

PROPOSAL FOR TELE-MENTAL HEALTH SERVICES

KATHLEEN BLACK BROERE

MASTER OF EDUCATION

LICENSED CLINICAL PROFESSIONAL COUNSELOR

MARRIAGE AND FAMILY THERAPIST

80 CATHY'S COVE DILLON, MT. 59725

Cell number: (406)229-1849

Email: kathleenbroerelcpcmft@gmail.com

Proposal for Tele-Mental Health Services for the Browning School District 2023-2024 Fiscal Year



Purpose: A cost-effective way to continue to provide quality mental health services to students, faculty, and their families.

Services:

- Provide confidential, quality, and assessable mental health services via telehealth for up to twenty sessions per month.
- Provide an opportunity for families to participate in their child's therapy via Family Counseling.
- Partner and work with school personnel to address specific concerns for students, i.e. trauma, behavior, etc.
- During vacations, I would continue seeing clients. If they are unable to make the appointments during the vacation period, I would "check-in" in a confidential manner that best fits the clients. Continue Therapy during summer months.
- Provide mental health services to district employees.
- Provide continued supervision of Licensed Clinical Professional Counselor Candidates.

Expenses I am responsible for:

- Provided at my cost, my own Professional Liability insurance.
- Provided at my cost, my own Tribal Business License.
- Provide at my cost, my own State Business License.
- Provided at my cost, my yearly renewal of my two professional licenses.
- Provided at my cost, Subscription to Simple Practice, an online service that provides confidential scheduling, client portal, confidential tele-mental health, and third-party billing.
- Travel
- Office and all other overhead expenses
- Additional hours of counseling above the proposed 20 sessions per month, which averages 3 to 5 hours per month.

Compensation: The cost for the district will be \$2000.00 per month for twelve months, to be renegotiated at the end of the fiscal year. The parties recognize this is a base salary, which covers expenses for 20 sessions per month. Additional clients will be billed by me via a third party; ex. Medicaid or private insurance.

Thank you for this opportunity. I look forward to continuing our partnership, as we work together to have a positive impact on the lives of our students, school, and community.