *See Guidelines and Instructions for Vet Center Client Records, Appendix B.*

(5) **Significant Other Notes.** **NOTE:** *See Guidelines and Instructions for Vet Center Client Records, Appendix B6.*

(6) **Case Closing Summary.** **NOTE:** *See Guidelines and Instructions for Vet Center Client Records, Appendix B6.*

(7) **Progress Note Description Assessment Plan (DAP).** **NOTE:** *See Guidelines and Instructions for Vet Center Client Records, Appendix B8.*

14. CONTRACT FOR FEE PROGRAM

a. **Contract for Fee Program Responsibility.** RCS is authorized to contract with qualified private sector providers for the provision of readjustment counseling to eligible Veterans

(Public Law 96-22 and subsequent amendments as found in 38 U.S.C. § 1712A). By law, eligibility for readjustment counseling contract services includes any Veteran who served in a combat theater of operations. RCS contract programs are designed to improve access to care for rural Veterans living at a distance from existing Vet Centers where the need exists. **NOTE:** See *Guidelines and Instructions for Vet Center Contract for Fee Program, Section 1.*

b. **Eligibility.** Eligibility for RCS contract readjustment counseling is limited by law to Veterans who served in a theater of combat operations. To be eligible, Veterans must also have been discharged under honorable conditions or with a character of service for which basic eligibility to receive VA benefits has been established through adjudicative decision by VA. **NOTE:** See *Guidelines and Instructions for Vet Center Contract for Fee Program, Section 2)*

c. **Referral for Contract for Fee Program.** Referrals to readjustment counseling contract providers may only be made by qualified Vet Center staff: the Contracting Officer Technical Representative (COTR), other Vet Center counselors designated by the COTR, and/or the RM, the Deputy RM, and the Associate RM for Counseling Manager. Within the scope of the Vet Center program mission, referrals to contract providers must be solely for psychological counseling for social and psychological military-related readjustment problems. The latter problems must be clearly related to combat military duty and post-military readjustment to civilian life. Contract providers are prohibited from providing general mental health services. **NOTE:** See *Guidelines and Instructions for Vet Center Contract for Fee Program, Section 3.*

d. **Management of Contract Provider Authorizations.** After eligibility has been verified and the need for readjustment counseling clinically established, the COTR must complete and sign VA Form 10-5565b, Readjustment Counseling Service Contract Services Authorization, which officially effects a referral to a contract service provider. The completion and disposition of VA Form 10-5565B is to be implemented according to the instructions on the form. **NOTE:** See *Guidelines and Instructions for Vet Center Contract for Fee Program, Section 4.*

e. **Contract Program Fiscal Management Procedures.** TL COTRs, working in coordination with Fiscal Service and the Contracting Officer, will be held accountable for full and effective utilization of their contract program budget to provide readjustment counseling services to eligible Veterans. **NOTE:** See *Guidelines and Instructions for Vet Center Contract for Fee Program, Section 5.*